APPROPRIATIONS CONTRACT

THIS CONTRACT is made and entered into on	, by the City of Pompano
Beach ("City") and BOYS & GIRLS CLUBS OF BROWARD COUNTY,	INC. a Not For Profit
Corporation authorized to do business in the State of Florida ("Recipient").	

WHEREAS, the City of Pompano Beach has appropriated for its current Fiscal Year 2020-21 (October 1st through September 30th), the sum of \$\frac{\\$10,000}{\$10,000}\$ to Recipient, to conduct a program entitled or activity as described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description" (collectively the "Work") attached hereto and incorporated herein by reference, for the period beginning upon full execution by the parties and ending September 30, 2021; and

WHEREAS, the City Commission finds that entering into this Contract serves a valid public purpose as Recipients shall perform or provide a service that is beneficial to the residents of the City, and that the City is currently not in a position to provide such services on its own; and

WHEREAS, it is in the best interest of the City to enter into this contract with Recipient to provide the Work hereunder in accordance with the terms and conditions set forth herein; and

NOW, THEREFORE, in consideration of those mutual promises and the terms and conditions set forth hereafter, the parties agree as set forth below.

- 1. Contract Documents. This Contract consists of Exhibit A, "Recipients Requirements, Contractual Responsibilities and Program Description"; Exhibit B, "Payment Schedule"; and Exhibit C, "Insurance Requirements" attached hereto, made a part hereof and incorporated herein, and all written change orders and modifications issued and approved by the City after execution of this Contract.
- 2. Term of Contract. This Contract shall commence upon full execution by both parties and end on September 30, 2021.
 - 3. Renewal. This Contract is not subject to renewal.
- 4. City's Maximum Obligation. City agrees to pay Recipient the aforementioned sum to provide the Work. Both parties agree that unless otherwise directed by City in writing, Recipient shall continue to provide the Work during the term of this Contract.
- 5. Payment of Program. City shall pay Recipient for performance of the Work in accordance with Payment Schedule set forth in Exhibit B.
- 6. *Disputes*. Any factual disputes between City and the Recipient in regard to this Contract shall be directed to the City Manager for the City whose decision shall be final.

- 7. Contract Administrators, Notices and Demands.
- A. Contract Administrators. During the term of this Contract, the City's Contract Administrator shall be the City Manager or his/her written designee and Recipient's Contract Administrator shall be <u>Lisa Devine</u> or his/her written designee.
- B. Notices and Demands. A notice, demand or other communication hereunder by either party to the other shall be effective if it is in writing and sent via email, facsimile, registered or certified mail, postage prepaid to the representative(s) named below or is addressed and delivered to such other authorized representative at the address as that party from time to time may designate in writing and forward to the other as provided herein.

If to Recipient: Lisa Devine

Grant Writer

877 NW 61st Street

Fort Lauderdale, FL 33309 Office: (954) 537-1010 Email: ldevine@bgcbc.org

If to City: Greg Harrison, City Manager

100 W Atlantic Blvd.

Pompano Beach, FL 33060 Office: (954) 786-4601

Email: greg.harrison@copbfl.com

8. Ownership of Documents and Information. All information, data, reports, plans, procedures or other proprietary rights in all items, developed, prepared, assembled or compiled by Recipient as required for the Work hereunder, whether complete or unfinished, shall be owned by City without restriction, reservation or limitation of their use and made available at any time and at no cost to City upon reasonable written request for use and/or distribution as City deems appropriate provided City has compensated Recipient in accordance with the terms set forth herein. City's re-use of Recipient's Work product shall be at its sole discretion and risk if done without Recipient's written permission. Upon completion of all Work contemplated hereunder or termination of this Contract, Recipient shall promptly provide City's Contract Administrator copies of all of the above Work documents upon written request. Recipient may not disclose, use, license or sell any Work developed, created or otherwise originated hereunder to any third party whatsoever. The rights and obligations created under this paragraph shall survive termination or expiration of this Contract.

To the extent it is necessary for Recipient to perform the Work, City shall provide any information, data and reports in its possession to Recipient free of charge.

9. Termination. City shall have the right to terminate this Contract, in whole or in part, for cause, default or negligence on Recipient's part, upon ten (10) business days advance written notice to Recipient. Such Notice of Termination may include City's requests for certain product documents and materials, and other provisions regarding the Program.

If there is any material breach or default in Recipient's performance of any covenant or obligation hereunder which has not been remedied within ten (10) business days after City's written Notice of Termination, City, in its sole discretion, may terminate this Contract immediately and Recipient shall not be entitled to receive further payment from the effective date of the Notice of Termination.

In the event the City fails for any reason to appropriate funds for this Contract, it shall be deemed terminated and City shall provide Recipient with ten (10) business days written notice. Upon receipt of said notice, Recipient shall be responsible for any and all expenses and/or legal obligations made after receipt of City's written notice from the City.

10. Force Majeure. Neither party shall be obligated to perform any duty, requirement or obligation hereunder if such performance is prevented by fire, hurricane, earthquake, explosion, war, civil disorder, sabotage, accident, flood, acts of nature or by any reason of any other matter or condition beyond the control of either party which cannot be overcome by reasonable diligence and without unusual expense ("Force Majeure"). In no event shall economic hardship or lack of funds be considered an event of Force Majeure. Additionally, should funds not be utilized, and services or programs not provided within the specific required time period in this Contract due to circumstances outside the control of Recipient, including but not limited to, a Force Majeure event, City is under no obligation to amend or extend this Contract to provide the approved funding past the expiration of the performance period set forth in this Contract. Any amendment to this Contract for such purposes shall be at City's sole discretion, based upon its budget, available funds, and other factors it may deem relevant.

Recipient must follow all Federal, State, County, and City safety guidelines, including all CDC safety guidelines in effect during the term of the program, including but not limited to social distancing, and personal protection equipment. Inability to conduct the program and follow any and all required safety guidelines from the COVID-19 crisis or other similar emergency, or failure to follow such requirements, including but not limited to, social distancing, shall constitute grounds for immediate cancellation of this Agreement unilaterally by the City upon written notice, which may be provided via electronic mail.

- 11. Insurance. Recipient shall maintain insurance in accordance with Exhibit C throughout the term of this Contract.
- 12. *Indemnification*. Except as expressly provided herein, no liability shall attach to the City by reason of entering into this Contract.
- A. Recipient shall at all times indemnify, hold harmless and defend the City, its officials, employees, volunteers and other authorized agents from and against any and all claims, demands, suit, damages, attorneys' fees, fines, losses, penalties, defense costs or liabilities suffered by the City arising directly or indirectly from any act, breach, omission, negligence, recklessness or misconduct of Recipient and/or any of its agents, officers, or employees hereunder, including any inaccuracy in or breach of any of the representations, warranties or covenants made by the Recipient, its agents, officers and/or employees, in the performance of Work under this Contract. Recipient agrees to investigate, handle, respond to, provide defense for, and defend any such claims at its sole expense and to bear all other costs and expenses related thereto, even if the claim(s) is/are groundless, false or fraudulent. To the extent considered necessary by City, any sums due Recipient hereunder may be retained by City until all of City's

claims for indemnification hereunder have been settled or otherwise resolved, and any amount withheld shall not be subject to payment or interest by City.

- B. Recipient acknowledges and agrees that City would not enter into this Contract without this indemnification of City by Recipient. The parties agree that one percent (1%) of the total compensation paid to Recipient hereunder shall constitute specific consideration to Recipient for the indemnification provided under this Paragraph and these provisions shall survive expiration or early termination of this Contract.
- 13. Sovereign Immunity. Nothing in this Contract shall be construed to affect in any way the rights, privileges and immunities of the City and its agents as set forth in §768.28, Florida Statutes. Nothing herein shall be construed as consent from either party to be sued by third parties.

14. Non-Assignability and Subcontracting.

A. Non-Assignability. This Contract is not assignable and Recipient agrees it shall not assign or otherwise transfer any of its interests, rights or obligations hereunder, in whole or in part, to any other person or entity without City's prior written consent which must be sought in writing not less than fifteen (15) days prior to the date of any proposed assignment. Any attempt by Recipient to assign or transfer any of its rights or obligations hereunder without first obtaining City's written approval shall not be binding on City and, at City's sole discretion, may result in City's immediate termination of this Contract whereby City shall be released of any of its obligations hereunder. In addition, this Contract and the rights and obligations herein shall not be assignable or transferable by any process or proceeding in court, or by judgment, execution, proceedings in insolvency, bankruptcy or receivership. In the event of Recipient's insolvency or bankruptcy, City may, at its option, terminate and cancel this Contract without any notice of any kind whatsoever, in which event all rights of Recipient hereunder shall immediately cease and terminate.

- B. Subcontracting. Prior to subcontracting for Work to be performed hereunder, Recipient shall be required to obtain the written approval of the City's Contract Administrator. If the City's Contract Administrator, in his/her sole discretion, objects to the proposed subcontractor, Recipient shall be prohibited from allowing that subcontractor to provide any Work hereunder. Although Recipient may subcontract Work in accordance with this Paragraph, Recipient remains responsible for any and all contractual obligations hereunder and shall also be responsible to ensure that none of its proposed subcontractors are listed on the *Convicted Vendors List* in accordance with the provisions of Paragraph 26 below.
- 15. Performance Under Law. Recipient, in performance of its duties under this Contract, agrees to comply with all applicable local, state and/or federal laws and ordinances including, but not limited to, standards of licensing, conduct of business and those relating to criminal activity.
- 16. Audit and Inspection Records. Recipient shall permit authorized representatives of the City to inspect and audit all data and records of the Recipient, if any, related to the Work being funded by this Contract until three (3) years after City's final payment under this Contract. Recipient agrees that such inspections and audits may include City's authorized representatives auditing Recipient's financial affairs at any time with no advance notice by City.

Recipient further agrees to include in all subcontracts hereunder a provision to the effect that the subcontractor agrees that City or any of its duly authorized representatives shall, until three (3) years after City's final payment to Recipient, have access to and the right to examine any books, documents, papers and records of such subcontractor attendant to any subcontracted Work provided hereunder.

In the event Recipient receives fifty thousand dollars (\$50,000.00) or more from the City, the City reserves the right to request a copy of a Grant Auditing Report conducted in accordance with the Government Auditing Standards issued by the United States Comptroller General and the provisions of OMB Circular A-133 issued by the Office of Management and Budget, Executive Office of the President. If such a request is made by the City, all grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. Upon City's written request, this Report shall be due within 120 days of the close of the City's fiscal year.

- 17. Adherence to Law. Both parties shall adhere to all applicable laws governing their relationship with their employees including, but not limited to, laws, rules, regulations and policies concerning worker's compensation, unemployment compensation and minimum wage requirements.
- 18. Independent Contractor. Recipient shall be deemed an independent contractor for all purposes, and employees of Recipient and all its contractors, subcontractors and the employees thereof, shall not in any manner be deemed to be employees of the City. As such, the employees of Recipient, its contractors or subcontractors, shall not be subject to any withholding for tax, social security or other purposes by City, nor shall such contractor, subcontractor or employee be entitled to sick leave, pension benefits, vacation, medical benefits, life insurance, workers or unemployment compensation or the like from City. Furthermore; nothing in this Contract shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between Recipient and City.
- 19. Mutual cooperation. Recipient recognizes its performance of Work hereunder is essential to the provision of vital public services and the accomplishment of the stated goals and mission of City. Therefore, Recipient shall be responsible to maintain a cooperative and good faith attitude in all relations with City and the public and shall actively foster a public image of mutual benefit to both parties. Recipient shall not make any statements or take any actions detrimental to this effort.

