Form 990
(Rev. January 2020)
Department of the Treasury

** PUBLIC DISCLOSURE COPY **

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 19 **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 for instructions and the latest information.

AF	or the	and 2019 calendar year, or tax year beginning OCT 1, 2019 and	ending S	EP 30, 2020			
B c a	heck if	e: C Name of organization		D Employer identifie	cation number		
	Addres	e BOYS AND GIRLS CLUBS OF METRO DENVER INC					
	Name Chang	Doing business as	84-0510404				
	Initial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	r		
	Final			303-892-9200			
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	27,770,174.		
	Ameno	DENVER, CO 80204		H(a) Is this a group re	eturn		
	Applic tion	^{a-} F Name and address of principal officer: ERIN PORTEOUS		for subordinates	? 🖸 Yes 🕱 No		
	pendir	⁹⁹ 2017 W. 9TH AVENUE, DENVER, CO 80204		H(b) Are all subordinates in	ncluded? Yes No		
Т	ax-exe	empt status: 🗴 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1)	or 📃 527	If "No," attach a	list. (see instructions)		
J٧	Vebsit	ee: WWW.BGCMD.ORG		H(c) Group exemption	n number 🕨		
ΚF	orm of	organization: 🗴 Corporation 🔄 Trust 🦳 Association 🦲 Other 🕨	L Year	of formation: 1961 N	State of legal domicile: CO		
Pa	art I	Summary					
ø	1	Briefly describe the organization's mission or most significant activities: SEE SC	HEDULE O.				
anc							
Governance		Check this box 🕨 📖 if the organization discontinued its operations or dispo			ssets.		
Ň	3	Number of voting members of the governing body (Part VI, line 1a)			47		
		Number of independent voting members of the governing body (Part VI, line 1b)		47			
es		Total number of individuals employed in calendar year 2019 (Part V, line 2a) \ldots		400			
ivit	6	Total number of volunteers (estimate if necessary)		888			
Activities &	7a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.			
			Prior Year				
е		Contributions and grants (Part VIII, line 1h)		12,625,392.	18,912,097.		
Revenue		Program service revenue (Part VIII, line 2g)		2,115.	1,309,746.		
Bev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,127,356.	509,838.		
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,335,379.	5,116,247.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,090,242.	25,847,928.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		18,578.	56,276.		
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,516,533.	10,500,378.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		137,241.	651,900.		
ğ		Total fundraising expenses (Part IX, column (D), line 25) 3,259,					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,585,952.	7,170,215.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		16,258,304.	18,378,769.		
	19	Revenue less expenses. Subtract line 18 from line 12		831,938.	7,469,159.		
s or nces			Be	ginning of Current Year	End of Year 58,317,594.		
Assets (Balanc	20	Total assets (Part X, line 16)	47,318,				
Net As Fund E	21	Total liabilities (Part X, line 26)	🖵	2,812,863.	5,357,238.		
		Net assets or fund balances. Subtract line 21 from line 20		44,505,703.	52,960,356.		
Pa	art II	Signature Block					

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

Sign	Signature of officer			Date
Here	VICKY MILES, CHIEF FINANCIAL OFFI	CER		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	KRISTIN CALDER			self-employed P01720813
Preparer	Firm's name 🕒 KUNDINGER, CORDER & ENGL	E, P.C.		Firm's EIN 🕨
Use Only	Firm's address 👞 475 LINCOLN STREET, SUIT	'E 200		
	DENVER, CO 80203		Phone no.303-534-5953	
May the II	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No
932001 01-2	20-20 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2019)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1990 (2019) BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	SEE SCHEDULE O.	
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, a	as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$4,211,815. including grants of \$24,183.) (Reve	enue \$ 1,306,499.)
	ACADEMIC SUCCESS (SEE SCHEDULE O)	
4b	(Code:) (Expenses \$5,439,865. including grants of \$16,047.) (Reve	enue \$3,247.)
	HEALTHY LIFESTYLES (SEE SCHEDULE O)	
4c	(Code:) (Expenses \$ 3,365,952. including grants of \$ 16,047.) (Revelopments)	enue \$)
	CHARACTER AND LEADERSHIP (SEE SCHEDULE O)	
4d	Other program services (Describe on Schedule O.)	,
	(Expenses \$ including grants of \$) (Revenue \$ Table are service as a finite service as a finite service)
40	Total program service expenses ► 13,017,632.	Form 990 (2019)

Form **990** (2019)

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Form	990	(2019)

BOYS AND GIRLS CLUBS OF METRO DENVER INC

Page 🤅	1
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Pa	t IV Checklist of Required Schedules			ugo o
	· ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
U	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	•		
Ŭ	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	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	10		
	as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a		11a	x	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
D D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	x	
•	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
h	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	TIC		- 21
u		114		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	x	А
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Tie	А	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	4 4 4		х
10-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		А
128	· · · · · ·	10-	x	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	А	
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a		148		А
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			
		446		x
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b		- 23
15		45		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		А
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
47		16		А
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47	v	
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		v	
~	complete Schedule G, Part III	19	X	v
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		Х
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			v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
28	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	21		
20	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a	x	
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f	200		
-	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	L
Fal				
	Check if Schedule O contains a response or note to any line in this Part V			
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 3C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
с	(gambling) winnings to prize winners?	10	х	
		1c		L

Part V Statements Regarding Other IRS Filings and Tax Compliance (controued) Yes No 2a Enter the number of employees reported on form W-3, Transmittal of Wage and Tax Statements. 2a 400 5 If the candrary ver ording with or within the vagar coverade by the roturn 2a 3a 2a X 3a Det the candrary ver ording the vagar coverade by the roturn 2a 3a 2a X 3b Det the candracter on the 2a, did the organization have an interest in, or a signature or other authority over, a francial account? 3a 3a X 4a A ary time during the calendary year, did the organization have an interest in, or a signature or other authority over, a francial accounts (FBAP). 5a X 5a U Yes, 'enter the name of the foreign Country France is account, ary other Maxematian a ary time during the tax yes? 5a X 5a U Ary taxable party notify the organization that is account for a diverse is a condition the arganization that are statement that such continutions or gifts were not tax docubles and annual goes receipts that are formality greater than \$100,000, and dith erganization and the acgo account for the advert for a conthabule tax shellow transaction? 5a X 5b D dith organization neadvera as conthabule and party for goods and sarvises	Form	990 (2019) BOYS AND GIRLS CLUBS OF METRO DENVER INC 84-0510404		Р	age 5		
2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements. 2a 400 b If at least one is reported on line 2a, did the organization file all regular dederal employment tax returns? 2b X Note: If the sum of line 2a, did the organization file all regular dederal employment tax returns? 2a X Note: If the sum of line 2a, did the organization file all regular dederal employment tax returns? 3a X a Dat the organization have unsated business groome of 51 000 or more during the year? 3b X b If "Yes," rest title and from 900 Tro this year? /f 'Vor to <i>line 3b, provide an explanation</i> or Scheduld 0 3b 4a Se instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FIAP). 5a X D dar y taxable party notify the organization that twas or is a party to a prohibited tax shelter transaction? 5c X D or any taxable party notify the organization the from 8896 T? 5c X D or any taxable party notify the organization that twas or is a party to a prohibited tax shelter transaction any contributions shell the organization nearly from 6005 or services provided T be party? 5c X D or any taxable party notify the organization the tax wear of the organization shell the organization fee fore 8896 T Tog	Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
Internet for the calendary year anding with or within the year covered by this return Image: Team of the sequence of the sequen				Yes	No		
b If a teast one is reported on line 2a, did the organization file all required to efficie enstructions] 2b X 3a Dot the organization have unclated business gross income of \$1,000 or more during the year? 3a 3a X 3b Dot the organization have unclated business gross income of \$1,000 or more during the year? 3a X 3b I' Yes, "that if field a Form 900 T for this year? If Wo' to line 3b, provide an explonation on Schedule O 3a X 3b I' Yes, "that if field a Form 900 T for this year? If Wo' to line 3b, provide an explonation on Schedule O 3a X 3b I' Yes, "that if field a Form 900 T for this year? I' Wo' to line 3b, provide an explonation the atthoring field account? 5a X 3c Was the organization have annual root serve at the field fiel	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note: If the sum of lines 1a and 2 is greater than 250, your may be required to <i>e-Me</i> (see instructions) Image: Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec.		filed for the calendar year ending with or within the year covered by this return 2a 400					
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 4a At any time during the calendar year, did the organization have an intensit in, or a signature or other authority over, a financial account? 4a X bit 1*Yes, 'has it filed a Form 300-017 for this year? bit 1*Yes, 'has it filed a Form 300-017 for this year? 5a X bit 1*Yes, 'near the name of the toreign country (such as a bank account, account, or other financial account? 4a X bit 1*Yes, 'near the name of the toreign country (such as a bank account, ar other financial account? 5a X bit 1*Yes, 'near the name of the organization faith form 8306.77. 5a X 5a X bit 1*Yes, 'no sit the organization have annual gross receipts that are normally greater than \$100,000, and dd the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X bit 1*Yes, 'idd the organization induct with every solicitation an exposes statement that such contributions or gifts were not tax deductible? 7a X bit 1*Yes, 'idd the organization induct with every solicitation are spressonal benefit contract? 7a X bit 1*Yes, 'idd the organization induct with every solicitation are spressonal benefit contract? 7a X corganization ceves asyment mexess of \$57 made parity as a contribu	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?					
b If "Yes," that is filed a Form 990-T for this year? If "No" to line 3b, provide an exploration on Schedule 0 3b 4a At any time during the calendar year, do the organization have an interest in, or a signature or other authority over, a financial account in a toreign country (such as a bank account securities account; or other financial account)? 4a X b If "Yes," enter the name of the foreign country (Such as a bank account securities account; or other financial accounts (FBAR). 5a X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X 5b Did any taxable party notify the organization that the was or is a party to a prohibited tax shelter transaction? 5c 5c 6a Did any taxable party notify the organization that the was or is a party to a prohibited tax shelter transaction an express statement that such contributions or gifts were not tax deductible: as charitable contributions? 7a X 7 Toganization shet may receive deductible contributions and statify as contribution and party for goods and services provided to the payo? 7a X 10 Wes, "data bear year, statify and party as a contribution of quantitation set, and year and year 7c X 10 Wes, "data bear year, statify and party as a contribution of quantitation set or statify and year 7c X 10		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
4a All any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a x bit 11 'vse, 'reter the name of the foreign country (such as a bank account, securities account, or other financial account)? 4a x See instructions for finCEN Form 114, Report of Foreign Bank and Financial Accounts (FRAP). 5a x 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a x 5b 11 'vse, 'inter the name of the organization that it was or is a party to a prohibited tax shelter transaction? 5b x 6b Does the organization a party to a prohibited inter shelter transaction? 5a x 7c Dit 114, See, 'idd the organization that it was or is a party to a prohibited tax shelter transaction? 5a x 7c Dit 114, 'idd the organization calcular where yeolication an a party to aprohibited tax shelter transaction? 5a x 7c Organization that may receive deductible contributions? 7a x x 8d the organization notify the doror of the value of the goads or services provided? 7a x 9d the organization calcular of the value of the goads or services provided? 7a x 11 'vse,' indicate the number of Forms B282?	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х		
francial accourt, a treign courty (such as bark accourt, securities accourt, or other financial accourt)? 4a X b If 'Yes, ' enter the name of the foraign county > See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accourts (FBAR). See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accourts (FBAR). See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accourts (FBAR). See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accourts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? See instructions for filing requirements for finceN form 114, Report of Foreign Bank and Financial Accourts (FBAR). See instructions for filing requirements for finceN form 114, Report of Foreign Bank and Financial Accourts (FBAR). See instructions for filing requirements for finceN form 114, Report of Foreign Bank and Financial Accourts (FBAR). 5a Ust the organization include with every solication an express statement that such contributions or gifts were not tax deductible contributions or darity for pods and services provided to the part? To X b If 'Yes,' idid the organization necel way finds, directly or indirectly, to pay premiums on a personal benefit contract? Te X c If 'Yes,' idid the organization necel way finds, directly or indirectly, to nay personal benefit contract? Te X d If 'Yes,' idid the organization make any table distribution and expressof benefit contract? Te X	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
b If "Yes," enter the name of the foreign country. The set instructions for fing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Set was the organization a party to a prohibited tax shelter transaction? Set X D Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Set X If 'Yes' to line Sa or 50, ald the organization that it was or is a party to a prohibited tax shelter transaction? Set X Ga Does the organization have annual gross necepits that are normally greater than \$100,000, and did the organization solid any contributions that may receive deductible contributions and earns to provided to the party? Set X D If 'Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? Set X D If 'Yes," did the organization notify the door of the value of the goods or services provided? To X D If 'Yes," did the organization notify the door of the value of the goods or services provided? To X D If 'Yes," indicate the number of Forms 8282 filed during the year Zd To X D D the organization neceive a party that any bas shows the during the year? Set X Yes, '' all '''''''''''''''''''''''''''''''	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a					
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?							
	16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х		