20. Public Records.

- A. The City of Pompano Beach is a public agency subject to Chapter 119, Florida Statutes. The Recipient shall comply with Florida's Public Records Law, as amended. Specifically, the Recipient shall:
- 1. Keep and maintain public records required by the City in order to perform the service.
- 1. Upon request from the City's custodian of public records, provide the City with a copy of requested records or allow the records to be inspected or copied within a reasonable time

at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes or as otherwise provided by law.

- 2. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the Contract if Recipient does not transfer the records to the City.
- 4. Upon completion of this Contract, transfer, at no cost to City, all public records in its possession or keep and maintain public records required by the City as required hereunder. If Recipient transfers all public records to the City upon completion of this Contract, Recipient shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If Recipient keeps and maintains public records upon completion of this Contract, Recipient shall meet all applicable requirements for retaining public records. Upon request from the City's custodian of public records, all records stored electronically by Recipient must be provided to the City in a format that is compatible with the information technology systems of the City.
- B. Failure of the Recipient to provide the above described public records to the City within a reasonable time may subject Recipient to penalties under §119.10, Florida Statutes, as amended.

PUBLIC RECORDS CUSTODIAN

IF THE RECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE RECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

CITY CLERK 100 W. Atlantic Blvd., Suite 253 Pompano Beach, Florida 33060 (954) 786-4611 RecordsCustodian@copbfl.com

21. Governing Law. Agreement must be interpreted and construed in accordance with and governed by the laws of the State of Florida. The exclusive venue for any lawsuit arising from, related to, or in connection with this Agreement will be in the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida. If any claim arising from, related to, or in connection with this Agreement must be litigated in federal court, the exclusive venue for any such lawsuit will be in the United States District Court or United States Bankruptcy Court for the Southern District of Florida. BY ENTERING INTO THIS AGREEMENT, THE PARTIES HEREBY EXPRESSLY WAIVE ANY RIGHTS EITHER PARTY MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.

22. Waiver and Modification.

- A. No waiver made by either party with respect to performance, manner, time, or any obligation of either party or any condition hereunder shall be considered a waiver of that party's rights with respect to the particular obligation or condition beyond those expressly waived in writing or a waiver of any other rights of the party making the waiver or any other obligations of the other party.
- B. No Waiver by Delay. The City shall have the right to institute such actions or proceedings as it may deem desirable for effectuating the purposes of this Contract provided that any delay by City in asserting its rights hereunder shall not operate as a waiver of such rights or limit them in any way. The intent of this provision is that City shall not be constrained to exercise such remedy at a time when it may still hope to otherwise resolve the problems created by the default or risk nor shall any waiver made by City with respect to any specific default by Recipient be considered a waiver of City's rights with respect to that default or any other default by Recipient.
- C. Either party may request changes to modify certain provisions of this Contract; however, unless otherwise provided for herein, any such changes must be contained in a written amendment executed by both parties with the same formality of this Contract.
- 23. No Contingent Fee. Recipient warrants that other than a bona fide employee working solely for Recipient, Recipient has not employed or retained any person or entity, or paid or agreed to pay any person or entity, any fee, commission, gift or any other consideration to solicit or secure this Contract or contingent upon or resulting from the award or making of this Contract. In the event of Recipient's breach or violation of this provision, City shall have the right to terminate this Contract without liability and, at City's sole discretion, to deduct from the Payment Schedule set forth in Exhibit B or otherwise recover the full amount of such fee, commission, gift or other consideration.
- 24. Attorneys' Fees and Costs. In the event of any litigation involving the provisions of this Contract, both parties agree that the prevailing party in such litigation shall be entitled to recover from the non-prevailing party reasonable attorney and paraprofessional fees as well as all out-of-pocket costs and expenses incurred thereby by the prevailing party in such litigation through all appellate levels.
- 25. No Third-Party Beneficiaries. Recipient and City agree that this Contract and other contracts pertaining to Recipient's performance hereunder shall not create any obligation on Recipient or City's part to third parties. No person not a party to this Contract shall be a third-party beneficiary or acquire any rights hereunder.
- 26. Public Entity Crimes Act. As of the full execution of this Contract, Recipient certifies that in accordance with §287.133, Florida Statutes, it is not on the Convicted Vendors List maintained by the State of Florida, Department of General Services. If Recipient is subsequently listed on the Convicted Vendors List during the term of this Contract, Recipient agrees it shall immediately provide City written notice of such designation in accordance with Paragraph 7 above.
- 27. Entire Contract. This document incorporates and includes all prior negotiations, correspondence, conversations, contracts or understandings applicable to the matters contained herein, and the parties agree that there are no commitments, contracts or understandings concerning the subject

matter of this Contract that are not contained in this document. Accordingly, it is agreed that no deviation from the terms hereof shall be predicated upon any prior representations or contracts, whether oral or written.

- 28. Headings. The headings or titles to Articles of this Contract are not part of the Contract and shall have no effect upon the construction or interpretation of any part of this Contract.
- 29. Counterparts. This Contract may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. A photocopy, email or facsimile copy of this Contract and any signatory hereon shall be considered for all purposes as original.
- 30. *Approvals*. Whenever City approval(s) shall be required for any action under this Contract, said approval(s) shall not be unreasonably withheld.
- 31. Absence of Conflicts of Interest. Both parties represent they presently have no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with their performance under this Contract and that no person having any conflicting interest shall be employed or engaged by either party in their performance hereunder.
- 32. Binding Effect. The benefits and obligations imposed pursuant to this Contract shall be binding and enforceable by and against the parties hereto.
- 33. Severability. Should any provision of this Contract or the applications of such provisions be rendered or declared invalid by a court action or by reason of any existing or subsequently enacted legislation, the remaining parts of provisions of this Contract shall remain in full force and effect.

THE REMAINDER OF THE PAGE IS INTENTIONALLY LEFT BLANK

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed the day and year hereinabove written.

CITY OF POMPANO BEACH

	By:REX HARDIN, MAYOR
	By:GREGORY P. HARRISON, CITY MANAGER
Attest:	
ASCELETA HAMMOND, CITY CLERK	(SEAL)
APPROVED AS TO FORM:	
MARK E. BERMAN, CITY ATTORNEY	

"RECIPIENT"

Witnesses: Lisa Davine (Print or Type Name) Mull	BOYS & GIRLS CLUBS OF BROWARD COUNTY, INC. (Print or type name of company here) By: Print Name: CHRISTOPHER GENTILE Title: CO-CEO
(Print or Type Name)	Business License No. 59-1108790
STATE OF FLORIDA	
COUNTY OF Broward	
online notarization, this day of as <u>CO-CEO</u> of <u>BOYS & GIRLS CLU</u> corporation. He is personally known to	acknowledged before me, by means of physical presence or December, 2020, by CHRISTOPHER GENTILE JBS OF BROWARD COUNTY, INC., a Florida non for profit of melor who has produced type of identification) as identification.
NOTARY'S SEAL:	NOTARY PUBLIC, STATE OF FLORIDA
Notary Public State of Florida Marsha L Williams My Commission GG 124329 Expires 07/16/2021	Marsha L. Williams (Name of Acknowledger Typed, Printed or Stamped) 66 124329
**************************************	Commission Number

Exhibit "A"

Recipients Requirements, Contractual Responsibilities and Program Description

- 1. RECIPIENT agrees to do as follows:
 - a) To accept the funds as appropriated in accordance with the terms of this Contract; and
 - b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, the CITY reserves the right to request a copy of the matching fund contract along with a financial report; and
 - c) Prior to the award of any CITY funds, RECIPIENT shall provide documentation substantiating that RECIPIENT's corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code and a W9 form; and
 - d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Contract shall be resolved in favor of the more restrictive guidelines; and
 - e) To utilize allotted funds under this Contract for the sole purpose set forth in this Contract FRAUDULENT USE OF CITY FUNDS SHALL RESULT IN THE TERMINATION OF THIS CONTRACT AND THE RECIPIENT SHALL BE OBLIGATED TO RETURN ALL THE FUNDS AWARDED BY THIS CONTRACT. IN ADDITION, THE CITY RESERVES ANY AND ALL RIGHTS AFFORDED UNDER THE LAW INCLUDING PROSECUTION FOR SUCH FRAUDULENT USE OF CITY FUNDS IN A COURT OF COMPETENT JURISDICTION. ALL UNSPENT FUNDS MUST BE RETURNED TO THE CITY; and
 - f) To return to the CITY within fifteen (15) days of demand all CITY funds paid to said RECIPIENT under the terms of this Contract upon the finding that the terms of any contract executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
 - g) To return to the CITY all funds expended for disallowed expenditures as determined by the CITY which includes, but not limited to:
 - i. Personal digital assistants (PDAs), cell phones, smartphones, and similar devices
 - ii. Service costs to support PDAs, cell phones, smartphones, and similar devices such as wireless services and data plans
 - iii. Proposal preparation including the costs to develop, prepare or write the proposal

- iv. Pre-award costs
- v. Out-of-state travel; non-local travel expenses
- vi. Gift cards
- vii. Purchase/lease of facilities or vehicles (e.g., buildings, buses, vans, cars)
- viii. Rentals one day only (written justification and approval needed for additional time)
- ix. Entertainment exceptions shall be made for community events (written justification and approval needed prior)
- x. Land acquisition
- xi. Furniture
- xii. Honorariums for presenters/speakers and any costs associated with travel expenses
- xiii. Kitchen appliances (e.g., refrigerators, microwaves, stoves, tabletop burners)
- xiv. Tuition/Scholarships
- xv. Capital improvements and permanent renovations (e.g., playgrounds, buildings, fences, wiring)
- xvi. Clothing or uniforms (written justification and approval needed)
- xvii. Project banquets/luncheons
- xviii. Costs for items/services already covered by indirect costs allocation (supplanting)
 - xix. Out of state college tours
 - xx. Out of county field trips
- xxi. Alcohol
- xxii. Airfare
- xxiii. Boat rentals
- xxiv. Family incentives
- xxv. Car mileage
- xxvi. Stipends
- xxvii. Payroll taxes
- xxviii. Laboratory fees
- xxix. Computers
- xxx. Health benefits
- xxxi. Appliances and home goods (written justification and approval needed)
- xxxii. Digital Cameras
- xxxiii. Plagues
- xxxiv. Hotel Costs
- xxxv. Housing (written justification and approval needed based on programming)
- h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the CITY under this Contract; and
- 2) RECIPIENT agrees to provide the City Manager's Office or designee with a quarterly

narrative and financial progress report, if applicable, on the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

RECIPIENT shall receive the first wave of funding upon approval by the City Commission. A narrative and financial report shall be due on the dates listed below, as applicable.

However, following the completion of the first narrative and financial report and as indicated in Exhibit "B" Payment Schedule, the remaining distribution payment to the RECIPIENT shall be contingent upon prior receipt of the required progress narrative and financial report which is due during the preceding quarter. Narrative and financial reports for recipients receiving quarterly or monthly payments as indicated in Exhibit "B" Payment Schedule shall be due no later than the following dates:

1st Quarterly Narrative & Financial Report (January/February/March) – April 1st 2nd Quarterly Narrative & Financial Report (April/May/June) – July 1st 3rd Quarterly Narrative & Financial Report (July/August/September) – September 30th

If RECIPIENT receives a lump sum payment for a one-time event or an award amount of \$5,000 or less then the RECIPIENT shall be required to submit their narrative and financial report on a due date above as assigned by the CITY at a later date. The due date shall occurs after the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description has concluded.

However, if any of the above dates fall on a weekend, then the due date shall be extended to the next business day, thereafter, as long as it does not exceed the term of this contact.

When submitting the quarterly narrative reports, RECIPIENT shall track and report to the CITY the following:

- a. Current and final outcomes for the program based on the objectives provided in the RECIPIENT's grant application
- b. Include all available statistics and/or numbers regarding the demographics of individuals served by the program; such as the number of CITY of Pompano Beach residents served (include tracking method used)
 - i. Age
 - ii. Race
 - iii. Gender
 - iv. Zip Codes
 - v. Household income (if applicable)
- c. Describe accomplishments of the program to date

d. Summary of the impact the program has had on its intended target audience; to include challenges faced, photographs of the project and success stories (How did the CITY's funding make a difference in a resident/recipient's life?)

Failure to provide the quarterly narrative reports shall render an organization ineligible to receive future payouts.

The approved budget for the RECIPIENT, included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.

RECIPIENT shall submit financial reports with all required documentation of expenditures (including original receipts/proofs of payments and itemized list).

Failure to provide a narrative and financial report as assigned by the CITY and/or failure to utilize all of the prior allocated funds from the first six months of the contract shall render an organization ineligible to receive additional payouts and render the organization ineligible for current and future funding from the CITY.

Failure from the RECIPIENT to provide a Quarterly or Final narrative or Monthly, Quarterly or Lump Sum, financial report shall forfeit all outstanding project funding and shall render the RECIPIENT ineligible for additional funding from the CITY.

- 4) RECIPIENT agrees that any funds provided by the CITY for the operation of the program or activity during the current CITY's fiscal year, which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be retained by the CITY.
- 5) RECIPIENT shall not use the CITY's logo, materials, or testimony for promotion of the RECIPIENT's program without written authorization from the CITY Manager or its designee.
- 6) RECIPIENTS shall attend a mandatory Orientation provided by the CITY at a date to be determined by the CITY. Failure to attend said Orientation shall be grounds for termination of the contract.
- 7) In cases where a contract is terminated by the CITY for default by RECIPIENT, the CITY reserves the right to deny RECIPIENT's future applications for new funding for a time to be determined by the City Manager, and/or his or her designee, and/or the City Commission.

Organization name:

BOYS & GIRLS CLUBS OF BROWARD COUNTY, INC.

Program funded:

College and Career Readiness

Amount funded:

\$10,000

Program description: The Boys & Girls Clubs of Broward County's College and Career Readiness program promotes higher education and higher level career aspirations to over 3,000 Broward County teens through real world, hands-on learning experiences and provides them with the tools to get started on their professional journeys.

Our Workforce Development Initiative is designed to promote the development of critical employment skills among our youth through research-informed youth development practice, training and experiential learning opportunities that lead to first job readiness and a plan for pursuing post-secondary and/or career aspirations. The Workforce Development Initiative will increase teen's employability through career exploration, mentorship, opportunities to earn credentials, soft skills training, technical skills training and career experiences.

Form Name: Submission Time: Browser: IP Address:

Unique ID:

Location:

City of Pompano Beach 2020-2021 Nonprofit Sponsorship Application

August 24, 2020 4:09 pm Chrome 84.0.4147.135 / Windows

8.20.22.51 651693310

34.257701873779, -84.49210357666

About Your Organization

Which Fiscal Year Is Your Organization Applying For?

2020-2021

Full Name of Nonprofit:

Boys & Girls Clubs of Broward County

Mission of Nonprofit:

To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

Brief Overview of Nonprofit:

Chartered in 1965 by Boys & Girls Clubs of America (BGCA), Boys & Girls Clubs of Broward County (BGCBC) has grown from one Club to 12, serving approximately 12,000 young people annually between the ages of 6-18. Our Clubs provide Broward County's youth with a safe, nurturing environment during out-of-school time, when many children are often left unsupervised, where they receive academic assistance, healthy snacks and hot meals and opportunities to learn about and prepare for multiple career paths.

It has been the goal of BGCBC to provide a world-class Club experience that assures success is within reach of every young person who walks through our doors. We want all members to graduate from high school with a plan for the future; demonstrate good character and citizenship by participating in leadership training and community service volunteer projects; and engage in nutrition education and physical fitness activities that promote living a healthy lifestyle.

Nonprofit Website:

www.bgcbc.org

Which Funding Priority Does Your Nonprofit Qualify For:

Education

Type of Organization - select the one that best applies:

Human Services

Executive Summary of How Nonprofit will use City of Pompano Beach Funding:

If funded, the Boys & Girls Clubs of Broward County would use grant funds to enhance our member Club experience and expose our Club members to educational and vocational experiences around Broward County.

How Does Your Nonprofit/Program Fit the Guidelines and Funding Interests?

The Boys & Girls Clubs of Broward County provides underserved youth of Pompano Beach with out-of-school time activities and programs that meet the needs and interests of our members. Caring and passionate staff promote positive values about family and community and guide members toward appropriate educational, personal and vocational needs. Our equation for success includes programming in three core areas; Academic Success, Good Character and Citizenship and Healthy Lifestyles. We provide specialized programs that expose and prepare our Club members to/for college and introduce them to careers in STEM (Science, Technology, Engineering and Mathematics), culinary arts, media arts, aviation, marine technology, woodworking and construction industries. Through these programs and our Workforce Development Initiative, BGCBC has been successful in connecting our teen Club members to full and part-time employment.

Statement of Need:

Intentionally located in neighborhoods accessible to low-income and underserved populations, BGCBC programs strive to have an impact on our members' mental, physical and socio-emotional development while seeking to empower youth to lead productive lives by ensuring that they have the proper skills to pursue future education and careers. BGCBC has accepted the 2025 Great Futures Strategic Plan Initiative from Boys & Girls Clubs of America (BGCA), as our strategic plan moving forward and have already implemented programs to enhance the experience of our Club members in order to give them the best foundation for their future. BGCBC's Workforce Development Initiative is modeled off BGCA's national strategic plan and is designed to promote the development of critical employment skills among our youth through research-informed youth development practice, training and experiential learning opportunities that lead to first job readiness and a plan for pursuing postsecondary and/or career aspirations. The initiative will increase our members' employability through career exploration, mentorship, opportunities to earn credentials, soft skills training, technical skills training and career experiences.

BGCBC has a solid track record of implementing programs that nurture young people's self-esteem by instilling in them a sense of belonging, usefulness, influence and competence. Club staff act as mentors by providing young people with one-on-one relationships with caring adult professionals and well-rounded programming that is fun and age appropriate.

Include a	Description	of the	Geographic
Area You	Serve:		

In support of our mission, Clubs are strategically located in areas that provide access to low-income and under-served populations. In FY 2019-2020, The Thomas D. Stephanis Club in Pompano Beach served 428 youth between the ages of 6-18. Of those members served, 57% live in households earning less than \$20,000 annually; 74% live in a single parent headed household; 97% qualify for free or reduced school lunch; 82% receive Medicaid; 98% of the Club members progressed to the next grade level, and100% of senior members graduated from high school. The Stephanis Club served 25,154 snacks and hot meals to its members.

Does Your Organization Receive Matching Funds?	Yes
Please indicate one or more matching gift options below:	One or more donors match general contributions to our organization.
Matching Gift Documentation Supporting Your Organization	https://s3.amazonaws.com/files.formstack.com/uploads/3276970/89621675/651693310/89621675_matching_gift_documentation.pdf
About Your Board of Directors	
Board Disabled	0
Board Minorities	20
Board Seniors	5
Total Board Members	60
Program/Event Information #1	
Will your organization be hosting an event on City property?	No
Which are you applying for? (Program/Event)	Program
Program/Event Name	College and Career Readiness
Type of Program/Event	Other
If other, please specify:	Program

Describe the program/event succinctly:

The Boys & Girls Clubs of Broward County's College and Career Readiness program promotes higher education and higher level career aspirations to over 3,000 Broward County teens through real world, hands-on learning experiences and provides them with the tools to get started on their professional journeys.

Our Workforce Development Initiative is designed to promote the development of critical employment skills among our youth through research-informed youth development practice, training and experiential learning opportunities that lead to first job readiness and a plan for pursuing post-secondary and/or career aspirations. The Workforce Development Initiative will increase teen's employability through career exploration, mentorship, opportunities to earn credentials, soft skills training, technical skills training and career experiences.

Elaborate on your program/event objectives. How do you plan on using the funding to solve the problem?

Funding from the City of Pompano Beach would help cover the costs of supplies and transportation for Workforce Development tours, College tours, career experience tours as well as specific programming that aligns with our College and Career Readiness program and our Workforce Development Initiative. Examples of programs that our members are exposed to are:

- 1. Money Matters financial education resources and interactive curriculum that helps teens gain useful knowledge and skills on various aspects of financial literacy
- 2. Career Launch a mentorship and career exploration program that offers a variety of activities to hone teens decision-making, problem-solving and critical-thinking abilities
- 3. Bring Your A Game a customer service program that teaches a wide range of employability and soft skills
- 4. Annual Career Day members interact with employers of different career paths and have the opportunity to gain knowledge about that career and its educational requirements
- 5. Generals Club Construction Program introduces Club members to trade careers
- 6. College Corner Club members receive hands on assistance with all things college-related
- 7. SAT Prep members receive free SAT prep classes designed to help members with Math and English curriculum

What are the outcomes of your program/event?

In our FY 2019-2020, the Thomas D. Stephanis Club in Pompano Beach had 428 members ages 6-18. Those members had a total of 25,154 visits to the Club and spent a total of 84,850 hours in the Club.

For FY2021, BGCBC is looking to get back to "normal" business hours that were affected by the COVID-19 pandemic shut-down. We would like to be able to reach more Pompano Beach youth by increasing our membership, as well as the number of visits and hours spent in the Club. Our goal is to have 100% of our members progress to the next grade level; make sure that 100% of our senior members graduate from high school and help as many of our teens pursue post-secondary education or trade schools.

Estimated # of Attendees at the Program/Event (select the one that best applies)

51-150

Please Specify the Number of City of Pompano Beach Residents Your Organization will Serve if the Program/Event is Funded:

150

Describe the demographics of the population you are impacting with this program/event: Demographics: Socioeconomic characteristics of a population expressed statistically, such as age, sex, education level, income level, occupation.

Of the 428 Thomas D. Stephanis Club members, 57% of members families reported earning less than \$20,000 annually; 74% of members live in a single parent headed household and 97% of members qualify for free or reduced school lunch. Additionally, 82% received Medicaid, 98% of members progressed to the next grade level, and 100% of senior members graduated from high school. The Stephanis Club members are 51% male and 49% female and has an ethnic breakdown of 91% African American, 4% Hispanic, 4% Multi-racial and 1% white.

In FY 2019-2020, Boys & Girls Clubs of Broward County served 25,154 healthy snack and hot meals to the members at the Thomas D. Stephanis Club, which is a relief to many parents struggling to feed their children each and every day. Supplemental meals are given to families each week and can provide food for additional household members, reducing the cost of food for member families.