Form **990** (2019)

Form	990 (2019) BOYS AND GIRLS CLUBS OF METRO DENVER INC		84-0510404		P	age 6
Pai	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C). See	instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
		_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	47			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	47			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other			
	officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		х
4	Did the organization make any significant changes to its governing documents since the prior Form S			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	-	-	8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					
			,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	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 bod			11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,	0			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	х	
	Other officers or key employees of the organization			15b	х	
	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 arranger	nent w	vith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, a	nd 990)-T (Section 501(c)(3)s only) avail	able
-	for public inspection. Indicate how you made these available. Check all that apply.		,	, j	,	-
	Own website Another's website I Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			d finar	ncial	
	statements available to the public during the tax year.		, <i>,</i> ,			
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	id records 🕨			
	VICKY MILES - 303-892-9200					
	2017 W. 9TH AVENUE, DENVER, CO 80204					

Form 990 (2	2010/		CLUBS OF MET			84-0510404	Page 7		
Part VII	Compensation of O	fficers, Dir	ectors, Trust	ees, Key	Employees, Highest Com	pensated			
	Employees, and Independent Contractors								
	Check if Schedule O cont	ains a respons	e or note to any	ine in this F	Part VII				
Section A.	Officers, Directors, Tru	stees, Key Em	ployees, and Hi	ghest Corr	pensated Employees				
1a Comple	ete this table for all persons	s required to be	e listed. Report c	ompensatio	n for the calendar year ending with	or within the organization	ı's tax vear.		

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

	1 1	1 90								
(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior more	1 than	one	Reportable	Reportable	Estimated
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	hours for	or di	e.			ated		organization	(W-2/1099-MISC)	from the
	related	istee	truste		e	pensi		(W-2/1099-MISC)		organization
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	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
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(1) DAVID HURTADO	10.00									0
CHAIR	F 00	X		X				0.	0.	0.
(2) AMY PARSONS	5.00									
VICE-CHAIR		х		x				0.	0.	0.
(3) NANCY THONEN	5.00								_	_
SECRETARY		х		x				0.	0.	0.
(4) DAN BALL	0.50									
TRUSTEE		х						0.	0.	0.
(5) JIM BERSHOF	0.50									
TRUSTEE		Х						0.	0.	0.
(6) MARC BRAUNSTEIN	0.50									
TRUSTEE		х						0.	0.	0.
(7) BRITTANY BOWLEN	0.50									
TRUSTEE		х						0.	0.	٥.
(8) CHRISTOPHER CARDENAS	0.50									
TRUSTEE		х						0.	Ο.	Ο.
(9) RASHEEDAH CARR	0.50									
TRUSTEE		x						0.	0.	Ο.
(10) MAX CAULKINS	0.50									
TRUSTEE		x						0.	0.	Ο.
(11) BOB CLARK	0.50									
TRUSTEE		x						0.	٥.	٥.
(12) JEANNE COLLOPY	0.50									
TRUSTEE		x						٥.	٥.	٥.
(13) MARC DIAMANT	0.50									
TRUSTEE		x						0.	0.	Ο.
(14) BRIAN HOLLAND	0.50									
TRUSTEE		x						0.	0.	0.
(15) AVRUM ELMAKIS	0.50					1				
TRUSTEE		x						0.	0.	0.
(16) SCOTT EVANS	0.50									
TRUSTEE		x						0.	0.	0.
(17) JASON FLETCHER	0.50									
TRUSTEE		x						0.	0.	0.
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(24) JORDAN JHAEVALA 0.50 x 0 0 0 0 TRUSTEE 0.50 x 0 0 0 0 0 TRUSTEE 0.50 x 0 0 0 0 0 0 TRUSTEE 0.50 x 0 125,504 3 3 125,504 3 3 125,504 3 </td <td></td> <td>0.50</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td></td> <td>0</td> <td></td> <td></td> <td>0</td>		0.50							0		0			0	
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TRUSTEE x 0.		0.50							· ·		<u> </u>			••	
(26) FRANZ KETTWIG 0.50 x 0. <td< td=""><td></td><td></td><td>x</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td></td><td>Ο.</td><td></td><td></td><td>0.</td></td<>			x						0.		Ο.			0.	
1b Subtotal 0	(26) FRANZ KETTWIG	0.50							-					-	
10 Control 125 0 125,504 2 Total from continuation sheets to Part VII, Section A 10 125,504 10 125,504 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 5 5 1 125,504 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a' <i>I'</i> "ks," complete Schedule <i>J</i> for such individual 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>II</i> "Yes," complete Schedule <i>J</i> for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from the organization or individual for services rendered to the organization? <i>I'</i> "Yes," complete Schedule <i>J</i> for such person 4 X 5 Did any person listed on line 1a receive or accrue compensated independent contractors that received more than \$100,000 of compensation from the organization? <i>I'</i> "Yes," complete Schedule <i>J</i> for such and the organization or individual for services 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 19	TRUSTEE		x						0.		Ο.			Ο.	
c Total from continuation sheets to Part VII, Section A Image: Section A Section B <	1b Subtotal					•			0.		0.			0.	
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 5 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual									827,515.		0.		125	,504.	
compensation from the organization 5 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such person 5 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services 5 X 5 Did any person listed 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. (C) Complete Schedule Sched	d Total (add lines 1b and 1c)								827,515.		0.		125	,504.	
Yes No 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a; if "yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual	2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) wł	no r	received more than \$100	,000 of reportable					
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual. 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? If "Yes," complete Schedule J for such person 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. (C) Name and business address Description of services Compensation 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than 1	compensation from the organization													5	
a line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 5 X 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization's tax year. 6 CC) (A) (B) (C) Compensation Name and business address Description of services 190, 437. 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190, 437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than 190, 437.											ŗ		Yes	No	
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? If "Yes," complete Schedule J for such individual															
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such person 5 I X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) (A) (B) (C) Name and business address Description of services Compensation NZ CONSULTING 190,437. 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than U U	line 1a? If "Yes," complete Schedule J for s	uch individual										3		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? If "Yes," complete Schedule J for such person 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. (B) (C) Name and business address Description of services Compensation NZ CONSULTING 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than 1										the organization		-			
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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) (B) (C) Compensation Name and business address Description of services Compensation NZ CONSULTING 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than		-				-			-			-		v	
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) (B) (C) Name and business address Description of services Compensation NZ CONSULTING 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 1 0 0 0 0 0 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's tax year.		piete Scriedui	eji	ors	ucn	pers	son .					5		~	
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation NZ CONSULTING 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. Image: Construct of the calendar year ending with or within the organization's tax year. Image: Construct of the calendar year ending with or within the organization's tax year. Image: Construct of the calendar year ending with or within the organization's tax year. Image: Construct of the calendar year ending with or within the organization of the calendar year ending with or within the organization's tax year. Image: Construct of the calendar year ending with or within the organization's tax year. Image: Construct of the calendar year ending with organization of the calendar year ending withe calendar year endits withe calendar year ending with organizati		mnensated in	don	anda	ont c	ont	racto	re	that received more than	\$100.000 of comr	one	ation	from		
(A) (B) (C) Name and business address Description of services Compensation 33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437. 190,437. 190,437. 190,437. 2 Total number of independent contractors (including but not limited to those listed above) who received more than 1		-									0113	ation	lioni		
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33 WOODLAND AVENUE, SAN FRANCISCO, CA 94117 RAFFLE MARKETING SERVICES 190,437.		address								ervices	С			n	
Total number of independent contractors (including but not limited to those listed above) who received more than	NZ CONSULTING														
	33 WOODLAND AVENUE, SAN FRANCISCO, CA	94117							RAFFLE MARKETING S	ERVICES			190	,437.	
	O Total numbers of instances in the second second	a alvalia a l		· • • •	ا ام	1 1-	• c ."		 						
		•	iut II	IIIICE	u 10			stec	u abovej who received m	ore than					

	RLS CLUBS OF								84-051040	4
Part VII Section A. Officers, Directors, T		nplo	byee			ligh	est			<i>(</i> _)
(A)	(B)		(C) Position					(D)	(E)	(F)
Name and title	Average	6					1.0	Reportable	Reportable	Estimated
	hours per		nec: T	(all)	that	t apply) compensation from			compensation from related	amount of other
	week					ee			organizations	compensation
	(list any	ctor				nploy		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ed en		(W-2/1099-MISC)	,	organization
	related	stee o	'ustee			ien sat				and related
	organizations	al tru:	onal tr		loyee	comp				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) LAURIE KORNEFFEL	line)	=	Ë	5	Ъ	王	요			
TRUSTEE	0.50	x						0.	0.	0.
(28) RJ MCARTHUR	0.50								•	
TRUSTEE		x						0.	0.	0.
(29) BRIAN MCDONALD	0.50								- •	
TRUSTEE		x						0.	0.	0.
(30) MARC MCDONOUGH	0.50								- •	
TRUSTEE		x						0.	0.	0.
(31) CHRIS STOEBER	0.50									
TRUSTEE		x						0.	0.	0.
(32) ANDREW MORRISON	0.50									
EX-OFFICIO		x						Ο.	0.	0
(33) JEFF NELLIGAN	0.50									
TRUSTEE		x						0.	0.	0.
(34) VALERI PAPPAS	0.50									
TRUSTEE		х						0.	0.	0.
(35) BRENT POWERS	0.50									
TRUSTEE		X						0.	0.	0.
(36) CHRIS RAPP	0.50									
TRUSTEE		X						0.	0.	0
(37) STEVE RICHARDS	0.50									
TRUSTEE		X						0.	0.	0.
(38) WARREN SCHLICHTING	0.50									
TRUSTEE		х						0.	0.	0
(39) MARTY SCHMITZ	0.50								•	
TRUSTEE	0.50	X						0.	0.	0
(40) BENJAMIN SCHULEIN TRUSTEE	0.50	x						0.	0	0
(41) JOE SMITH	0.50	^						U.	0.	0
TRUSTEE	0.50	x						0.	0.	0
(42) BOB SHOPNECK	0.50	^		-				· ·	0.	0.
TRUSTEE	0.50	x						0.	0.	0.
(43) JOE SLAVIK	0.50	<u> </u>			\vdash					
TRUSTEE		x						0.	0.	0.
(44) WALKER STAPLETON	0.50				1				-•	
TRUSTEE		x						0.	0.	0.
(45) KENT STEMPER	0.50				1					
TRUSTEE		x						0.	0.	0.
(46) MICHAEL TOUFF	0.50				1					
TRUSTEE		x						0.	0.	0.
			•	•		-		1	-	