Start Date of Program/Event:

Aug 24, 2020

End Date of Program/Event:

May 24, 2021

Does your program/event have a start time/end time?

Yes

Start Time of Program/Event:

02:00 PM

End Time of Program/Event:

08:00 PM

Name of Program/Event Venue:	Thomas D. Stephanis Boys & Girls Club	
Address of Program/Event Venue Location:	212 NW 16th Street Pompano Beach, FL 33060	
Attire of Program/Event (select the one that best applies):	Casual	
List any Benefits or Amenities the City of Pompano Beach Receives:	None	Security or assessment of the particular security of the secur
Amount Requested:	12254	
Are you applying for a second Program/Event?	No	
Additional Activities		
Are there any additional activities associated with the primary sponsorship event (Examples include VIP event, Kickoff event, Awards Ceremony, Thank You/Recognition Party, etc)	No	

What are your organization's credentials? Tell us why your organization does it better than anyone else.

With a 4-star rating from Charity Navigator for the ninth consecutive year, Boys & Girls Clubs of Broward County has a proven track record of fiscal responsibility and is recognized as a leading advocate for youth, providing girls and boys with a range of proven programs and services that instill a sense of competence, usefulness, belonging and influence. Only 4% of the charities evaluated have received at least 8 consecutive 4-star evaluations, indicating that BGCBC outperforms most other charities in America. Last year, BGCBC had a total of 1,911 teen members participate in our college and career programs. Of our senior members, 98% graduated from high school and 77% are currently enrolled in college or postsecondary institutions.

With support from the City of Pompano Beach, BGCBC can continue to offer academic success programs that provide youth and teens with opportunities to improve their grades, develop critical soft skills and gain valuable certifications that will lead to internships and/or gainful employment. The success of the College and Career Readiness program and Workforce Development Initiative is measured via pre- and post-test which measures the change in member knowledge about the college application and financial aid process; program completion survey of high school seniors which measures the number of seniors that have submitted an application to post-secondary institutions; and a program completion survey of high school members which measures their feelings about the program and overall attitude toward postsecondary education and career paths. High school graduation rates of seniors are recorded and information is collected about if and where they will be attending college or vocational schools, as well as their intended study path.

Any other information you wish to share?

The Boys & Girls Clubs of Broward County is vital to the Broward community, providing youth with access to programs and adults that foster their personal and academic success. Located in some of Broward County's most economically disadvantaged areas, the Clubs provide high-yield educational, healthy lifestyle and leadership programs to members with both environmental and individual risk factors that threaten their chances of leading positive and productive lives. Of our Broward County members, more than half face risk factors associated with family stress as 67% of Club members come from single-parent families and 50% of members' families reported that they earn less than \$20,000 annually. Our targeted members also face tough odds academically that put them at risk of academic failure and disciplinary problems. The majority of the feeder schools for our 11 Club locations are Title I schools, which 76% of members attend. Our programs help to break the cycle of educational underachievement that is prevalent among the populations we serve and ensure student success in academics and life skills. The continuation and support of our Academic Success Equation are critical if we are to increase the number of students who graduate from high school and go on to lead successful lives.

City of	Pompano	Beach	Funding	History
---------	---------	-------	----------------	---------

Yes
2019-2020
College and Career Readiness
12000
12254
Yes
Itemized Budget - Please provide a budget for the program/event you are applying for vs. the agency's annual budget = Yes W9 = Yes IRS Letter = Yes List of Board of Directors = Yes Articles of Incorporation = Yes Most Recent 990 Form = Yes
s are mandatory.
https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077528/651693310/72077528_2020-2021_city_of_pompano_beach_budget.xlsx
https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077535/651693310/72077535_w-9_2020.pdf
https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077552/651693310/72077552_irs_501_c_3_letter_2020.pdf
https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077556/651693310/72077556_2020-2021_board_of_directors.pdf
https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077558/651693310/72077558_bgcbc_articles_of_incorportation_and_by_laws.pdf

Charity/Organization Contact

Name	Lisa Devine
Title	Grant Writer
Email	Idevine@bgcbc.org
Phone Number	(954) 537-1010
Mailing Address (If awarded, your payment will be mailed to this address)	877 NW 61st Street Fort Lauderdale, FL 33309



CINCINNATI OH 45999-0038

In reply refer to: 0256439177 Jan. 30, 2020 LTR 4168C 0 59-1108790 000000 00

00010190

BODC: TE



BOYS & GIRLS CLUBS OF BROWARD COUNTY % MICHELE CLARKE 877 NW 61ST STREET FORT LAUDERDALE FL 33309

009271

Employer ID number: 59-1108790 Form 990 required: Yes

Dear Taxpayer:

We're responding to your request dated Jan. 23, 2020, about your tax-exempt status.

We issued you a determination letter in August, 1965, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c) (3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0256439177 Jan. 30, 2020 LTR 4168C 0 59-1108790 000000 00 00010191

BOYS & GIRLS CLUBS OF BROWARD COUNTY % MICHELE CLARKE 877 NW 61ST STREET FORT LAUDERDALE FL 33309

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,

Steve M. Brown, Operations Manager Operations 3-CIN

orm W-9

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Revenue Service ► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Give Form to the requester. Do not send to the IRS.

	Boys & Girls Clubs of Broward County 2 Business name/disregarded entity name, if different from above		***************************************									
page 3.	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions as as 2).						
on	☐ Individual/scle proprietor or ☐ C Corporation ☐ S Corpor single-member LLC	poration Partnership Trust/estate				instructions on page 3): Exempt payee code (if any)						
tion	Limited liability company. Enter the tax classification (C=C corporation	on S-S corporation D-Dodo	overhied by		EXCIT	Exempt payee code (if ally)						
Print or type. Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					1						
Sec	✓ Other (see instructions) ► N	on-Profit		1	(Applie	s to acc	counts	mainti	ained (outsida	the U.S.)	
Š	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's	name a	nd ad	dress	(opt	iona	(1)			
See	877 NW 61st Street											
	6 City, state, and ZIP code											
	Fort Lauderdale, FL 33309											
	7 List account number(s) here (optional)									-		
Par	Taxpayer Identification Number (TIN)			-		-	-			-	-	
Enter	our TIN in the appropriate box. The TIN provided must match the	name given on line 1 to a	void So	cial secu	reidus r	aurah	Or.					
Dacku	Withholding, For individuals, this is generally your social security	number (SSN) However	for a	Ciai sect	7	Tarrib	91	- 1				
reside	It allen, sole proprietor, or disregarded entity, see the instructions	for Part I later For other	1		-							
TIN, la	s, it is your employer identification number (EIN). If you do not have	e a number, see How to go						1				
			or					-	-			
Numbe	f the account is in more than one name, see the instructions for ling for To Give the Requester for guidelines on whose number to enter.	ie 1. Also see What Name	and Em	ployer i	dentil	ficatio	וח חנ	umb	er			
	to enteringuous for galactimes on whose number to enter.		5	9 -	1	1	0	8	7	0	0	
(B)			3	3	'	'	U	0	1	9	0	
Part	II Certification penalties of perjury, I certify that:											
Z. I am Serv	number shown on this form is my correct taxpayer identification n not subject to backup withholding because: (a) I am exempt from ice (IRS) that I am subject to backup withholding as a result of a fa enger subject to backup withholding; and	hackun withholding or th	I house not b		4:4:	4 41	- L		nal F	Reve	nue at I am	
	a U.S. citizen or other U.S. person (defined below); and											
Cortific	FATCA code(s) entered on this form (if any) indicating that I am ex	empt from FATCA reporting	ng is correct.									
acquisit other th	ation instructions. You must cross out item 2 above if you have bee e failed to report all interest and dividends on your tax return. For rea ion or abandonment of secured property, cancellation of debt, contril an interest and dividends, you are not required to sign the certificatio	estate transactions, item 2	2 does not app	ply. For	mort	gage	inte	rest	paic	1,		
Sign Here	Signature of Brain Grant		Date ►	1/	2/	/	2	0	2	0		
	eral Instructions	Form 1099-DIV (di funds)	vidends, incl	uding th	nose	from	sto	cks	or m	nutu	al	
Section references are to the Internal Revenue Code unless otherwise noted.		Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)										
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9 .			Form 1099-B (stock or mutual fund sales and certain other)									
		Form 1099-S (proceeds from real estate transactions)										
									insa	ction	18)	
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer dentification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption		 Form 1098 (home) 1098-T (tuition) 	099-K (merchant card and third party network transaction 098 (home mortgage interest), 1098-E (student loan intere uition)									
		* Form 1099-C (cand	(canceled debt)									
taxpaye	r identification number (ATIN), or employer identification number	 Form 1099-A (acqu 	isition or aba	ndonme	ent of	f seci	ured	pro	per	ty)		
(EIN), to amount	report on an information return the amount paid to you, or other reportable on an information return. Examples of information	Use Form W-9 onl alien), to provide you	ly if you are a	U.S. pe							t	
	nclude, but are not limited to, the following. 1099-INT (interest earned or paid)	If you do not return be subject to backup later.	n Form W-9 to withholding	o the re . See W	ques hat is	ster w	<i>ith a</i> kup	a <i>TII</i>) wit	V, yo	ou n Iding	ight],	

Cat. No. 10231X

Restated Bylaws for the Boys & Girls Clubs of Broward County, Inc. f/k/a Boys Clubs of Broward County, Inc. d/b/a Boys & Girls Clubs of Broward County Dated: February 21, 2013

Article I

Offices

The principal office of this Corporation shall be 877 NW 61st Street, Fort Lauderdale, FL 33309, County of Broward, State of Florida. The Resident Agent for the Corporation shall be designated on its annual corporate report filed with the Secretary of State of Florida. The address of the principal office of this Corporation may be changed from time to time by the Board of Directors.

Article II Purpose

To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens. Programming is focused in three (3) core areas: Academic Success, Good Character & Citizenship and Healthy Lifestyles.

Article III

Corporate Authority

The Corporation shall have all of the powers granted by Florida Statute 617.0302 as the same may be amended from time to time. The Corporation shall also have all of the emergency powers granted by Florida Statue 617.0303 as the same may be amended from time to time.

Article IV

Board of Directors

Section 1 – Authority and Number: The affairs, business and property of the Corporation shall be governed by its Board of Directors, numbering not less than fifteen (15) members, not inclusive of Advisory Council Chairs.

The following Board Member designations for Board Membership are:

A.) BGCBC Governing Board of Directors:

BGCBC Governing Board of Directors oversee the affairs, business and property of the organization and participate at board meetings on a monthly and annual basis. These members are in good standing related to the criteria of board attendance, financial support and following the bylaws of the organization. Governing Board of Directors are voting members of the organization with legal and fiduciary responsibility under Florida law.

B.) BGCBC Lifetime Board of Directors:

BGCBC Lifetime Board of Directors is a special designation for those who once served or who are serving the organization's Governing Board. Their extraordinary contributions of time and resources sets a standard for others to follow related to the BGCBC mission. Categories for these Directors are:

- 1.) Persons who have established Special Events that have raised millions of dollars for the organization.
- 2.) Persons who are members of the Lifetime Giving Society who have donated over \$250,000 in unrestricted gifts to BGCBC.
- 3.) Persons who serve on a Foundation Board who have provided at least \$1 million or more to BGCBC.