Form 990 BOYS AND C Part VII Section A. Officers, Directors	GIRLS CLUBS OF							Compensated Employ	84-051040	1
(A)	(B)	(D)	(E)	(F)						
Name and title	Average				C) ition	1		Reportable	Reportable	Estimated
	hours	(c	hecł				lv)	compensation	compensation	amount of
	per	(-					· <i>,</i> ,,	from	from related	other
	week					yee		the	organizations	compensatio
	(list any	ector				mplo		organization	(W-2/1099-MISC)	from the
	hours for	or din	Ð			ited e		(W-2/1099-MISC)		organization
	related	stee (ruste		0	pensa				and related
	organizations	ial tru	onal t		oloye	com				organizations
	(list any hours for related organizations below line)	dividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) JOE VAN HASELEN	0,50	=	-	5	ž	王	ß			
RUSTEE	0.50	x						0.	0.	
(48) JENNIFER FEDORA	0.50									
RUSTEE (THRU 5/2020)	0.50	x						0.	0.	
(49) DAVID HOERMAN	0.50	^		-		-		••	0.	
RUSTEE (THRU 5/2020)	0.50	x						0.	0.	
	40.00	^						υ.	υ.	
(50) ERIN PORTEOUS	40.00	1		.				222.217	0.	30.00
CEO	40.00	<u> </u>	-	X	<u> </u>			222,217.	U.	30,26
(51) PHILLIP A. BLOISE CFO (THRU 06/2020)	40.00			x				161 022	0.	25.04
(52) KATHY A. LUNA	40.00			^				161,922.	υ.	35,04
COO (THRU 12/2019)	40.00			x				184,686.	0.	27,06
(53) BRYNJA SEAGREN	40.00			^				104,000.	υ.	27,00
	40.00							107 160	0.	10 07
CHIEF HUMAN RESOURCES OFFICER	40.00					X		127,169.	υ.	18,87
(54) SHERRI KROONENBERG	40.00							101 501	0	14.00
CHIEF PROGRAM OFFICER						x		131,521.	0.	14,26
		-								
		-								
		-								
				<u> </u>						
		-								
		L		 	<u> </u>					
		1								
		1								
otal to Part VII, Section A, line 1c								827,515.		125,5

ar	t VIÌ		even	ue			NVER INC		84-0510404	Pag
		Check if Schedule O	conta	ains a respo	nse	or note to any lin	e in this Part VIII			Γ
							(A)	(B)	(C)	(D)
							Total revenue	Related or exempt		Revenue exclu
								function revenue	business revenue	from tax und sections 512 -
0		<u> </u>								
and Other Similar Amounts		Federated campaigns								
		Membership dues								
A	С	Fundraising events		1c		761,202.				
ar	d	Related organizations		1d		360,000.				
Ē		Government grants (cont				2,876,231.				
ō		All other contributions, gifts,								
	•	similar amounts not included				14,914,664.				
5	~					816,021.				
	-	Noncash contributions included in				,	10 010 007			
σ	h	Total. Add lines 1a-1f					18,912,097.			
						Business Code				
	2 a	CONTRACT REVENUE				900099	1,306,499.	1,306,499.		
ъ	b	PROGRAM FEES				900099	3,247.	3,247.		
	с									
BV6	d									
Revenue										
	e					├ ──── ├			┨─────┦	
		All other program service					1 200 515			
+		Total. Add lines 2a-2f					1,309,746.			
	3	Investment income (inclu	ding	dividends, i	ntere	est, and				
		other similar amounts)				►	675,118.			675,3
	4	Income from investment	of ta>	-exempt bo	nd p	oroceeds 🕨				
	5	Royalties		-	-	F				
	•			(i) Real		(ii) Personal				
	~ -	Overes vente	0	() 100						
		Gross rents				<u> </u>				
		Less: rental expenses \dots				├ ────┤				
	С	Rental income or (loss)	6c							
	d	Net rental income or (loss	s) <u> </u>		<u></u>	►				
	7 a	Gross amount from sales of		(i) Securit	es	(ii) Other				
		assets other than inventory	7a							
	h	Less: cost or other basis		1						
	5		7b	165,2	0.80					
		and sales expenses								
		Gain or (loss)	7c	-165,2		-				
		Net gain or (loss)			. <u></u>	····· 🕨	-165,280.			-165,
	8 a	Gross income from fundrais		-	1					
		including \$	761	,202. of	1					
		contributions reported or			1					
		Part IV, line 18			8a	68,156.				
	h	Less: direct expenses			8b	· · · · · · · · · · · · · · · · · · ·				
							0.			
		Net income or (loss) from		-		▶	υ.			
	9 a	Gross income from gamir								
		Part IV, line 19			9a					
	b	Less: direct expenses			9b	1,688,810.				
		Net income or (loss) from			s	►	4,902,599.			4,902,
		Gross sales of inventory,								
	-	and allowances			10a					
	h	Less: cost of goods sold			10a					
+	С	Net income or (loss) from	sale	s of invento	у					
						Business Code				
- L.	11 a	MISCELLANEOUS				900099	213,648.			213,
e l	b									
suue										
evenue	c							Į.	1 1	
Hevenue	с	All other revenue								
Revenue	c d	All other revenue Total. Add lines 11a-11d					213,648.			

BOYS AND GIRLS CLUBS OF METRO DENVER INC

84-0510404

Page 10

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).

Do not	Check if Schedule O contains a respons	(A)	(B)	(C)	<u>x</u>
	, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	rants and other assistance to domestic organizations nd domestic governments. See Part IV, line 21				
2 G	rants and other assistance to domestic				
	dividuals. See Part IV, line 22	56,276.	56,276.		
	rants and other assistance to foreign	,	,		
	rganizations, foreign governments, and foreign				
	dividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,				
	ustees, and key employees	413,008.	82,602.	330,406.	
	ompensation not included above to disqualified	110,000.	01,001.		
	ersons (as defined under section $4958(f)(1)$) and				
	ersons described in section 4958(c)(3)(B)	0 040 716	6 006 160	472 010	740 626
	ther salaries and wages	8,040,716.	6,826,168.	473,912.	740,636
	ension plan accruals and contributions (include				
	ection 401(k) and 403(b) employer contributions)	358,731.	242,518.	107,798.	8,415
	ther employee benefits	1,077,427.	778,685.	260,775.	37,967
0 P	ayroll taxes	610,496.	509,569.	48,519.	52,408
11 Fe	ees for services (nonemployees):				
a M	lanagement				
b Le	egal				
сА	ccounting				
	obbying				
	rofessional fundraising services. See Part IV, line 17	651,900.			651,900
f In	vestment management fees				· · · · ·
	ther. (If line 11g amount exceeds 10% of line 25,				
•	blumn (A) amount, list line 11g expenses on Sch O.)	1,901,768.	427,653.	570,276.	903,839
	dvertising and promotion	126,512.	1,948.	2,938.	, 121,626
	ffice expenses				,
	formation technology				
	oyalties	474,493.	417,239.	45,192.	12,062
		/	,	· · · · ·	12,002
	ravel	82,774.	79,213.	3,561.	
	ayments of travel or entertainment expenses				
	or any federal, state, or local public officials				
19 C	onferences, conventions, and meetings	194,964.	168,737.	16,506.	9,721
	terest				
21 P	ayments to affiliates				
22 D	epreciation, depletion, and amortization	813,201.	669,654.	143,547.	
2 3 In	surance	177,157.	168,168.	8,989.	
at lir	ther expenses. Itemize expenses not covered bove (List miscellaneous expenses on line 24e. If the 24e amount exceeds 10% of line 25, column (A) nount, list line 24e expenses on Schedule 0.)				
	ASS-THROUGH GRANTS	1,374,888.	1,374,888.		
~ <u> </u>	UPPLIES	1,155,853.	848,803.	51,821.	255,229
~ _	THER	456,116.	31,675.	12,762.	411,679
	OOD SERVICE	242,309.	241,513.	796.	,575
· -		170,180.	92,323.	24,032.	53,825
	Il other expenses	,	,	,	
	otal functional expenses. Add lines 1 through 24e	18,378,769.	13,017,632.	2,101,830.	3,259,307
	bint costs. Complete this line only if the organization				
	ported in column (B) joint costs from a combined				
	ducational campaign and fundraising solicitation.				
Cł	neck here X if following SOP 98-2 (ASC 958-720)				

Form 990 (AND	GIRLS	CLUBS	OF	METRO	DE
Part X	Balance Sheet						

Гd	rt X	Balance Sheet						
		Check if Schedule O contains a response or	note to a	any line	in this Part X	(A)		
						Beginning of year		End of year
	1	Cash - non-interest-bearing					1	3,816,408
	2	Savings and temporary cash investments				4,788,611.	2	5,188,377
	3	Pledges and grants receivable, net				1,355,398.	3	1,193,507
	4	Accounts receivable, net					4	83,790
	5	Loans and other receivables from any curren						
		trustee, key employee, creator or founder, su	ubstantia	al contrib	outor, or 35%			
		controlled entity or family member of any of t	these pe	rsons			5	
	6	Loans and other receivables from other disquere	ualified p	persons	(as defined			
		under section 4958(f)(1)), and persons descr	ibed in s	ection 4	958(c)(3)(B)		6	
ţs	7	Notes and loans receivable, net					7	
Assets	8	Inventories for sale or use					8	
Ä	9	Prepaid expenses and deferred charges				438,685.	9	314,803
	10a	Land, buildings, and equipment: cost or othe						
		basis. Complete Part VI of Schedule D	10a	a	31,379,742.			
	b	Less: accumulated depreciation			12,340,373.	18,737,457.	10c	19,039,369
	11	Investments - publicly traded securities				16,192,366.	11	22,536,741
	12	Investments - other securities. See Part IV, lin				5,731,049.	12	6,129,599
	13	Investments - program-related. See Part IV, li			13			
	14	Intangible assets				15,000.	14	15,000
	15	Other assets. See Part IV, line 11				60,000.	15	0
	16	Total assets. Add lines 1 through 15 (must e				47,318,566.	16	58,317,594
	17	Accounts payable and accrued expenses				1,275,539.	17	1,634,082
	18	Grants payable		18				
	19	Deferred revenue		537,324.	19	868,966		
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Comple					21	
ŝ	22	Loans and other payables to any current or f	former of	fficer, di	rector,			
Ě		trustee, key employee, creator or founder, su	ubstantia	al contrik	outor, or 35%			
Liabilities		controlled entity or family member of any of t	these pe	rsons			22	
	23	Secured mortgages and notes payable to un	related t	third par	ties		23	
	24	Unsecured notes and loans payable to unrel	ated thir	d parties	s		24	
	25	Other liabilities (including federal income tax,	, payable	es to rela	ated third			
		parties, and other liabilities not included on li	ines 17-2	24). Com	plete Part X			
		of Schedule D				1,000,000.	25	2,854,190
	26	Total liabilities. Add lines 17 through 25				2,812,863.	26	5,357,238
~		Organizations that follow FASB ASC 958,	check h	ere 🕨	X			
š		and complete lines 27, 28, 32, and 33.						
llan	27	Net assets without donor restrictions				28,192,941.	27	33,735,626
ñ	28	Net assets with donor restrictions				16,312,762.	28	19,224,730
nn		Organizations that do not follow FASB AS	ere 🕨 🗌					
Ē		and complete lines 29 through 33.						
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fur	nds				29	
sset	30	Paid-in or capital surplus, or land, building, o					30	
t As	31	Retained earnings, endowment, accumulated					31	
Net	32	Total net assets or fund balances			[44,505,703.	32	52,960,356
	33	Total liabilities and net assets/fund balances				47,318,566.	33	58,317,594

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Form **990** (2019)

OVS AND GIRLS CLUBS OF METRO DENVER INC

Form	990 (2019) BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				2
	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	25	,847	,928.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18	,378	,769.
3	Revenue less expenses. Subtract line 2 from line 1	3	7	,469	,159.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	44	,505	,703.
5	Net unrealized gains (losses) on investments	5		985	,494.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	52	,960	,356.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			l I
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047
2019
Open to Public

Inspection Employer identification numb

Name of the organization	
--------------------------	--

Tun		uic	organization						Employer			
_		_			OF METRO DENVER IN					4-0510404		
Pa	rt I		Reason for Public (Charity Status (A	All organizations must co	mplete th	is part.) Se	e instruction	S.			
The	orga	nizat	tion is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)					
1		A	church, convention of ch	urches, or associatio	n of churches described	d in sectio	n 170(b)(1	I)(A)(i).				
2		A	school described in secti	ion 170(b)(1)(A)(ii). (A	Attach Schedule E (Form	n 990 or 99	90-EZ).)					
3		1	hospital or a cooperative					ii).				
4		1	medical research organiza					-)(iii). Enter	the hospital's name,		
			y, and state:	•	, ,				~ /	1 ,		
5		1	organization operated for	or the benefit of a col	llege or university owned	d or operat	ted by a g	overnmental	unit describ	bed in		
·			ection 170(b)(1)(A)(iv). (C			a er epera						
6		1	federal, state, or local gov	• •	pental unit described in a	section 17	0(b)(1)(A)	(14)				
7	X	1	organization that normal	-					bo gonoral	public described in		
'			-	•	initial part of its support i	ion a you	erninentai		ne general	public described in		
•		1	ection 170(b)(1)(A)(vi). (Co	-								
8	\square	1	community trust describe									
9			agricultural research org				-		-	-		
			university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	/, and state o	t the colleg	e or		
		1	iiversity:									
10		Ar	organization that normal	lly receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	ind gross receipts from		
		ac	tivities related to its exem	npt functions - subjec	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of	its suppor	t from gross investment		
		inc	come and unrelated busir	ness taxable income	(less section 511 tax) fro	om busine	sses acqu	ired by the o	rganization	after June 30, 1975.		
		Se	e section 509(a)(2). (Cor	mplete Part III.)								
11		Ar	n organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).				
12		Ar	organization organized a	and operated exclusi	vely for the benefit of, to	perform t	the functio	ons of, or to c	arry out the	e purposes of one or		
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in											
		lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
а			Type I. A supporting orga	nization operated, si	upervised, or controlled	by its sup	ported org	ganization(s),	typically by	' giving		
		1	the supported organization	on(s) the power to rea	gularly appoint or elect a	a majority (of the dire	ctors or truste	ees of the s	supporting		
			organization. You must c							iii o		
b			Type II. A supporting orga	-		tion with it	s support	ed organizatio	on(s), by ha	ivina		
			control or management of	-				-		-		
			organization(s). You mus						age the eap	portou		
с			Type III functionally inte	-		in connec	tion with	and functions	llv integrat	ed with		
Ŭ			its supported organization						iny integration	ca with,		
ام									rtad argani	(a)		
d			Type III non-functionally						-			
			that is not functionally int			•		-	u an alleni	iveness		
_			requirement (see instructi	-								
е			Check this box if the orga					а туре ї, туре	ii, iype iii			
			functionally integrated, or		nally integrated support	ing organiz	zation.					
t			ne number of supported o	•								
g			the following information ame of supported	i about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount o	fmonotony	(vi) Amount of other		
		(1) 134	organization		(described on lines 1-10	in your governi	ng document?	support (see in		support (see instructions)		
			organization		above (see instructions))	Yes	No					
Tota	al											

Schedule A (Form 990 or 990 EZ) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC

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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	12,357,631.	13,556,578.	13,167,174.	12,625,392.	18,912,097.	70,618,872.
2	Tax revenues levied for the organ-						
	ization'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	864,821.	796,271.	816,920.	869,600.	918,380.	4,265,992.
4	Total. Add lines 1 through 3	13,222,452.	14,352,849.	13,984,094.	13,494,992.	19,830,477.	74,884,864.
	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,						
							13,731,273.
6							61,153,591.
	Public support. Subtract line 5 from line 4.						01,155,551.
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	13,222,452.	14,352,849.	13,984,094.	13,494,992.	19,830,477.	74,884,864.
	Gross income from interest,	13,222,432.	11,352,045.	13,501,051.	13,494,992.	19,000,477.	/1,001,001.
0							
	dividends, payments received on						
	securities loans, rents, royalties,	164 020	462 221	467 402	EE0 370	675 110	2 2 2 2 2 5 1
-	and income from similar sources	164,030.	463,231.	467,493.	552,379.	675,118.	2,322,251.
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.)	4,646,300.	3,982,113.	4,184,799.	3,764,974.	5,184,403.	21,762,589.
	Total support. Add lines 7 through 10						98,969,704.
	Gross receipts from related activities,		,			12	1,324,877.
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stop	here					
	ction C. Computation of Public		•				C1 = 2
	Public support percentage for 2019 (I					14	61.79 %
	Public support percentage from 2018					15	69.79 %
16a	33 1/3% support test - 2019. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2018. If the c						nis box
	and stop here. The organization qual						▶∟
17a	10% -facts-and-circumstances test	t - 2019. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pa	t VI how the organ	ization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a	publicly supported	l organization		▶□
b	10% -facts-and-circumstances test	t - 2018. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, ch	neck this box and s	stop here. Explain	in Part VI how the	•
	organization meets the "facts-and-circ	umstances" test.	The organization o	jualifies as a public	cly supported orga	anization	
18	Private foundation. If the organizatio						

Schedule A (Form 990 or 990-EZ) 2019

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Part II

Schedule A (Form 990 or 990-EZ) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
10	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	() 00/5	(1) 00 (0	() 00/-	(1) 00 (0)	() 00/0	(0
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	on 501(c)(3) organiz	zation,
	check this box and stop here	<u></u>	<u></u>	<u></u>			>
Se	ction C. Computation of Publi	ic Support Pe	ercentage				
15	Public support percentage for 2019 (li	ine 8, column (f),	divided by line 13,	column (f))		15	%
16	Public support percentage from 2018	Schedule A, Parl	t III, line 15			16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	19 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
	Investment income percentage from 2		- · · · · · · · -			18	%
	33 1/3% support tests - 2019. If the						
	more than 33 1/3%, check this box ar						
h	33 1/3% support tests - 2018. If the						and
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
		in and not oncor a		α , or rob, oncorr t			

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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 12a or 12b 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 (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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified 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.)

6 7 8 9a 9b 9c 10a 10b

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

	(Form 990 or 990-EZ) 2019					Or	MEIKO	DENVER	INC
Part IV Supporting Organizations (continued)									

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	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		
Sec	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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (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		
Sec	tion 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 yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	truction	s).	
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			
	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		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a				
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
-			-	-

Schedule A (Form 990 or 990-EZ) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 🔟 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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-functional	ly integra	ted Type III supporting org	ganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2	2019 BOYS	AND	GIRLS	CLUBS	OF	METRO	DENVER	INC
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	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	Fage /
Sect	ion D - Distributions		(continueu)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemption			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
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	ne organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019		Schedule A (Form 990 or 990-FZ) 20

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-EZ) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; F Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ad (See instructions.)	nes 1 and 2; Part IV, Sectio Part V, Section B, line 1e; F	on C.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

* *	PUBLIC	DISCLOSURE	COPY	* *

Schedule of Contributors

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

OMB No. 1545-0047

2019

Employer identification number

	BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404			
Organization type (chec	sk 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	on is covered by the General Rule or a Special Rule.				
Note: Only a section 50	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.			
General Rule					

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of	organization

Employer identification number

BOYS AND GIRLS CLUBS OF METRO DENVER INC

84-0510404

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$457,565.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$6,647,061.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,071,602.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$480,260.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$679,747.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (For	rm 990, 990-	EZ, or 990-P	F) (2019)
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Name of organization

Employer identification number

84-0510404

BOYS AND GIRLS CLUBS OF METRO DENVER INC

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Part II N	Ioncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
— <u>-</u> 		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Schedule B (Form 990	, 990-EZ, or 990-PF) (2019)
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Page 4

Name of or	ganization		Employer identification num
BOYS AND	GIRLS CLUBS OF METRO DENVER INC		84-0510404
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	hthrough (e) and the following line er charitable, etc., contributions of \$1,000 or	n section 501(c)(7), (8), or (10) that total more than \$1,000 for the entry. For organizations or less for the year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	
-	Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of git	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
 		(e) Transfer of git	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

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.



	ment of the Treasury I Revenue Service	►Go to www.irs.gov/Form9	Attach to Form 990. 90 for instructions and the latest information	Open to Public Inspection
	e of the organizati			Employer identification number
	-	BOYS AND GIRLS CLUBS OF MET	RO DENVER INC	84-0510404
Pa	rt I Organiza	ations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts.Complete if the
	_	on answered "Yes" on Form 990, Part IV, lin		·
				(b) Funds and other accounts
1	Total number at e	nd of year		
2		of contributions to (during year)		
3		of grants from (during year)		
4		at end of year		
5			writing that the assets held in donor advised fu	nds
	-		exclusive legal control?	
6			advisors in writing that grant funds can be used	
	•	u	or donor advisor, or for any other purpose confe	
	impermissible priv	ate benefit?		Yes No
Pa	rt II Conserv		ganization answered "Yes" on Form 990, Part I	
1	Purpose(s) of con	servation easements held by the organizat	ion (check all that apply).	
	Preservation	n of land for public use (for example, recrea	ation or education)	torically important land area
	Protection c	of natural habitat		tified historic structure
	Preservation	n of open space		
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a c	conservation easement on the last
	day of the tax yea			Held at the End of the Tax Year
а	Total number of c	onservation easements		2a
b				2b
с	Number of conser	vation easements on a certified historic str	ructure included in (a)	2c
d	Number of conser	vation easements included in (c) acquired	after 7/25/06, and not on a historic structure	
	listed in the Natior	nal Register		2d
3	Number of conser	vation easements modified, transferred, re	leased, extinguished, or terminated by the orga	inization during the tax
	year 🕨			
4	Number of states	where property subject to conservation ea	sement is located 🕨	
5	Does the organiza	tion have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and ent	forcement of the conservation easements i	it holds?	Yes 📖 No
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva-	tion easements during the year
	▶			
7	-	ses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	asements during the year
	▶\$			
8			ve satisfy the requirements of section 170(h)(4)	
9		•	ion easements in its revenue and expense state	
			note to the organization's financial statements	hat describes the
De	organization's acc	counting for conservation easements.	f Art Historical Tracquires or Other	Similar Acceta
Pa			f Art, Historical Treasures, or Other	Similar Assets.
<u> </u>	-	f the organization answered "Yes" on Form		
та	0	, ,	58, not to report in its revenue statement and b	
			blic exhibition, education, or research in further	ance of public
			ncial statements that describes these items.	
b	-		58, to report in its revenue statement and balan	
			c exhibition, education, or research in furtheran	ce or public service,
	-	ing amounts relating to these items:		
				• •
~				P D
2			easures, or other similar assets for financial gain	, provide
_	-	unts required to be reported under FASB A	-	
a L		l on Form 990, Part VIII, line 1		
n	ASSERS INCLUDED IN			, D

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Schedule D	(FOUIII 990)) 20 19

Sche	dule D (Form 990) 2019 BOYS AND GI	RLS CLUBS OF ME	TRO DENVER INC			84	-05104	04	Pa	age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or	r Other	Similar	Asse	ts (contir	nued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	following that	make sig	nificant us	se of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange progran	n					
b	Scholarly research	е	Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further t	he organizatior	n's exemp	ot purpose	e in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, historical trea	sures, or other	^r similar a	ssets		_		_
	to be sold to raise funds rather than to be ma						L	Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		te if the organizatio	n answered "Y	′es" on F	orm 990, I	Part IV,	line 9, or	•	
1 a	Is the organization an agent, trustee, custodi							Yes		No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII						····· └──	165	L	
D		and complete the fol	lowing table.					Amoun	t	
c	Beginning balance					1c		7 arrio arr		
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fe					?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on P	Part XIII]
Par	t V Endowment Funds. Complete in	f the organization and	swered "Yes" on Fo	orm 990, Part I	V, line 10					
		(a) Current year	(b) Prior year	(c) Two years	back (d) Three yea	rs back	(e) Four	' years	back
1a	Beginning of year balance	11,590,850.	11,432,807.	11,255,	,871.	9,339	9,884.	9	,084,	570.
b	Contributions	49,252.				1,136	5,890.			
с	Net investment earnings, gains, and losses	980,412.	486,583.	563,	,256.	1,151	L,175.		598,	647.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	297,805.	328,540.	386,	,320.	372	2,078.		343,	333.
f	Administrative expenses									
g	End of year balance	12,322,709.	11,590,850.		,807.	11,255	5,871.	9	,339,	884.
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1g, column (a	a)) held as:						
	Board designated or quasi-endowment		_%							
	Permanent endowment 95.87	%								
с	Term endowment	<i>,</i> -								
0-	The percentages on lines 2a, 2b, and 2c sho		the second s							
3a	Are there endowment funds not in the posse	ession of the organiza	tion that are held a	nd administere	ed for the	organizat	lon	I	Vaa	Na
	by:							20(1)	Yes	No X
	(i) Unrelated organizations							3a(i)	x	<u>л</u>
h	(ii) Related organizations	tions listed as require	nd on Schedule R2					3a(ii) 3b	x	
4	Describe in Part XIII the intended uses of the							56		
<u> </u>	t VI Land, Buildings, and Equipm									
	Complete if the organization answere		Part IV, line 11a, S	See Form 990.	Part X, lir	ne 10.				
	Description of property	(a) Cost or ot	· · · · · · · · · · · · · · · · · · ·	or other		umulated		(d) Boo	k valu	e
		basis (investm	• • •	(other)	• •	eciation		(, 200		
1a	Land	<u> </u>	<u> </u>	984,365.	·				984.	365.
	Buildings		26	,239,968.	:	8,749,30	01.	17	,490,	
	Leasehold improvements					•				
	Equipment		4	,026,247.	:	3,508,65	59.		517,	588.
	Other			129,162.		82,41	L3.		46,	749.
	. Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1	0c.)			►	19	,039,	369.
-							le e de de		- 0001	0040