These Lifetime Board of Directors are voted on by the Governing Board and are considered full voting members when attending any meeting of the Governing Board of Directors. These Lifetime Board of Directors also have a legal and fiduciary responsibility under Florida Law.

C.) BGCBC Emeritus Board of Directors:

BGCBC Emeritus Board of Directors are recognized as persons who once served the organization's Governing Board. These Emeritus Board of Directors continue to support the mission of the organization through individual, corporate and annual contributions as participants of BGCBC activities. They are honored and recognized on an annual basis as Emeritus Board of Directors of BGCBC. They do not have a vote or any legal and fiduciary responsibility under Florida Law.

The maximum number of Directors shall not exceed one hundred (100) members, inclusive of Advisory Council Chairs who are voting directors, and may be changed by the affirmative vote of a majority of the Board of Directors at any meeting at which a quorum is present.

Section 2 - Term of Office:

First year members of the Board of Directors shall serve a term in office of one (1) year and thereafter may be nominated for three (3) year terms. The terms of all Officers and Directors shall commence on July 1st of the year in which they are nominated and shall terminate on June 30th of the year on which their term ends unless terminated earlier by the Nominating Committee.

Section 3 – Nominating Committee: The Chair, Vice Chair and Immediate Past Chair will select six (6) members of the Board, with at least 3 years' experience, to constitute a Nominating Committee. The Nominating Committee shall nominate the Board of Director Officers and the Board of Directors.

Section 4 – Election: The Directors shall hold office until the expiration of their term of office unless sooner removed by death, resignation, disqualification or otherwise. The election of Directors to fill the expired terms of any Director shall be held at a regular meeting or at a special meeting called for

that purpose. The election of Directors shall be by a quorum vote of the Directors. Any Director may nominate a person as a potential director.

Section 5 – Special Meetings: A special meeting of the Board of Directors may be called by, or at the request of the President/Chief Executive Officer, hereafter referred to as "President/CEO", the Chair of the Board or the Vice Chair. The person or persons authorized to call such special meetings shall fix the time and place of such special meeting, taking into consideration the proximity and convenience to all such affected Board members. Notice of such special meeting shall be in accordance with the notice provisions of Section 9 hereof.

Section 6 – Regular Meetings: Regular meetings of the Board of Directors shall be held upon notice from the Chair of the Board of Directors or President/CEO. There shall be ten (10) regular monthly meetings per year.

Section 7 – Annual Meetings: Annual meetings of the Board of Directors shall be held each year upon notice from the Chair of the Board of Directors or the President/CEO. Annual meetings shall be held for the purpose of appointing the officers of the Corporation, appointing Directors to fill any expired terms of office and the transaction of any other business that may come before the Board. June will be the election of Officers and the Annual Meeting of the Organization will take place in the month of November.

Section 8 – Conduct of Meetings: Robert's Rules of Order (latest edition) shall prevail at all Board meetings of the Board and Committees. All meetings of the Board and committees shall be held in Broward County, Florida. There shall be no voting by proxy unless the same is specifically permitted by a majority vote of the Board of Directors for a specific meeting only.

Section 9 – Notice: Notice of regular meetings provided under these Bylaws shall be given at least seven (7) days prior to the date fixed for such meeting by regular U.S. Mail, facsimile or e-mail to the last known address of each Director as shown on the records of the Corporation. Notice of a special meeting of the Board of Directors shall be given at least three (3) days prior to the date fixed for such meeting sent by Certified Mail, return receipt requested, by commercial carrier requiring a signed receipt, facsimile or e-mail to the last known address of each Director as shown on the records by the Corporation. Any Director may waive notice of any meeting by personally attending, unless such attendance is for the express purpose of objecting to the legality of such meeting.

Section 10 – Quorum: The minimum of fifteen (15%) percent of the total number of Board members of the Board of Directors shall constitute a quorum at any regular or special meeting of the Board of Directors. The majority of the Directors present at a meeting at which a quorum is present shall be

the act of the Board of Directors unless a different number is required under the provisions of the Articles of Incorporation of this Corporation or any other provision of these Bylaws.

Section 11 – Compensation: Directors shall not receive any compensation for their services. Nothing contained herein shall be construed to preclude any Director from serving the Corporation in any other capacity and receiving compensation therefor.

Article V Officers

Section 1 – Officers: The officers of the Corporation shall be the Chair of the Board of Directors, a Vice Chair, a Treasurer and a Secretary. The Board of Directors may elect or appoint such other officers including a President/CEO, as it shall deem appropriate. The officers are to have authority and perform the duties prescribed from time to time by the Board of Directors.

Section 2 – Election and Term of Office: The officers of the Corporation shall be elected annually by the Board of Directors. New offices may be created and filled at any meeting of the Board of Directors. Each officer so elected shall hold office until the next annual meeting of the Board of Directors and until his or her successor shall have been duly elected and qualified.

Section 3 – Removal: Any officer elected or appointed by the Board of Directors may be removed by a majority vote of the Board of Directors present at a regularly scheduled meeting or a special meeting whenever in its judgment the best interest of the Corporation would be served thereby.

Section 4 – Vacancies: A vacancy in any office occasioned by death, resignation, removal, disqualification or otherwise may be filled by the Board of Directors at its next regular meeting, or a special meeting called for that purpose, for the unexpired portion of the term.

Section 5 — Chair of the Board: The Chair of the Board shall preside at all meetings of the Board of Directors. He or she may sign, either alone or with the secretary or any other proper authorized Officer of the Corporation, any contract, deed or other instruments authorized by the Board of Directors, which the Board of Directors have authorized to be executed except in those cases where the signing and execution thereof shall be expressly delegated by the Board of Directors by these Bylaws, or by statute to some other officer or agent of the Corporation and he or she shall perform such other duties that may be prescribed by the Board of Directors from time to time.

Section 6 – Vice Chair: In the absence of the Chair of the Board or in the event of the inability or refusal to act by the Chair of the Board, the Vice Chair, the Treasurer and then Secretary, shall perform the duties of the Chair of the Board and when so acting shall have all of the powers of and be subject to all of the restrictions upon the Chair of the Board.

Section 7 – Other Officers: Treasurer and Secretary. The Board of Directors may appoint such other officers as it deems appropriate from time to time.

Article VI

President/Chief Executive Officer (CEO)

Section 1 – Duties of President/CEO: The President/CEO shall, in accordance with the directions of the Board of Directors, supervise, manage and control the operations of the business affairs of the Corporation. The President/CEO shall have the authority to hire and fire staff, shall have a budget prepared for the approval of the Board of Directors, and shall operate within the guidelines of the budget as approved or as otherwise authorized by the Board of Directors. The President/CEO shall report to the Board of Directors, including the Executive Committee, on the activities of the Clubs, including Financial matters, on a monthly basis or as otherwise directed by the Board.

Section 2 – Officio: The President/CEO shall attend all meetings of the Board of Directors unless excused by the Board of Directors and shall be an ex-officio member of all committees.

Section 3 – Bond: The President/CEO shall be required to procure such bond for personnel as shall be determined by the Board of Directors and President/CEO.

Section 4 – Term of Office: The President/CEO shall serve at the discretion of the Board of Directors.

Article VII Committees

Section 1 — Committees: The Board of Directors may, by resolution or resolutions passed, designate and appoint one or more committees, each of which shall consist of two or more Directors, but need not consist only of Directors. The Chair and Vice Chair shall appoint the various Chairs of the Committees of the Corporation. The members of the committees shall be appointed by the Chair of the Board, the Vice Chair with input from the President/CEO and the Chair of the Committee. In the absence of a Chair of the Committee, the Vice Chair of the Corporation shall act as the Chair. The designation and appointment of any such committee and the delegation thereto of authority shall not operate to relieve the Board of Directors, or any individual Director, of any responsibility imposed by law. The Chair of the Board, Vice Chair and President/CEO shall be ex-officio members of each committee.

Section 2 – Term of Office: Each member of a committee shall continue as such until successors are appointed, unless such committee shall be sooner terminated or unless such member is removed, resigns or otherwise ceases.

Section 3 – Vacancies: Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided in the case of the original appointments.

Section 4 – Quorum: Unless otherwise provided in the resolution of the Board of Directors designating the committee, a majority of the whole committee shall constitute a quorum, and the act of a majority of committee members shall be the act of the committee.

Section 5 – Rules: Each committee may adopt rules for its own government, not inconsistent with these Bylaws or with rules adopted by the Board of Directors. In any case, Robert's Rules of Order shall prevail at all meetings of the committee membership, unless specifically or otherwise provided by resolution adopted by the Board of Directors.

Section 6 – Executive Committee: The Executive Committee shall consist of a minimum of nine (9) members and a maximum of thirteen (13) members. The Chair of the Board, the Vice Chair, the Secretary, the Treasurer and the Immediate Past Chair shall all be members of the Executive Committee. A minimum of four (4) with a maximum of eight (8) at-large Board of Directors will be appointed by the Chair and current Vice Chair, with input from the President/CEO and approved by the Board of Directors annually. The Chair shall be the presiding officer of the Executive Committee and will only vote at Executive Committee in the case of a tie vote. The Executive Committee shall act for the Board of Directors at its discretion in the governance of the Corporation and in the absence of action by the Board of Directors. A quorum shall consist of a majority of the members of the Executive Committee.

Article VIII

Actions by Written Resolution

The Board of Directors may act without convening a regular or special meeting, by written resolution signed by three-quarters (3/4) of the members of the Board of Directors and duly entered in the Corporate Records.

Article IX

Books & Records

The Corporation shall keep correct and complete books and records of accounts, and shall keep minutes of all proceedings of its Board of Directors and committees. All books and records of the Corporation may be inspected by any Director or his or her agent or attorney for any legitimate and proper purpose at any reasonable time.

Article X

Contracts, Checks, Deposits & Funds

Section 1 – Contracts: The Board of Directors authorizes the President /CEO, via the annual budget, to enter into any contract or execute and deliver any instrument in the name of, and on behalf of, this Corporation, and such authority may be general or confined to specific instances.

Section 2 – Checks, Draft, etc.: All checks, drafts or orders for payment of money, notes or other evidences of indebtedness issued in the name of the Corporation, shall be signed by such officer or officers, agent or agents of the Corporation and in such manner as shall from time to time be determined by resolution of the Board of Directors. In the absence of such determination, such instruments shall be signed by the President/CEO and countersigned by the Chair of the Board or Vice Chair of the Corporation. Check signing and agreements pertaining to the business of the Corporation shall be limited to members of the Executive Committee and the President /CEO or the Executive Vice President (EVP). Checks in excess of two thousand five hundred dollars (\$2,500) shall be signed by a member of the Executive Committee of the Board of Directors and by either the President /CEO or the EVP.

Section 3 – Deposits: All funds of the Corporation shall be deposited from time to time to the credit of the Corporation in such banks, trust companies, brokerage firms or other depositories as the Board of Directors may select.

Article XI

Fiscal Year

The fiscal year of the Corporation shall end on June 30th of each year.

Article XII

Corporate Seal

The Board of Directors shall provide a Corporate Seal which shall have inscribed thereon the name of the Corporation, the state of incorporation and the year of incorporation.

Article XIII

Members

This corporation shall not have any members.

Article XIV

Emergency Bylaws

These Emergency Bylaws shall only be effective if an emergency exists and a quorum of the Corporation's Directors cannot readily be assembled because of some catastrophic event. The Emergency Bylaws make provisions for managing the Corporation during an emergency.