Schedule D (Form 990) 2019

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) PERPETUAL TRUST MANAGED BY A THIRD		
(B) PARTY	155,118.	END-OF-YEAR MARKET VALUE
(C) INVESTMENTS HELD BY BGCMD FOUNDATION	4,195,853.	END-OF-YEAR MARKET VALUE
(D) RIVERBEND FUND, LLC	1,778,628.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	6,129,599.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part >	
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNSECURED BOND PAYABLE	1,000,000.
(3) PAYCHECK PROTECTION PROGRAM LOAN	1,854,190.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 2,854,190.

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.

Sche	dule D (Form 990) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER	84-0510404	Page 4		
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per R	eturn.	
	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	28,053,573.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	985,494.		
b	Donated services and use of facilities	2b	947,521.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	328,492.		
е	Add lines 2a through 2d			2e	2,261,507.
3	Subtract line 2e from line 1			3	25,792,066.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	55,862.		
b	Other (Describe in Part XIII.)	4b			
с			4c	55,862.	
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)			5	25,847,928.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat	ements With	Expenses per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total expenses and losses per audited financial statements			1	19,270,428.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	947,521.		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	947,521.
3	Subtract line 2e from line 1			3	18,322,907.
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				
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b	4c	55,862.		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	18,378,769.	
Pa	rt XIII Supplemental Information.				

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

PART V, LINE 4:

THE WILFLEY ENDOWMENT FUND IS HELD BY BGCMD FOUNDATION. THE EARNINGS ARE

RESTRICTED FOR GENERAL OPERATING EXPENSES OF BGCMD FACILITIES.

DISTRIBUTIONS ARE MADE IN ACCORDANCE WITH BGCMD'S DISTRIBUTION POLICIES.

THE HELEN AND ARTHUR E. JOHNSON ENDOWMENT FUND (THE FUND) WAS ESTABLISHED

TO SUPPORT THE GENERAL OPERATIONS OF THE CURRENT ARTHUR E. JOHNSON BOYS

AND GIRLS CLUB OR A NEW FACILITY THAT REPLACES THE CURRENT ARTHUR E.

JOHNSON BOYS AND GIRLS CLUB. THE FUND IS SUBJECT TO BGCMD'S ENDOWMENT AND

DISTRIBUTION POLICIES. DISTRIBUTIONS MAY BE MADE FROM THE FUND WITHOUT

REGARD TO THE ACTUAL INCOME OR HISTORIC DOLLAR VALUE OF THE FUND.

Part XIII	Supplemental	Inform
	(Form 990) 2019]

Schedule D (Form 990) 2019 BOYS AND GIRLS CLOBS OF METRO DENVER INC	84-0510404	Page 5
Part XIII Supplemental Information (continued)		
THE SHOPNECK ENDOWMENT WAS ESTABLISHED IN 2016 AND CONSISTS OF FOUR		
DONATED MORTGAGES AND CASH ON HAND. PER THE ENDOWMENT AGREEMENT BGCMD IS		
NOT TO MAKE ANY APPROPRIATIONS FOR THE FIRST TEN YEARS THAT THE ENDOWMENT		
IS HELD BY BGCMD.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
CHANGE IN NET ASSETS OF THE BGCMD FOUNDATION 328,492.		

SCHEDULE G	Suppleme	ental Information Regarding	Fun	drais	ing or Gaming A	\cti	vities	OMB No. 1545-0047		
(Form 990 or 990-EZ)	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.									
Department of the Treasury Internal Revenue Service	► Go	 ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 								
Name of the organization	lame of the organization Employer identification number									
BOYS AND GIRLS CLUBS OF METRO DENVER INC 84-0510404										
	complete this par	 Complete if the organization answer t. 	ered "Y	es" o	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not		
 a X Mail solicitat b X Internet and c X Phone solicitat d X In-person so 2 a Did the organization key employees list 	tions email solicitations tations blicitations on have a written o ted in Form 990, F	s f X Solicita g X Special or oral agreement with any individua Part VII) or entity in connection with p	tion of tion of fundra l (inclue	non-g gover aising ding o ional 1	overnment grants nment grants events fficers, directors, trus undraising services?	stees	X Yes			
b If "Yes," list the 10 compensated at le	•	viduals or entities (fundraisers) pursi e organization.	uant to	agree	ements under which t	he fu	undraiser is to	be		
.,	(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Activity (iii) Activity (iv) Gross receipts from activity (v) Ar to (or u					Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization			
NZ CONSULTING - 33			Yes	No X						
AVE, SAN FRANCISCO		RAFFLE CONSULTATION			6,591,409.		651,900	5,939,509.		
		on is registered or licensed to solicit		bution:	6 , 591 , 409 . s or has been notified	l it is	651,900 exempt from r	; ;		
								_		

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

Schedule G (Form 990 or 990-EZ) 2019

Schedule G (Eorm 000	000 E7	2010	BOYS	AND	GTRLS	CLUBS	OF	METRO	DENVER	TNC
Schedule G ((Form 990	J OF 990-EZ	2019	BOID	AND	GIVID	CTOPP	Or	MEIKO	DENVER	TINC

84-0510404 Page **2**

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		
			YOUTH OF THE YEAR		NONE	(add col. (a) through		
			GALA	BGCMD INVITATIONAL		col. (c)		
e			(event type)	(event type)	(total number)			
Revenue	1	Gross receipts	691,375.	137,983.		829,358.		
	2	Less: Contributions	641,804.	119,398.		761,202.		
	3	Gross income (line 1 minus line 2)	49,571.	18,585.		68,156.		
	4	Cash prizes						
ş	5	Noncash prizes						
xpense	6	Rent/facility costs						
Direct Expenses	7	Food and beverages						
	8	Entertainment						
	9	Other direct expenses	49,571.	18,585.		68,156.		
	10	68,156.						
11 Net income summary. Subtract line 10 from line 3, column (d)								
Pa	art I							
		\$15,000 on Form 990-EZ, line 6a.						
				(I-) Dull tobe/instant		(a) Tatal manala a (a dal		

Revenue			(a) Bingo (b) Pull tabs/instant bingo/progressive bingo		(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))				
Rev	1	Gross revenue			6,591,409.	6,591,409.				
es	2	Cash prizes			1,688,810.	1,688,810.				
Direct Expenses	3	Noncash prizes								
Direct F	4	Rent/facility costs								
	5	Other direct expenses								
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	X Yes 5.00 %					
	7		1,688,810							
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			4,902,599.				
9 Enter the state(s) in which the organization conducts gaming activities: CO										
a Is the organization licensed to conduct gaming activities in each of these states? X Yes No b If "No," explain:										
		ere any of the organization's gaming licenses re Yes," explain:	evoked, suspended, or te	erminated during the tax	year?	Yes X No				

Sch	edule G (Form 990 or 990-EZ) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC 84-05	10404		Page 3
	Does the organization conduct gaming activities with nonmembers?	X	Yes	No
	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	X No
13	Indicate the percentage of gaming activity conducted in:			
á	a The organization's facility	13a	1	00.00 %
I	o 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 LEAH MCFALL			
	Address 🕨 2017 W. 9TH AVENUE - DENVER, CO 80204			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗆	Yes	X No
	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
(If "Yes," enter name and address of the third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name STEVE KORELL			
	Gaming manager compensation 🕨 \$			
	Description of services provided RAFFLE OVERSIGHT.			
	Director/officer Employee X Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	x	Yes	L No
I	• 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 > \$ 4,902,599.			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, li	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
PAP	RT I, LINE 2B, COLUMN (V):			
PAY	MENTS FOR MARKETING SERVICES WERE MADE AS PART OF THE RAFFLE			
PRO	DMOTION.			

SCHEDULE I (Form 990) Department of the Treasury									
Internal Revenue Service			Go to www.ir	rs.gov/Form990 fo	or the latest inform	nation.		Inspection	
Name of the organization		S CLUBS OF MET	RO DENVER INC					Employer identification number 84-0510404	
Part I General	Information on Grants a	and Assistance							
criteria used to	nization maintain records a award the grants or assi	stance?							
	rt IV the organization's pro						(
	and Other Assistance to					anization answered "	res" on Form 990, Par	t IV, line 21, for any	
	that received more than			1		(f) Method of	(a) Description (
• •	address of organization overnment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
	nber of section 501(c)(3) a			ne line 1 table				🟲	
	nber of other organization			<u></u>				>	
LHA For Paperwo	rk Reduction Act Notice	e, see the Instructi	ions for Form 990.					Schedule I (Form 990) (2019)	

84-0510404

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	5	11,283.	0.		
RENT AND ESSENTIAL NEEDS ASSISTANCE FOR CLUB					
FAMILIES DURING THE COVID-19 PANDEMIC.	86	44,993.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

SCHOLARSHIPS: STUDENTS ARE GRANTED SCHOLARSHIPS BASED ON MERIT AND NEED.

ALL STUDENTS GRANTED SCHOLARSHIPS ARE REQUIRED TO SEND THE BOYS & GIRLS

CLUBS OF METRO DENVER THEIR GRADES AT THE END OF THE SCHOOL TERM. IF THE

STUDENTS FALL BELOW A 2.0 GPA OR IF THEY HAVE QUIT THEIR PROGRAMS, THEN

FUTURE GRANT FUNDS ARE DISALLOWED.

RENT AND ESSENTIAL NEEDS ASSISTANCE DURING COVID-19: CLUB STAFF IDENTIFIED

FAMILIES WHO WERE IN NEED AND THE EXTENT OF THE NEED. CLUB STAFF SUBMITTED

Part IV Supplemental Information

RECOMMENDATIONS TO A COMMITTEE WHO REVIEWED THE REQUESTS AND MADE DECISIONS

ON WHAT WOULD BE AWARDED. THE PAYMENT METHOD WAS DETERMINED (CHECK, CREDIT

CARD, ETC.) AND THE FINANCE TEAM PROCESSED THE REQUESTS.

SCHEDULE J	Compensation Information	OMB No	. 1545-00	47
(Form 990)	Compensated Employees)19	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.	Open	to Publ	ic
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		ection	
Name of the organizatio		Employer identification	tion nu	mber
	BOYS AND GIRLS CLUBS OF METRO DENVER INC	84 - 0510404		
Part I Question	s Regarding Compensation			
			Yes	No
1a Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed on Form	990,		
Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.			
First-class or o	charter travel Housing allowance or residence for person	naluse		
Travel for com	panions Payments for business use of personal res	sidence		
Tax indemnific	ation and gross-up payments Health or social club dues or initiation fees	5		
Discretionary	spending account Personal services (such as maid, chauffeu	ır, chef)		
	on line 1a are checked, did the organization follow a written policy regarding payment or			
	provision of all of the expenses described above? If "No," complete Part III to explain	1b	\square	
2 Did the organizatio	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?			
	ny, of the following the organization used to establish the compensation of the organization's			
	ector. Check all that apply. Do not check any boxes for methods used by a related organizati	ion to		
establish compens	ation of the CEO/Executive Director, but explain in Part III.			
Compensatior				
	compensation consultant			
Form 990 of o	ther organizations	ommittee		
	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
organization or a re		4-	x	
	e payment or change-of-control payment?			x
	ceive payment from, a supplemental nonqualified retirement plan?		<u> </u>	X
	ceive payment from, an equity-based compensation arrangement?		-	<u>^</u>
If "Yes" to any of lif	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only contion 501/	(2) 501(c)(4) and 501(c)(20) argumentations must complete lines 5.0			
	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
contingent on the r		5-		x
a me organization? b Any related ergeni-	ation?	5a 5b	+	X
	ation? or 5b, describe in Part III.			
	-	on la		
	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation bet earnings of:			
contingent on the r		6a		x
	ation?		+	X
	ation? or 6b, describe in Part III.			
	-			
	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		x	
	nes 5 and 6? If "Yes," describe in Part III			
•	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the partian departies in Part III.			x
	eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		+	Δ
	id the organization also follow the rebuttable presumption procedure described in	9		
	n 53.4958-6(c)?	Schedule J (For		0010
	eduction Act Notice, see the Instructions for Form 990.	Schedule J (FO	111 990	12019

Schedule J (Form 990) 2019

84-0510404

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(b)(I)-(D)	reported as deferred on prior Form 990
(1) ERIN PORTEOUS	(i)	197,217.	25,000.	0.	17,701.	12,562.	252,480.	0
CEO	(ii)	0.	0.	0.	0.	0.	0.	0
(2) PHILLIP A. BLOISE	(i)	151,922.	10,000.	0.	15,309.	19,731.	196,962.	0
CFO (THRU 06/2020)	(ii)	0.	Ο.	0.	0.	0.	0.	0
(3) KATHY A. LUNA	(i)	134,686.	50,000.	0.	11,158.	15,905.	211,749.	0
COO (THRU 12/2019)	(ii)	0.	Ο.	0.	0.	0.	0.	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4A:

PHILLIP BLOISE: \$25,000

PART I, LINE 7:

THE BGCMD PROVIDED NON-FIXED BONUS PAYMENTS TO ITS EMPLOYEES TOTALING

\$45,000. INCLUDED IN THE BONUS POOL ARE PAYMENTS TO THE EMPLOYEES LISTED ON

SCHEDULE J, PART II.

SCHEDULE L		Tra	insactior	ns V	Vith	Int	erested	Ρ	ersons			0	ИВ No.	1545-00	47
(Form 990 or 990-EZ)				swere	d "Yes	s" on F	Form 990, Par	't IV	, line 25a, 25b, 2	26, 27	, 28a,		20	19)
Department of the Treasury Internal Revenue Service		So to s	•				Form 990-E		est information.				pen T spect	o Pub	lic
Name of the organizatio	•		www.ii 3.gov/i c	,		1511 40		, iut	cot information.	_	ploye	r ident	•		mber
5		GIRL	S CLUBS OF M	ETRO	DENVI	ER IN	с			1	0510				
Part I Excess	Benefit Tran	sacti	ons (section 50	01(c)(3	3), sect	ion 50	1(c)(4), and se	ectic	on 501(c)(29) orga	anizat	ions o	nly).			
Complete i	if the organizatio	n ansv	wered "Yes" on	Form 9	990, Pa	art IV,	line 25a or 25t	b, o	r Form 990-EZ, P	art V,	line 40	Db.			
1 (a) Name of disqua	lified person	(b) F	Relationship bet			lified	le	<u>ם (-</u>	escription of tran	sactio	'n		(d)	Corre	cted?
			person and o	rganiza	ation			, 0					<u> </u>	es	No
													_		
													+		
													+		
2 Enter the amount of	of tax incurred by	/ the o	rganization mar	nagers	or dis	qualifie	ed persons du	ring	the year under						
											▶ \$				
3 Enter the amount of	of tax, if any, on I	ine 2,	above, reimburs	sed by	the or	ganiza	ation				▶ \$				
Part II Loans to	o and/or Fro	n Int	erested Per	sons											
						' Part	V line 38a or I	Forr	n 990, Part IV, lin	e 26 [.]	or if th	ne oraz	nizati	on	
	n amount on For					, r arc	v, into oou or i		n 000, r art rr, m	.0 20,	01 11 11	lo orge	in near	011	
(a) Name of	(b) Relatio	onship	(c) Purpose	(d) Lo	oan to or m the		e) Original	(1	f) Balance due) In	(h) Ap by bo	provec ard or	(i) W	/ritten
interested person	with organ	ization	of loan		ization?	prino	cipal amount			defa	ault?	comm		agree	ment?
				То	From					Yes	No	Yes	No	Yes	No
					<u> </u>										
								-							
							<u> </u>								
Total	or Assistance	- Ror	ofiting Inter	rocto	d Do	reon	<u> </u>								
	if the organizatio		-												
(a) Name of intere	ů.		(b) Relationship			· · ·	c) Amount of		(d) Type	of		(e) Purc	ose o	f
(u) · · · · · · · · · · · · · · · · · · ·			interested pers the organiza	son an			assistance		assistan				assist		
		_													
		_									-+				
		_													
		+													
		+									-+				
		+													

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

Schedule L (Form 990 or 990-EZ) 2019

Schedule L (Form 990 or 990-EZ) 2019	BOYS	AND	GIRLS	CLUBS	OF	METRO	DENVER	INC
--------------------------------------	------	-----	-------	-------	----	-------	--------	-----

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
RJ MCARTHUR	RJ MCARTHUR IS A TR	0.	RJ MCARTHUR		X

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: RJ MCARTHUR

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

RJ MCARTHUR IS A TRUSTEE OF THE BGCMD.

(D) DESCRIPTION OF TRANSACTION: RJ MCARTHUR IS A PARTNER AT PLANTE

MORAN. PLANTE MORAN PROVIDED ACCOUNTING SERVICES TO BGCMD IN FY20

TOTALING \$163,307. THESE SERVICES WERE PROVIDED IN THE NORMAL COURSE OF

BUSINESS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

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

Open to Public Inspection

|9

Name of the	organization
-------------	--------------

anization BOYS AND GIRLS CLUBS OF METRO DENVER INC

Employer	identification number
84	-0510404

20

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	Х	18	222,819.	PROVIDED BY DONO	R		
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (PROGRAM SUPPL)	X	157	593,202.	FAIR MARKET VALU	E		
26	Other ► ()							
27	Other ► ()							
28	Other 🕨 ()							
29	Number of Forms 8283 received by the organized							
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date							77
	exempt purposes for the entire holding period?	?				30a		X
	If "Yes," describe the arrangement in Part II.	opliny that m	auiroo tha raview	of any popotondard contails	itiono?	24	v	
31	Does the organization have a gift acceptance p	-		•		31	X	
J∠a	Does the organization hire or use third parties of contributions?		-			32a		х
b	If "Yes," describe in Part II.							

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2019

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

84-0510404

SCHEDULE O (Form 990 or 990-EZ)

, ,

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990 or 990-EZ

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

ZU19 Open to Public Inspection Employer identification number

84-0510404

BOYS AND GIRLS CLUBS OF METRO DENVER INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BOYS & GIRLS CLUBS OF METRO DENVER IS ONE OF THE LARGEST, MOST

COMPREHENSIVE YOUTH-SERVING ORGANIZATIONS IN THE DENVER METRO AREA,

OPERATING 21 PROGRAM SITES (INCLUDING OUR SUMMER CAMP). AT THE CLUBS,

WE PROVIDE AFTERSCHOOL AND SUMMER ENRICHMENT PROGRAMS FOR YOUNG PEOPLE

BETWEEN THE AGES OF 6 AND 18. MANY OF THE KIDS WE SERVE COME FROM

WORKING FAMILIES WHO ARE LIVING ON LOW INCOME. BOYS & GIRLS CLUBS ARE

VITAL RESOURCES THAT ALLOW PARENTS AND FAMILIES TO WORK WITH THE

CONFIDENCE THAT THEIR CHILDREN ARE SAFE AND CARED FOR AFTER SCHOOL AND

DURING THE SUMMER.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUR MISSION IS TO PROVIDE OUR CLUB MEMBERS WITH A SAFE, SUPPORTIVE, FUN

AND ENRICHING ENVIRONMENT THAT INSPIRES AND EMPOWERS THEM TO ACHIEVE

THEIR GREATEST POTENTIAL. WE ACCOMPLISH OUR MISSION WITH A FOUNDATIONAL

SOCIAL-EMOTIONAL LEARNING APPROACH THAT IS USED TO DELIVER OUR FIVE

PRIMARY PROGRAMS: (1) EDUCATION, (2) THE ARTS, (3) CHARACTER &

LEADERSHIP, (4) HEALTH & WELLNESS, AND (5) SPORTS & RECREATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OUR PROFESSIONAL YOUTH DEVELOPMENT STAFF PROVIDE A SAFE, STABLE

ENVIRONMENT FOR OUR CLUB MEMBERS TO ENJOY A NUTRITIOUS MEAL, IMPROVE

THEIR ACADEMICS, PARTICIPATE IN ORGANIZED ATHLETICS, EXPLORE THE ARTS,

DEVELOP TECHNICAL PROFICIENCIES, GAIN LEADERSHIP SKILLS AND CREATE

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404
LASTING RELATIONSHIPS WITH STRONG ROLE MODELS.	

WE PROVIDE MENTAL HEALTH SERVICES THROUGH FULL-TIME SOCIAL WORKERS WHO

PROVIDE SOCIAL-EMOTIONAL SUPPORT FOR OUR CLUB KIDS AS WELL AS

BEHAVIORAL HEALTH SERVICES.

BOYS & GIRLS CLUBS OF METRO DENVER IS UNIQUELY POSITIONED TO ADDRESS

THE NEEDS OF YOUTH BECAUSE WE MEET EACH CHILD WHERE THEY ARE, NOT ONLY

BY PROVIDING BASIC NEEDS (MEALS, CLOTHING, ETC.), BUT ALSO BY LAYERING

THAT BASIC SAFETY WITH EMOTIONAL AND SOCIAL SUPPORT (CARING, CONSISTENT

ADULT GUIDANCE), AND OFFERING A BROAD ARRAY OF HIGH-QUALITY, INTEREST

AND NEEDS-BASED, ENGAGING PROGRAMS - PROVIDING EXPERIENCES THAT ADVANCE

LEARNING AND DEVELOPMENT. WHAT'S MORE, WE DO ALL OF THIS OVER THE

LONG-TERM, SUPPORTING KIDS FROM KINDERGARTEN ALL THE WAY THROUGH HIGH

SCHOOL GRADUATION.

EVERYTHING WE DO AT THE CLUBS IS DESIGNED TO HELP KIDS FIND SUCCESS. WE

PROVIDE PROGRAMMING ACROSS THREE KEY OUTCOME AREAS:

ACADEMIC SUCCESS: BY THE TIME THEY REACH 6TH GRADE, MIDDLE CLASS KIDS

HAVE LIKELY SPENT 6,000 MORE HOURS LEARNING THAN KIDS BORN INTO

POVERTY. THROUGH ENGAGING ACADEMIC AND CAREER PROGRAMS, WE ARE FILLING

THE LEARNING GAP FACED BY MANY OF THE KIDS AND FAMILIES WE SERVE.

EXAMPLES OF PROGRAMS OFFERED IN THIS AREA INCLUDE:

- POWER HOUR IS A DAILY PROGRAM DESIGNED TO HELP CLUB MEMBERS BE MORE

SUCCESSFUL IN SCHOOL BY PROVIDING HOMEWORK HELP AND ENCOURAGING MEMBERS

TO BECOME SELF-DIRECTED LEARNERS.

Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404
- LITERACY IS A YEAR-ROUND READING PROGRAM THAT USES EVIDENCE-BASED	
ACCELERATED READER AND MYON READING SYSTEMS. BASELINE READING LEVELS	
ARE DETERMINED, THEN, WITH SUPPORT FROM STAFF, YOUTH READ BOOKS IN	
THEIR "JUST RIGHT" READING LEVEL, TAKE SHORT QUIZZES TO MEASURE	
COMPREHENSION, AND RECEIVE INCENTIVES FOR REACHING THEIR READING GOALS.	
- THE ARTS PROGRAMMING ENABLES YOUTH TO DEVELOP THEIR CREATIVITY AND	
CULTURAL AWARENESS THROUGH KNOWLEDGE AND APPRECIATION OF DIFFERENT ART	
FORMS (FINE, APPLIED, PERFORMING AND DIGITAL ARTS, AS WELL AS CRAFTS)	
PROJECTS ENCOURAGE IMAGINATION, SELF EXPRESSION, AND CRITICAL THINKING	
THROUGH ART AWARENESS.	
- STEM (SCIENCE, TECHNOLOGY, ENGINEERING AND MATH) PROGRAMS DEVELOP	
21ST CENTURY SKILLS FOR CAREER SUCCESS AND SUPPORT MEMBERS' ACADEMIC	
PERFORMANCE BY CHALLENGING YOUTH TO "THINK BEYOND THE SCREEN."	
INQUIRY-BASED LEARNING PROJECTS, TARGETED PROGRAMS AND HIGH-YIELD	
ACTIVITIES BUILD PROBLEM-SOLVING AND PRESENTATION SKILLS, TEAMWORK	
STRATEGIES, CREATIVITY, INNOVATION, TECHNICAL SKILLS, AND	
INFORMATION/MEDIA COMPETENCY AND ETHICS.	
- PACE (PROMOTING ACADEMICS AND CHARACTER EDUCATION) IS AN INTERVENTION	
PROGRAM SERVING YOUTH WITH SIGNIFICANT BEHAVIOR PROBLEMS OR WHO HAVE	
BEEN SUSPENDED OR FACE EXPULSION FROM DENVER PUBLIC SCHOOL DISTRICT. A	
JNIQUE, PROVEN APPROACH TO RESPONDING TO PROBLEMATIC BEHAVIORS OF	
STUDENTS, THIS 15-DAY INTERVENTION PROVIDES YOUTH WITH SUPPORT AND	
INSTRUCTION FROM COMPASSIONATE STAFF MEMBERS WHO HELP YOUTH IDENTIFY	
THE CAUSES OF THEIR BEHAVIORS AS WELL AS RECOGNIZE THEIR STRENGTHS AND	
VALUES. YOUTH ARE ALSO LINKED TO OTHER SUPPORTIVE SERVICES AS NEEDED,	
INCLUDING COUNSELING, EDUCATIONAL TESTING AND FAMILY SERVICES. THE	

Schedule O (Form 990 or 990-EZ) (2019)	Pag
Name of the organization BOYS AND GIRLS CLUBS OF METRO DENVER INC	Employer identification numb 84-0510404
ANAGE THEIR BEHAVIOR AND INCREASE THEIR CHANCES FOR GRADUATING FROM	
IIGH SCHOOL.	
JUNIOR STAFF CAREER DEVELOPMENT IS A PROGRAM DESIGNED TO GUIDE YOUTH,	
GES 14-17, TOWARD CAREERS IN YOUTH DEVELOPMENT OR HUMAN SERVICES BY	
JURTURING THEIR LEADERSHIP SKILLS AND PROVIDING GUIDED, PRACTICAL	
EXPERIENCES. WHILE WORKING AT THE CLUBS, YOUTH LEARN VALUABLE JOB	
KILLS FOR FUTURE CAREERS WHILE THEY RUN THE FRONT DESK, SUPPORT	
PROGRAMMING, AND MAINTAIN THE MEMBERSHIP TRACKING SYSTEM.	
FINANCIAL LITERACY PROGRAMS PROMOTE FINANCIAL RESPONSIBILITY AND	
NDEPENDENCE AMONG CLUB MEMBERS BY BUILDING BASIC MONEY MANAGEMENT	
KILLS. PARTICIPANTS LEARN HOW TO MANAGE A CHECKING ACCOUNT, BUDGET,	
SAVE AND INVEST. THEY ALSO LEARN ABOUT STARTING SMALL BUSINESSES AND	
PAYING FOR COLLEGE.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
HEALTHY LIFESTYLES: GOOD HEALTH REQUIRES PRACTICE. IT MEANS NOT ONLY	
NAVING A PLACE TO GO WHERE YOU GET THE CHANCE TO RUN, JUMP, KICK, THROW	
AND HIGH-FIVE; IT ALSO MEANS EATING RIGHT AND HAVING THE KNOWLEDGE AND	
CONFIDENCE NECESSARY TO CHOOSE WISELY. WE PROVIDE THE RIGHT RESOURCES -	
ROM COACHES TO CARROTS - TO HELP KIDS MAKE THE RIGHT CHOICES.	

EXAMPLES OF PROGRAMS IN THIS AREA INCLUDE:

- TRIPLE PLAY CHALLENGES MEMBERS TO BECOME HEALTHY AND ACTIVE BY

LEARNING NEW WAYS TO MANAGE STRESS, MAINTAIN HEALTHY FITNESS LEVELS AND

FORM POSITIVE RELATIONSHIPS WITH PEERS. TRIPLE PLAY PROGRAM COMPONENTS

INCREASE YOUNG MEMBERS' UNDERSTANDING OF WHAT CONSTITUTES A HEALTHY

LIFESTYLE, IMPROVE THEIR PHYSICAL FITNESS THROUGH ENHANCED DAILY,

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization BOYS AND GIRLS CLUBS OF METRO DENVER INC	Employer identification number 84-0510404
PHYSICAL ACTIVITIES AND COMPETITIVE SPORTS LEAGUES, AND BUILD THEIR	
PRO-SOCIAL SKILLS AND CHARACTER. THE TRIPLE PLAY COMPREHENSIVE STRATEGY	
ADDRESSES THE MINDS, BODIES AND SOULS OF CLUB MEMBERS THROUGH SPECIFIC	
CURRICULA AND ACTIVITIES IN THE FOLLOWING AREAS: HEALTHY HABITS DAILY	
PHYSICAL CHALLENGES, AND SOCIAL RECREATION.	
- PLAY60 IS THE NFL'S INITIATIVE TO ENCOURAGE YOUTH TO ENGAGE IN	
PHYSICAL ACTIVITY 60 MINUTES EACH DAY. LOCALLY, THE DENVER BRONCOS	
PARTNERS WITH THE AMERICAN HEART ASSOCIATION, MILE HIGH UNITED WAY AND	
BOYS & GIRLS CLUBS OF METRO DENVER TO OFFER THIS PROGRAM TO CLUB	
MEMBERS. THE PLAY60 FITNESS PROGRAM IS OFFERED DAILY AT THE CLUBS AND	
INCLUDES SEVERAL SPECIAL INCENTIVES FOR PARTICIPANTS.	
- SMART MOVES IS A NATIONALLY ACCLAIMED COMPREHENSIVE PREVENTION	
PROGRAM THAT HELPS YOUNG PEOPLE RESIST ALCOHOL, TOBACCO AND OTHER DRUG	
USE, AS WELL AS PREMATURE SEXUAL ACTIVITY. THE PROGRAM FEATURES	
ENGAGING, INTERACTIVE SMALL GROUP ACTIVITIES DESIGNED TO INCREASE	
PARTICIPANTS' PEER SUPPORT, ENHANCE THEIR LIFE SKILLS, BUILD THEIR	
RESILIENCY AND STRENGTHEN THEIR LEADERSHIP SKILLS.	
- GATES CAMP - AT CAMP, CLUB MEMBERS AGES 8-13, ARE CHALLENGED TO	
UTILIZE THEIR HEADS, THEIR HEARTS, AND THEIR HANDS TO EXPLORE WHO THEY	
ARE THROUGH THE LENS OF OUR FIVE CAMP PILLARS: LEADERSHIP, ENTHUSIASM,	
RESPECT, COOPERATION AND HONESTY. FOR JUST \$10, YOUTH PARTICIPATE IN A	
WEEK-LONG, GENDER-SPECIFIC SESSION THAT INCLUDES HIKING, CANOEING, ROCK	
CLIMBING, ARCHERY, HANDS-ON ENVIRONMENTAL GAMES, AND OTHER OUTDOOR	
ACTIVITIES. GATES CAMP ALSO OFFERS A COUNSELOR IN TRAINING (CIT)	
PROGRAM FOR TEENS.	
- KIDS CAFE - IN PARTNERSHIP WITH THE FOOD BANK OF THE ROCKIES, HOT	
NUTRITIOUS MEALS ARE SERVED EVERY EVENING IN THE SCHOOL YEAR AND	
DAYTIME IN THE SUMMER TO MEMBERS AT NO ADDITIONAL COST.	

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization	Page Employer identification numbe
BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404
- SPORTS LEAGUES - ALL CLUBS PARTICIPATE IN YEAR-ROUND INTER-CLUB AND	
INTRAMURAL SPORTS LEAGUES SUCH AS FOOTBALL, SOCCER, BASKETBALL,	
VOLLEYBALL, BASEBALL, SOFTBALL, AND TEE-BALL.	
- SEXUAL HEALTH EDUCATION USES EVIDENCE-BASED AND EVIDENCE-INFORMED	
CURRICULA THAT HELP YOUNG PEOPLE MAKE POSITIVE DECISIONS, SET	
BOUNDARIES, UNDERSTAND ANATOMY AND SEXUAL SAFETY, BUILD POSITIVE	
RELATIONSHIPS, AND MORE. THE ULTIMATE GOALS ARE TO REDUCE TEEN	
PREGNANCY AND EARLY INITIATION OF SEXUAL ACTIVITY, AND INSTANCES OF	
STIS/STDS, WHILE ALSO TEACHING IMPORTANT LESSONS ON CONSENT AND	
RELATIONAL SKILLS.	
- MENTAL HEALTH - STAFF SOCIAL WORKERS OFFER FOUR CRITICAL SERVICES:	
MENTAL HEALTH COUNSELING, SOCIAL-EMOTIONAL GROUP LESSONS, FAMILY CASE	
MANAGEMENT, AND EMERGENCY RESOURCES.	
OUR HEALTHY LIFESTYLES PROGRAMMING ALLOWS OUR CLUB KIDS TO LIVE	
HEALTHIER LIVES:	
- CLUB MEMBERS ARE LESS LIKELY TO USE SUBSTANCES LIKE TOBACCO AND	
ALCOHOL, WITH APPROXIMATELY 90% OF OUR CLUB MEMBERS ABSTAINING.	
- 74% OF CLUB MEMBERS EXERCISE AT LEAST THREE TIMES PER WEEK.	
FOR MANY CLUB MEMBERS, THE CLUBS BECOME A SECOND HOME, WHERE THEY NOT	
ONLY TRY NEW ACTIVITIES, LEARN NEW SKILLS, AND MAKE NEW FRIENDS, BUT	
WHERE THEY BEGIN TO PRACTICE THEIR ROLES AS CITIZENS IN THEIR	
COMMUNITIES. CLUBS MAKE A DIFFERENCE IN THE LIVES OF YOUNG PEOPLE. IN	
FACT, WE'VE PROVEN THROUGH RIGOROUS EXTERNAL EVALUATION THAT ATTENDANCE	
AND PARTICIPATION IN BOYS & GIRLS CLUB PROGRAMS GIVE YOUNG PEOPLE A	
CRITICAL ADVANTAGE IN OUR THREE KEY OUTCOME AREAS LISTED ABOVE. LEARN	
MORE ABOUT OUR NATIONALLY RECOGNIZED PROGRAMS AT	
WW.GREATFUTURESDENVER.ORG.	