Section 1 – Meetings: A special meeting under an emergency situation may be called by any Officer or any Director. The person calling the meeting shall fix the time and place of the meeting and shall give adequate notice under the circumstances. The meeting may be held by telephone conference call, email and any other form of available communication.

Section 2 – Quorum: A quorum for this meeting shall be any three Directors.

Section 3 – Succession: The Board of Directors, either before or during any such emergency, may elect and from time to time alter the lines of succession for management of the Corporation if during such emergency any or all officers or agents of the Corporation are, for any reason, rendered incapable of discharging their duties. The Emergency Directors may elect new officers or agents for this purpose.

Section 4 – Effect of Emergency Bylaws: All provisions of the regular Bylaws consistent with the Emergency Bylaws shall remain effective during the emergency. The Emergency Bylaws are not effective after the emergency ends.

Section 5 - Action Taken: The corporate action taken in good faith and in accordance with the emergency Bylaws binds the Corporation and may not be used to impose liability on a Corporate Director, officer employee or agent acting in good faith and in accordance with the duties appropriate to the office.

Article XV

Indemnification of Directors, Officers, Employees and Agents

Section 1 – Indemnity: The Corporation shall indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending or completed claim, action, suit or proceeding or other civil, criminal, administrative or investigative (other than an action by or in the right of the Corporation), by reason of the fact that the person is or was a Director, Officer, Employee or Agent of the Corporation or is or was serving at the request of the Corporation as a Director, Officer, Employee or Agent. The indemnification shall include expenses, including attorney's fees, costs, including court costs, judgments, fines and amounts paid in settlement actually and reasonably incurred in connection with such claim, action suit or proceeding, which settlement was approved by the Board of Directors and, if the person acted in good faith and in a manner reasonably believed to be in or not opposed to the best interests of the Corporation and the person had no reasonable cause to believe the conduct was unlawful or improper.

Section 2 – Specific Incident: Any indemnification under the immediately preceding paragraph shall be made by the Corporation only as authorized in the specific matter upon a determination that

indemnification of the Director, Officer, Employee or Agent is proper in the circumstances because the person has met the applicable standards of conduct set forth in the above paragraph. Such determination shall be made by the Board of Directors by a majority vote of the quorum consisting of Directors who were not parties to such claim, action, suit or proceeding.

Section 3 – Insurance: The Corporation shall have the power to purchase and maintain insurance on behalf of any person who is or was a Director, Officer, Employee or Agent of the Corporation against any liability asserted against the person and incurred in any such capacity or arising out of the status of the person, whether or not the Corporation would have the power to indemnify the person against such liability under the provision of this Article.

Article XVI Amendments

The Articles of Incorporation and Bylaws may be amended by a two-thirds (2/3) vote of the members of the entire Board of Directors present at any regular or special meeting called for the purpose, providing notice of the proposed change is given in the notice of the meeting at least ten (10) days prior to the meeting.

100
2020-2021 Board Members
Governance Members:
Moises Almonte
Nicole Anderson
Wael Barsoum
Kyle Boos
Jeff Brandt
Michael Brown
Rob Brown
Linda Buccilli
Brent Burns
Bob Case
Raquel Case
Jack Christian
Brad Daniel
Debi Davis-Case
Marie DeSanctis
Swati Dholakia
Richard Ducharme
John Evans
Mike Fischler
Peter Gary
Thomas Godart
Roderick Hagan
Josephine Hart
Diane Holtz
Christy Hierholzer
Eli Hilal
Marc Infante - Secretary
Andre Khan
Andrew Koenig
Mark Lapointe
Doug Laurie
Tracy Lautomne
Carl Lender
Bilal Little
Paul Lopez
Lois Marino

Sean McCaffrey
Annie Mecias
Rudolph Moise
Mike Mominey
Teddy Morse
Rebecca Noble
Peter Oldbury
Vince Palazzolo - Treasurer
Leon Perez
Harold Reitman
James Robertson
Patti Roland
Ryan Seymour
Jeff Slade
Brent Spechler
Harry Stampler - Vice Chair
Ty Terrell
Kristene Tokesky
Brian Tuffin
Chaz Warrington
Chris White - Chairman
Michael Wild
Peter Woolf
Andrew Wurtele
Giancarlo Zuniga
Lifetime Board Members:
Ron Bergeron
Rick Case Rita Case
Alan Goldberg Tom McDonald
Al Miniaci
William Rotella
Doug VonAllmen
Linda VonAllmen
Gary Wendt
Emeritus Members:
Joseph Bamond
Julie Berry

Claudette Bonville	
James R Dunn	
Wayne Gilmore	
John Hart	
Ralph Marrinson	
Ron Mastriana	
Donald Medalie	
Tom Miller	
Jim Norton	
Frederick Perry	

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

Open to Public

Form 990 (2018)

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning 07/01, 2018, and ending 06/30.20 19 C Name of organization D Employer Identification number B Check if applicable BOYS & GIRLS CLUBS OF BROWARD COUNTY INC. 59-1108790 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Name change Room/suite E Telephone number 877 NW 61ST STREET Initial return (954) 537-1010 Final return/ City or town, state or province, country, and ZIP or foreign postal code Amended FORT LAUDERDALE, FL 33309 return G Gross receipts \$ 23,650,014. Application pending F Name and address of principal officer: MATTHEW ORGAN H(a) Is this a group return for subordinates? Yes X No 877 NW 61ST STREET, FORT LAUDERDALE, H(b) Are all subordinates Tax-exempt status: 501(c) () 🐗 (insert no.) 4947(a)(1) or If "No," attach a list, (see instructions) Website: WWW.BGCBC.ORG H(c) Group exemption number Form of organization: X Corporation Trust Association Other > L Year of formation: 1965 M State of legal domicile: FL Part I Briefly describe the organization's mission or most significant activities: SOCIAL, RECREATIONAL, AND EDUCATIONAL YOUTH SERVICES. if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 75. 3 ంద 4 Number of independent voting members of the governing body (Part VI, line 1b) 75. 4 Activities 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a). 417. 5 6 Total number of volunteers (estimate if necessary) 1,970. 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a b Net unrelated business taxable income from Form 990-T, line 38 7b Prior Year **Current Year** 14,256,020. 13,917,314. Revenue 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 891,097. 1,037,532. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 1,218,298. 688,002. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12). 16,365,415. 15,642,848. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 26,500. 54,885. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 6,929,331. 7,424,345. 16 a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 6,851,714. 7,166,646. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 13,835,930. 14,617,491. 2,529,485. 1,025,357. Assets or Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 50,501,327. 52,470,258. Total liabilities (Part X, line 26)...... 21 1,584,283. 2,095,533. 5 22 Net assets or fund balances. Subtract line 21 from line 20. 48,917,044. 50,374,725. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 6/2020 Sign Signature of officer Here MATTHEW ORGAN CO-CEO Type or print name and title Print/Type preparer's name Preparer's signature Date Check Paid ALBERT KREDI CPA 07/02/2020 self-employed P01343407 Preparer ▶BDO USA, Firm's name Firm's EIN ▶ 13-5381590 Use Only Firm's address ▶100 SE 2ND STREET, SUITE 1700 MIAMI, 305-381-8000 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

For Paperwork Reduction Act Notice, see the separate instructions.

	rt IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Y	e
	complete Schedule A.			
2	Is the organization required to complete Schedule P. S	. 1		
3	organization required to complete scriedule B. Schedule of Contributors (see instructions)?	. 2		
	and organization engage in direct or indirect political campaign activities on hebalf of or in apparation	1		ide
4	candidates for public office? If "Yes," complete Schedule C. Part I	. 3		
4	occition so r(c)(s) organizations. Did the organization engage in lobbying activities or have a section food to			
	crocker in effect during the tax year? If "yes," complete Schedule C. Part II	. 4		
5	is the digalization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership due		+	1
	acceptation and amounts as defined in Revenue Procedure 98-192 If "Ves." complete School to C. Rad III.	-		
6	bid the digalization maintain any donor advised funds or any similar funds or accounts for which donor	. 5	-	***
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D. Part I			
7	"Yes," complete Schedule D, Part I.	. 6		
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	. 7		
0	Did the organization maintain collections of works of art historical treasures or other similar and organization			7
	complete Scriedule D, Part III	. 8		
9	and all of the second transfer of the second	.	+-	***
	costodian for amounts not listed in Part X; or provide credit counseling debt management			
	debt negotiation services? If Yes," complete Schedule D. Part IV	0		
10	and digulation, directly of unrough a related organization hold assets in tompororily machinists		+	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.			
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	. 10	>	×
	VII, VIII, IX, or X as applicable.			
а				
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
h	Complete Schedule D, Part VI	11a	X	3
-	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			200
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	and the organization report an amount for investments-program related in Part V line 12 that is rev			An
	of its total assets reported in Part X, line 16? If "Yes." complete Schedule D. Part VIII	11c		
a	and the organization report an amount for other assets in Part X line 15 that is 5% or more of the total			-
	reported in Fatt A, line 16? If "Yes," complete Schedule D. Part IX	11d	X	8
6	of the organization report an amount for other liabilities in Part X, line 252. If "Ves." complete School to D. D. A. V.	110	11	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		-
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	
	Schedule D. Parts VI and VII.			
h	Schedule D, Parts XI and XII	12a	X	
~	o and the second of the second			80
13	rec, and if the Organization answered No" to line 12a, then completing Schedule D. Parts VI and VII is antiqued	12b	Х	
	the organization a school described in section 1/0(b)(1)(A)(ii)? If "Yes " complete School to E	13		***
14 a	the organization maintain an office, employees, or agents outside of the United States?	14a		7
D	the organization have aggregate revenues or expenses of more than \$10,000 from graphy aline			-
	rundraising, business, investment, and program service activities outside the United States or assertion			
	To order investments valued at \$100,000 or more? If "Yes." complete Schedule E. Parts Land IV	441		
15	and the organization report on Part IX, column (A), line 3, more than \$5,000 of grapts or other partitions.	14b		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV			
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
	assistance to or for foreign individuals? If "Vos " complete Cabadata 50,000 of aggregate grants or other			
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			-
	r art IX, column (A), lines 6 and Tie? If "Yes," complete Schedule G. Part I (see instructions)	17		1
	bid the organization report more than \$15,000 total of fundraising event gross income and contributions			1
	rait viii, lines it and oa? If 'Yes," complete Schedule G. Part II	18	Х	
	and diganization report more than \$15,000 of gross income from gaming activities on Doct VIII II- 0.0			+
	res, complete scriedule G, Part III	40		1
	and organization operate one of more musclimes, it "see " complete Cabadida II	19		+
10	" Tes to the 20a, did the organization attach a copy of its audited financial statements to this actions	20a		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		-
	grants of other assistance to any domestic organization or			1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		1	١.