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
CHARACTER AND LEADERSHIP: DEVELOPING GOOD CHARACTER AND DEMONSTRATING	
LEADERSHIP SKILLS ARE CRITICAL FOR YOUNG PEOPLE TO SUCCEED IN SCHOOL	
AND IN LIFE. OUR PROGRAMS CHALLENGE KIDS TO BE COMMUNITY-MINDED AND	
EMPOWER THEM BY DEMONSTRATING HOW THEY CAN AFFECT CHANGE BY WORKING	
TOGETHER.	
EXAMPLES OF PROGRAMS OFFERED IN THIS AREA INCLUDE:	
- PATHWAYS TO SUCCESS PREPARES CLUB MEMBERS FOR SUCCESS IN COLLEGE AND	
CAREER THROUGH HANDS-ON EXPLORATION AND PREPARATION. THE PROGRAM	
FOCUSES ON THREE MAIN AREAS: (1) COLLEGE PREPARATION, (2) CAREER	
EXPLORATION AND (3) FINANCIAL LITERACY. YOUTH TAKE TOURS OF HIGHER	
EDUCATION INSTITUTIONS ACROSS THE STATE, GET HELP APPLYING TO SCHOOLS	
AND FOR FINANCIAL AID, VISIT JOB FAIRS, MEET PROFESSIONALS FROM A WIDE	
VARIETY OF INDUSTRIES, AND ENGAGE IN BOTH CURRICULUM-BASED AND INFORMAL	
MONEY MANAGEMENT LESSONS.	
- KEYSTONE CLUB IS BOYS & GIRLS CLUBS' MOST DYNAMIC TEEN PROGRAM.	
KEYSTONE CLUBS ARE CHARTERED, SMALL-GROUP LEADERSHIP AND SERVICE CLUBS	
FOR TEENS AGES 14-18. KEYSTONE MEMBERS ELECT OFFICERS, PLAN AND	
IMPLEMENT SERVICE PROJECTS, AND FUNDRAISE TO ATTEND LEADERSHIP	
CONFERENCES AT A LOCAL, STATE AND NATIONAL LEVEL.	
- TORCH CLUBS ARE CHARTERED, SMALL-GROUP LEADERSHIP AND SERVICE CLUBS	
FOR YOUTH AGES 11-13 FOCUSING ON CHARACTER DEVELOPMENT. TORCH CLUBS ARE	
POWERFUL VEHICLES THROUGH WHICH CLUB STAFF CAN HELP MEET THE SPECIAL	
NEEDS OF YOUNGER ADOLESCENTS AT A CRITICAL STAGE IN THEIR DEVELOPMENT.	
TORCH CLUB MEMBERS LEARN TO ELECT OFFICERS AND WORK TOGETHER TO PLAN	
AND IMPLEMENT ACTIVITIES IN FOUR AREAS: SERVICE TO CLUB AND COMMUNITY,	
932212 09-06-19	Schedule O (Form 990 or 990-EZ) (20

Page **2**

Schedule O (Form 990 or 990-EZ) (2019)

	Page 2
Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF METRO DENVER INC	84-0510404
EDUCATION, HEALTH AND FITNESS AND SOCIAL RECREATION.	
- SERVICE LEARNING - BOYS & GIRLS CLUB MEMBERS ORGANIZE AND CARRY OUT	
HUNDREDS OF PROJECTS TO LEND A HAND AND MAKE A DIFFERENCE IN THEIR	
CLUBS AND COMMUNITIES EACH YEAR. BEING A PART OF SERVICE LEARNING	
TEACHES THE YOUTH HOW TO BRAINSTORM, PLAN, IMPLEMENT AND REFLECT ON	
PROJECTS AS A TEAM. THROUGH SERVICE, CLUB MEMBERS BUILD MEANINGFUL	
RELATIONSHIPS, LEARN ABOUT THE DEMOCRATIC PROCESS, DEMONSTRATE HIGH	
LEVELS OF COMMITMENT AND RESPONSIBILITY AND UNDERSTAND THE IMPORTANCE	
OF LIFELONG SERVICE.	
- YOUTH OF THE YEAR (YOY) IS A LEADERSHIP AND RECOGNITION PROGRAM THAT	
ACKNOWLEDGES OUTSTANDING MEMBERS IN THE CLUBS. THE YOY PROGRAM HELPS	
YOUTH DEVELOP THEIR LEADERSHIP AND COMMUNICATION SKILLS THROUGH AN	
EXTENSIVE APPLICATION AND INTERVIEW PROCESS THAT IS HELD DURING THE	
ANNUAL COMPETITION. 10 TO 13-YEAR-OLDS, JUNIOR (14-15 YEARS OLD) AND	
SENIOR (16-18 YEARS OLD) YOUTH CAN COMPETE AT THEIR CLUB AND CITY	
LEVELS. SENIOR WINNERS CAN ADVANCE TO THE STATE, REGIONAL, AND NATIONAL	
COMPETITION.	
- YOUTH EMPOWERING YOUTH (YEY) IS A PROGRAM IN WHICH CLUB TEENS ARE	
TRAINED TO LEAD PROGRAMS FOR OTHER YOUTH IN THE CLUBS. YEY IS MADE UP	
OF SEVERAL PROGRAMS AND PARTNERSHIPS THAT INCLUDE PEER LEADER	
POSITIONS, INCLUDING ACADEMICS, CULTURAL ARTS, PLAY 60, STEM (SCIENCE,	
TECHNOLOGY, ENGINEERING AND MATH) AND HEALTH. PEER LEADERS RECEIVE	
TRAINING TO BUILD THEIR SKILLS AS FACILITATORS IN THE CLUB AND EARN A	
STIPEND FOR THEIR WORK.	
FORM 990, PART VI, SECTION B, LINE 11B:	

THE TAX RETURN IS PRESENTED TO THE EXECUTIVE COMMITTEE OF THE BOARD BY THE

TAX PREPARER. ONCE APPROVED BY THE EXECUTIVE COMMITTEE, THE ORGANIZATION

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization BOYS AND GIRLS CLUBS OF METRO DENVER INC	Employer identification number 84-0510404
	01 0010101
PROVIDES A DRAFT OF THE TAX RETURN ELECTRONICALLY TO THE FULL BOARD OF	
DIRECTORS TO REVIEW PRIOR TO FILING. ONCE APPROVED, THE TAX RETURN IS	
FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
BOYS & GIRLS CLUBS OF METRO DENVER MONITORS ITS CONFLICT OF INTEREST POLICY	
IN THE FOLLOWING WAYS: ALL TRUSTEES MUST COMPLETE AND SIGN AN ANNUAL	
CONFLICT OF INTEREST POLICY WHERE THEY LIST ANY POTENTIAL CONFLICTS. THESE	
ARE REVIEWED BY THE PRESIDENT/CEO AND CFO. ADDITIONALLY, ANY MONETARY	
TRANSACTIONS OVER \$2,500 BETWEEN A TRUSTEE AND THE ORGANIZATION MUST BE	
APPROVED BY THE FULL BOARD OF TRUSTEES AND BE COMPARED AGAINST SIMILAR	
BIDS.	
FORM 990, PART VI, SECTION B, LINE 15:	
ALL COMPENSATION FOR OFFICERS AND DIRECTORS IS COMPARED TO THREE SEPARATE	
SURVEYS: MOUNTAIN STATES EMPLOYER'S COUNCIL ANNUAL SALARY SURVEY FOR	
DENVER, COLORADO; COLORADO NONPROFIT ASSOCIATION ANNUAL SALARY SURVEY FOR	
COLORADO; AND BOYS & GIRLS CLUBS OF AMERICA ANNUAL SALARY SURVEY. THESE	
THREE SURVEYS ARE AVERAGED TOGETHER AND THE ORGANIZATION COMPARES ITS	
CURRENT SALARY STRUCTURE TO THAT AVERAGE. THE FINANCE COMMITTEE, EXECUTIVE	
COMMITTEE AND BOARD OF TRUSTEES APPROVES ANY SALARY INCREASES OF THE	
OFFICERS OF THE ORGANIZATION.	
FORM 990, PART VI, SECTION C, LINE 18:	
THE ORGANIZATION MAKES ITS FORMS 1023 AND 990 AVAILABLE TO THE PUBLIC UPON	
REQUEST.	

FORM 990, PART VI, SECTION C, LINE 19:

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization		Page 2 Employer identification number
BOYS AND GIRLS CLUBS OF METRO DENVER INC		84-0510404
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF IN	NTEREST POLICY	
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST	•	
FORM 990, PART IX, LINE 11G, OTHER FEES:		
CUSTODIAL SERVICES:		
PROGRAM SERVICE EXPENSES	0.	
MANAGEMENT AND GENERAL EXPENSES	55,862.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	55,862.	
PROFESSIONAL SERVICES:		
PROGRAM SERVICE EXPENSES	414,693.	
MANAGEMENT AND GENERAL EXPENSES	462,574.	
FUNDRAISING EXPENSES	903,839.	
TOTAL EXPENSES	1,781,106.	
AUDIT SERVICES:		
PROGRAM SERVICE EXPENSES	12,960.	
MANAGEMENT AND GENERAL EXPENSES	51,840.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	64,800.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,901,768.	
FORM 990, PART XI, LINE 2C:		
THE FINANCE COMMITTE IS RESPONSIBLE FOR SELECTING THE INDEPEN	DENT	
AUDITOR AND OVERSEEING THE RESULTS OF THE AUDIT. THERE HAVE B	EEN NO	

SCH	EDUL	.ER
		-

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

2019 Open to Public Inspection

Employer identification number

84-0510404

OMB No. 1545-0047

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

Name of the organization

BOYS AND GIRLS CLUBS OF METRO DENVER INC

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)		-	entity
	INVEST IN REAL ESTATE				
RIVER BEND FUND, LLC - 47-2530484	MORTGAGES	COLORADO	229,792.	1,778,625.	BGCMD
]				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
BOYS & GIRLS CLUBS OF METRO DENVER							
FOUNDATION - 74-2275383, 2017 W. 9TH AVENUE,				LINE 12D,			
DENVER, CO 80204	SUPPORT THE BGCMD	COLORADO	501(C)(3)	III-0	N/A		х

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

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019 BOYS AND GIRLS CLUBS OF METRO DENVER INC 84 - 0510404Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related Part III organizations treated as a partnership during the tax year. (b) (d) (i) (j) (k) (a) (e) (f) (h) (c) (g) Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal General or Percentage Name, address, and EIN Primary activity Direct controlling Share of total Share of Code V-UBI Disproportionate domicile end-of-year assets amount in box 20 of Schedule K-1 (Form 1065) Yes No of related organization entity income ownership (state or allocations? foreian country) Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related Part IV organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(j	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	(i Sect 512(b contr enti	b)(13) rolled tity?
		country)						Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				
b Gift, grant, or capital contribution to related organization(s)	1b		Х	
c Gift, grant, or capital contribution from related organization(s)	1c	X		
d Loans or loan guarantees to or for related organization(s)			Х	
e Loans or loan guarantees by related organization(s)			Х	
f Dividends from related organization(s)	1f		х	
g Sale of assets to related organization(s)	1g		Х	
h Purchase of assets from related organization(s)			Х	
i Exchange of assets with related organization(s)	1i		Х	
j Lease of facilities, equipment, or other assets to related organization(s)			Х	
k Lease of facilities, equipment, or other assets from related organization(s)	1k		х	
I Performance of services or membership or fundraising solicitations for related organization(s)	11		Х	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			Х	
o Sharing of paid employees with related organization(s)	10		Х	
p Reimbursement paid to related organization(s) for expenses	1p		х	
q Reimbursement paid by related organization(s) for expenses			Х	
r Other transfer of cash or property to related organization(s)	1r		Х	
s Other transfer of cash or property from related organization(s)	1s		Х	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.				

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
<u>(2)</u>				
<u>(3)</u>				
<u>(4)</u>				
<u>(5)</u>				
(6)				

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(e) Are a partners 501(c) orgs. Yes	(f) Share of total income	(g) Share of end-of-year assets	(F Dispr tior alloca	D) opor- ate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managing partner? Yes NO	(k) Percentage ownership
						103	No			
		<u> </u>								

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Part VII	Supplemental Information	
T art VII	Supplemental information	

Provide additional information for responses to questions on Schedule R. See instructions.