Pa	rt IV Checklist of Required Schedules (continued)	***************************************		Page
22	Did the organization report more than \$5,000 of grants as allowed.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ye	s N
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals or Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	1		
23	answer res to Part VII. Section A line 3 4 or 5 about components of the		-	X
	organizations outlien and former officers, directors trustees key amployees and history			
	omployees: If res, complete schedule J	1 1000000		X
24	an organization have a tax-exempt bond issue with an outstanding principal amount of		-	-
	\$ 100,000 ds of the last day of the year, that was issued after December 31 20022 if "Voc."	1		
	and complete Scriedule K. If "No," go to line 25a	100	а	X
	and organization livest any proceeds of tax-exempt bonds beyond a temporary period execution?		0	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
(to defease any tax-exempt bonds?	240	2	
25 a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240	1	
	s 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.			
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a	4	X
	year, and that the transaction has not been reported on any of the organization's prior Forms one and are			
	res, complete scriedule L, Part I.	254		V
26	and organization report any amount on Part X, line 5, 6, or 22 for receivables from or povehlas to	25b	+-	X
	current of former officers, directors, trustees, key employees highest compensated employees			
0.7	disqualified persons? If Yes, complete Schedule L. Part II.	26		X
27	the organization provide a grant or other assistance to an officer director tructor by	11.0	1	+
	substantial contributor of employee thereof, a grant selection committee member or to a 250/ acatus in the			
28	criticy of family member of any of these persons? If "Yes," complete Schedule Part III	27		X
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
а	Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or kny omelowed (*/Ver // part //			
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	Schedule L, Part IV			
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b	-	X
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule I. Part IV	20-		V
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Ves " complete School of M	28c	X	X
30	the organization receive contributions of art, historical treasures or other similar secrets	2.3	- 21	-
0.4	conservation contributions? If "Yes," complete Schedule M	30		X
31	of the organization riquidate, terminate, or dissolve and cease operations? If "Ves " complete School of the state of the	31		X
32	the organization sell, exchange, dispose of, or transfer more than 25% of its not possible to the			
33	complete scriedule IV, Falt II	32		X
-	and a summer of the low of the control of the contr			
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	or iv, and rait v, line i			
35 a	- 1 The organization have a controlled effect within the meaning of section 512/6//12/2	34		X
b	Tes to line 35d, did the Organization receive any payment from or ongogo in any terms of	35a		X
	solutioned entity within the meaning of section 512(b)(13)? If "Yes " complete Schedule D. Boot V. line of	256		
36	or (c)(3) diganizations. Did the organization make any transfers to an exempt	35b		
	related organizations in res, complete Schedule R. Part V line 2	36		Х
	and organization conduct more than 5% of its activities through an entity that is not a related annual in			
	and that is treated as a partnership for federal income tax numbers? If "Ves " complete School to D. D. 1111	37		Х
00	The organization complete Schedule O and provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations in Schedule O for Dad VII is a set of the provide explanations.			7.5 49.55
art	19? Note. All Form 990 filers are required to complete Schedule O. Statements Regarding Other IPS Filters and T. C	38	Х	
		Silver		
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	inter the humber of Forms W-26 included in line 1a. Enter -0- if not applicable			
-	organization comply with nackin withholding rules for reportable			
	reportable gaming (gambling) winnings to prize winners?	10	Х	
Α		1c	200 /	

P	art V Statements Regarding Other IRS Filings and Tax Compliance (configured)	-		Page
Blasse	art V. Statements Regarding Other IRS Filings and Tax Compliance (continued)	mana.	7	
2	a Enter the number of amplayees reported as E 14/9 T		Yes	No
-	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 417	-		
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3:	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
-	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
4:	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
ŀ	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		X
,	See instructions for filling requirements for Fig. CALLED AND TO ALL DE LA CENTRAL DE			
5 8	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
ŀ	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
6 a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
137307	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
ŀ	solicit any contributions that were not tax deductible as charitable contributions?	6a		X
	of If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b		
	Did the organization receive a payment in execute of \$75, made			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
b	and services provided to the payor?	7a	X	
C	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			1.7
d	If "Yes" indicate the number of Forms 0000 file is it	7c		X
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			3.7
f	Did the organization, during the year, pay premiums, directly or indirectly, no a personal benefit contract?	7e		X
q	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7g		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
	sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring organization have excess business holdings at any time during the sponsoring the sponsoring organization have excess business at any time during the sponsoring the sp			
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8		
а	Did the sponsoring organization make any taxable distributions under section 4966?			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a		
0	Section 501(c)(7) organizations. Enter:	9b	-	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
2 a	Section 4947/a)(1) non-exampt charitable trusts to the	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	140		Children by Arts
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	+	-
	Note. See the instructions for additional information the organization must report on Schedule O	104	_	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
4 a	Did the organization receive any payments for indoor tanning services during the tay year?	14a	-	X
Ŋ	if "Yes," has it filed a Form 720 to report these payments? If "No " provide an explanation in Schoolule O	14b		
J	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in company			-
	excess paracritice payment(s) during the year?	15		Х
	1 res, see instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on not investment increase.	16		Χ
	If "Yes," complete Form 4720, Schedule O.			
				- Contraction

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

Sec	tion A. Governing Body and Management		4 2 5	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	5	1	1
	in their are indicated unferences in voting names among mambers of the according had.	1		
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b		5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct		1	1
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	-	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	0	-	1
	one or more members of the governing body?	7-		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		127
	stockholders, or persons other than the governing body?	74		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		^
	the year by the following:			
а		0 -	X	
b	The governing body?. Each committee with authority to act on behalf of the governing body?	8a	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	Λ	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	9	1	Λ
	the internal Revenue	Coae	·) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	40	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		Λ
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	401		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	Λ	
12a	Did the organization have a written conflict of interest policy? If "No. 1" and to live to	40	X	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Δ	
-	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		V	
С	rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		37	
13	describe in Schedule O how this was done	12c	X	
14	Did the organization have a written whistleblower policy?	13	X	
15	Did the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by			
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		57	
b	The organization's CEO, Executive Director, or top management official	15a	X	
-	Other officers or key employees of the organization	15b	X	
16a	Did the organization invost in contribute seeds to Schedule O (see instructions).			
104	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
h	with a taxable entity during the year?	16a		Χ
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?			
Secti	on C. Disclosure	16b		
17				
18	List the states with which a copy of this Form 990 is required to be filed ▶ FL,			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(Secti	on 50	1(c)
19	Other (explain in Schedule O)			
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	rest p	olicy,	and
20	infancial statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records MICHELE CLARKE 877 NW 61ST STREET FORT LAUDERDALE, FL 35309 954-537-1010	. >		

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

- Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the
- 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.

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

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

(A) Name and Title	(B) Average hours per week (list any	box,	unle er an	Po check ess po id a o	erson	e than o is both tor/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)PAUL LOPEZ	1.00									
DIRECTOR	0.	Х						0		
(2)WAYNE GILMORE	1.00							0.	0.	0
DIRECTOR	0.	Х						0.		
(3) PETER WOOLF	1.00						-	U.	0.	0
DIRECTOR	0.	Х					- 1	0		
(4)VINCENT PALAZZOLO	1.00		-	-			\dashv	0.	0.	0.
DIRECTOR	0.	Х				- 1		0		
(5)GARY WENDT	1.00	-21		-	-		-	0.	0.	0.
DIRECTOR	0.	Х			1					
(6)GLEN BEANLAND	1.00		+	-	\dashv	-	\dashv	0.	0.	0.
DIRECTOR	0.	Х								
(7)MITCHELL BERGER	1.00		+	-	+		+	0.	0.	0.
DIRECTOR	0.	Х								
(8)CLAUDETTE BONVILLE	1.00		+	+	+	-+	+	0.	0.	0.
DIRECTOR	0.	Х					l	0.		
(9) SUSAN BURKHARDSMEIER	1.00		-	+	+	-+	+	U -	0.	0.
DIRECTOR	0.	X						0.		
(10)BRENT BURNS	1.00		1	+	+	-	+	0.	0.	0.
DIRECTOR	0.	X						0		
(11)PHIL CHRYSLER	1.00		+	+	+	-	+	0.	0.	0.
DIRECTOR	0.	X						0		
(12) MICHAEL A. 'MIKE' FISCHLER	1.00		+	+	+	-	+	0.	0.	0.
DIRECTOR	0.	X						0.		
(13) PETER GARY	1.00		+	+	+	+	-	0.	0.	0.
DIRECTOR	0.	Х						0.		
(14) CECILIA GAYE-SCHNELL	1.00		+	+	+	-	-	U .	0.	0.
DIRECTOR	0.	Х						0.	0.	0.

(A)	(D)	7	11010	yees	, and	Hig		ted Employees (contii	nued)	
Name and title	(B) Average hours per week (list any hours for related	box.	unles er and	s perso a dire	ore than n is bot otor/trus	n an stee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	c	(F) Estima amoun othe ompens	ted t of
	organizations below dotted line)		Institutional trustee	Officer	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the fro	ation ated
5) CARY GOLDBERG DIRECTOR	1.00	X									
6) RON HALE DIRECTOR	1.00	X					0.	0.			
7) JOSEPHINE HART DIRECTOR	1.00						0.	0.			
8) CHRISTY HIERHOLZER	1.00	X	+	-			0.	0.			
DIRECTOR 9) ALAN KIRSCHENBAUM	1.00	Х	+	+			0.	0.			
DIRECTOR 0) DR. DOUG LAURIE	0.	Х					0.	0.			
DIRECTOR 1) DR. ROBERT MILLS, JR.	0.	Х					0.	0.			
DIRECTOR 2) STEPHEN NESI	1.00	Х					0.	0.			
DIRECTOR	1.00	х				-	0.	0.			
3) DR. HAROLD S. REITMAN DIRECTOR	1.00	Х					0.	0.			
4) JAMES ROBERTSON DIRECTOR	1.00	Х					0.				
5) BRENT SPECHLER	1.00		\top	1		1		0.			
DIRECTOR	+	Y			- 1			20.1			
DIRECTOR b Sub-total	0.	Х		<u> </u>		D	0.	0.			-
DIRECTOR b Sub-total	Section A					A A	0. 882,749.	0.		64,0)5
DIRECTOR Ib Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	Section A) who	rec	0. 882,749.	0.		64,0)5(
DIRECTOR b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization	Section A	ose lis	sted	above) who		0. 882,749. 882,749. eived more than \$	0. 0. 0.		-	050
DIRECTOR b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization Did the organization list any former office employee on line 1a? If "Yes," complete Sched	Section A limited to the n beer, director rule J for such	ose lis	sted trust	ee, k	ey e	mplo	882,749. 882,749. eived more than \$	0. 0. 0. 100,000 of	3	64,0	05 05 N
b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations or	Section A	ose lis	trust	ee, I	ey er	nplo ••• and	882,749. 882,749. eived more than \$ evee, or highest	0. 0. 0. 100,000 of compensated	3	64,0	050 050
DIRECTOR b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations grindividual Did any person listed on line 1a receive or	Section A limited to the ser, director fule J for such sum of reported than	ose lis	trust	ee, I	ey er sation "Yes,	and	882,749. 882,749. eived more than \$ eyee, or highest other compensa	0. 0. 0. 100,000 of compensated		64,0	050 050
DIRECTOR Ib Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization) Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations are	Section A limited to the ser, director fule J for such sum of reported than	ose lis	trust	ee, I	ey er sation "Yes,	and	882,749. 882,749. eived more than \$ eyee, or highest other compensa	0. 0. 0. 100,000 of compensated		64, (D50
b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations grindividual Did any person listed on line 1a receive or for services rendered to the organization? If "Yes"	Section A limited to the n bear director fulle J for such sum of report eater than accrue complete the sum of the su	ose lii 3 , or n indiv prtable \$150 	trust idual cor ,000	ee, In mpens? If from J for	ey er sation "Yes, any such p	and co	882,749. 882,749. eived more than \$ eived more than \$ over, or highest the compensation of the compensatio	0. 0. 0. 100,000 of compensated	4 5	64,(D5
DIRECTOR b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization) Did the organization list any former office employee on line 1a? If "Yes," complete Schede For any individual listed on line 1a, is the organization and related organizations grandividual Did any person listed on line 1a receive or for services rendered to the organization? If "Yesection B. Independent Contractors Complete this table for your five highest componensation from the organization. Report of	Section A	ose lii 3 , or n indiv prtable \$150 	trust idual cor ,000	ee, In mpens? If from J for	ey er sation "Yes, any such p	and co	882,749. 882,749. eived more than \$ eived more than \$ even or highest other compensation of the schedule lated organization of the schedule organization organization of the schedule organization of the schedule organization of the schedule organization	0. 0. 0. 100,000 of compensated	4 5 s tax	Yes X	D5
DIRECTOR b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations grindividual Did any person listed on line 1a receive or for services rendered to the organization? If "Yestion B. Independent Contractors Complete this table for your five highest componentation from the organization. Report of year. (A) Name and business add	Section A	ose lii 3 , or n indiv prtable \$150 	trust idual cor ,000	ee, In mpens? If from J for	ey er sation "Yes, any such p	and co	882,749. 882,749. eived more than \$ eived more than \$ even or highest compensation of the schedule diagram of the schedule organization	0. 0. 0. 100,000 of compensated	4 5 s tax	64,(D5
DIRECTOR Ib Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization) Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations grindividual Did any person listed on line 1a receive or for services rendered to the organization? If "Yesection B. Independent Contractors Complete this table for your five highest components of the organization. Report of year. (A)	Section A	ose lii 3 , or n indiv prtable \$150 	trust idual cor ,000	ee, In mpens? If from J for	ey er sation "Yes, any such p	and co	882,749. 882,749. eived more than \$ eived more than \$ even or highest other compensation of the schedule lated organization of the schedule organization organization of the schedule organization of the schedule organization of the schedule organization	0. 0. 0. 100,000 of compensated	4 5 s tax	Yes X	D50
DIRECTOR Ib Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization) Did the organization list any former office employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the organization and related organizations grindividual Did any person listed on line 1a receive or for services rendered to the organization? If "Yestion B. Independent Contractors Complete this table for your five highest componentation from the organization. Report of year. (A) Name and business add	Section A limited to the corrector of the corrector	ose lii 3 , or n indiv ortable \$150 pensa Sche	sted strust trust conduction of the conduction o	above ee, H npenn ? If from J for contral	ey er er sation "Yes, any such pactors ar year	and	882,749. 882,749. eived more than \$ eived more than \$ eve, or highest compensation schedule diated organization at received more the thing with or within the compensation of services.	0. 0. 0. 100,000 of compensated	4 5 s tax	Yes X	

Part VII Section A. Officers, Directors, (A) Name and title	Average hours per week (list any	(do box,	not c	Pos heck ss pe	C) sition more	e than	one i an	(D) Reportable compensation from	(E) Reportable compensation fro		(F) Estima amour	ated at of
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	>)	from to organize and relations organize organize	the ation ated
26) CHRIS WHITE DIRECTOR	1.00	X						0.				-
27) ANDREW WURTELE DIRECTOR	1.00							0.	C	1.		
8) RON BERGERON	1.00	X		-				0.	C	-		
DIRECTOR	0.	Х						0.	0			
9) RICK CASE DIRECTOR	1.00									1		
0) RITA CASE	1.00	Х	-	-	-		-	0.	0			*
DIRECTOR	0.	Х						0.	0			
1) ALAN GOLDBERG DIRECTOR	1.00		1						0	1		
2) TOM MCDONALD	1.00	X	\dashv	+	-		1	0.	0			
DIRECTOR		х						0.	0			
3) AL MINIACI DIRECTOR	1.00		1	1					- 0	•		
4) TED MORSE	1.00	X	1	1	4			0.	0			
DIRECTOR		Х						0.	0			
DIRECTOR	1.00			1	+	1	1	0.	0	-		
6) DOUGLAS VON ALLMEN	1.00	X	-		1		1	0.	0			
DIRECTOR		x						0.	0.			(
c Total from continuation sheets to Part VII, d Total (add lines 1b and 1c)	t limited to the	ose lis	sted	abo	ove)	who						
Did the organization list any former offi employee on line 1a? If "Yes" complete School	cer, director,	or	trus	tee,	ke	y en	nplo	yee, or highest	compensated		Yes	N
	iule o ful such	HIUIV	iuua							3		X
For any individual listed on line 1a, is the organization and related organizations granizations granizations.												
										4	Х	
Did any person listed on line 1a receive or for services rendered to the organization? If "Yestion B. Independent Contractors												
										5		X
Complete this table for your five highest concompensation from the organization. Report (year.	pensated ind compensation	lepeni for th	dent ne c	co aler	ntra ndai	ctors year	tha	t received more the ding with or within	nan \$100,000 c the organizatio	f n's tax		
(A) Name and business ad	dress							(B) Description of service	ces C	(C) ompen		
Total number of independent contractors (in more than \$100,000 in compensation from the	ncluding but	not li	mite	ed t	o ti	2050	lieto	ad abovo) who	column			
more than \$100,000 in compensation from th	o organization	4 0		-	-10 G			/ WIIG 16	COIVED			

(A)	(D)	7	ipic	yees	, and	Hig	hest Compensa	ted Employees	continu	ued)	
Name and title	Average hours per week (list any hours for related	box,	unles er and	s pers	ore than on is bot octor/tru	h an stee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	1 8	(F) Estima amoun othe mpens	ated at of er
7) LINDA VON ALTMEN	organizations below dotted line)	000	Institutional trustee	Officer	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	or a	from to ganiza nd rela ganiza	ation ated
37) LINDA VON ALLMEN	1.00			+	0	\vdash					
DIRECTOR 38) FRANK ADDERLEY	0.	X					0.	0.			
DIRECTOR	0.	7.									
39) LINDA BUCCILLI	1.00	X	-		-		0.	0.			
DIRECTOR	1.00	X									Nask room
0) LONNI CIBANTS	1.00		-	+	+		0.	0.			-
DIRECTOR	1	Х					0.				
1) JOHN CLIDAS	1.00		+	+			0.	0.			
DIRECTOR	0.	Х					0.	0.			
2) MARIE DESANCTIS	1.00		\top					0.			(
DIRECTOR	0.	X					0.	0.			-
3) SWATI DHOLAKIA	1.00							0.			
DIRECTOR 4) TINA DIEHL	0.	X					0.	0.			(
DIRECTOR	1.00										
5) DENISE DILLIO	0.	X	1				0.	0.			(
DIRECTOR	1.00										
6) DAVID DRUEY	0.	X					0.	0.			(
DIRECTOR	1.00										-
7) RICHARD DURCHARME	0.	Х	-	-			0.	0.			(
DIRECTOR	1.00	12									
Ib Sub-total	0.1	X				_	0.	0.			C
c Total from continuation sheets to Part VII, S	ection A		x x								
d Total (add lines 1b and 1c)											
2 Total number of individuals (including but not reportable compensation from the organization	limited to the	ose lis	ted	above	e) who	rec	eived more than \$	100,000 of		***************************************	
eperiodic rom the organization		3									, —
Did the organization list any former offic employee on line 1a? If "Yes " complete School	er, director,	or	trust	ee.	(ev e	molo	vee or highest	component		Yes	No
employee on line 1a? If "Yes," complete Schedu	ule J for such	indiv	idual	1			yee, or nightest	compensated	3		X
For any individual listed on line 1a is the s	sum of rono	rtable	~~~	~~~	11				3	20142	
								J for such			
									4	X	
Did any person listed on line 1a receive or	accello som		47	£							
for services rendered to the organization? If "Ye ection B. Independent Contractors	s," complete	Schei	dule	J for	such p	erso	n		5		X
Complete this table for your five highest compensation from the organization. Report covers.	pensated ind	epend for th	dent ne ca	cont	actors	s tha	at received more the	nan \$100,000 of the organization!	s tax		
vear.											
							(B)		(C)		
(A)	ess				- 1		Description	1			
	ress	***					Description of servi	ces Cor	mpensa	ation	Transien
(A)	ess						Description of servi	ces Cor		ation	
(A)	ress						Description of servi	ces Coi		ation	
(A)	ress						Description of servi	ces Coi		ation	
(A) Name and business addr							Description of servi			ation	
(A)	cluding but	not li	mite	d to	those	liste	Description of servi			ation	

	Section A. Officers, Direc	(D)	7 -1	при	oyee	S, a	nu n	iig	nest compensa	ed Employees	conti	nued)	
	Name and title	Average hours per week (list any hours for	(do box offic	not c	Posit check r ss pers d a dir	ion nore the	nan on both a	ne an	(D) Reportable compensation from	(E) Reportable compensation from		Estim amou oth	atec int o
8) THOMAS GODART	related organizations below dotted line)	Individual trustee or director	Institutional trustee				Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		from from organiz and rei	the zatio lated	
DIREC		1.00											
and the same of th	ICK HAGAN	1.00	X			_		1	0.	0.			
DIREC'			Х										
O) MARC	INFANTE	1.00	Λ		-	+	-	4	0.	0.			
DIREC		0.	Х						0				
1) PETER DIRECT	FOR	1.00	Х					1	0.	0.			_
) LOIS N		1.00			\top		+	\dagger	0.	0.			
DIRECT	TOR A MOTWANI	0.	Х						0.	0.			
DIRECT		1.00		T						7.			-
) BRUCE		0.	X	_		-			0.	0.			
DIRECT		1.00	37								-		Per const
) TODD P	ATON	1.00	X	+		-	_	1	0.	0.			
DIRECT	OR		Х										
) MICHAE	L RODRIQUEZ	1.00	A	-	+	-	-	-	0.	0.			-
DIRECT			Х						0.				
) PATTI		1.00		+	+		+	+	0.	0.			
DIRECT		0.	X						0.	0.			
) RYAN S DIRECT	to the time that the time to t	1.00					T	T		· · ·			-
Sub-total		0.1	X					1	0.	0.			
Total fron	continuation sheets to Part	t VII. Section A					. 🏲	-					
lotal (add	l lines 1b and 1c)						. P	-					
TOTAL HUITI	bei of individuals (including b	ut not limited to the	se lis	sted	abov	e) wl	ho re	90€	eived more than \$	100 000 of		-	
reportable	compensation from the organ	nization ▶	3							100,000 01			
Did the												Yes	T
employee	organization list any forme	officer, director,	or	trusi	tee,	key	emp	olo	yee, or highest	compensated		1	T
	real complete	ochedule o for such	Maiv	iaua	1		12.5	120			3		
organizatio	dividual listed on line 1a, is on and related organization	s the sum of repor	rtable \$150	001	mper	satio	on ar	nd	other compensat	tion from the			
												V	
Did ally be	erson listed on line 1a recei	VO OF GOODILO COM								a talent	4	X	+
		? If "Yes," complete	Sche	dule	J for	such	pers	SOI	7	or individual	5		
											J		
compensat year.	his table for your five highes ion from the organization. Re	t compensated ind port compensation	epend for th	dent ne ca	contalend	racto ar ye	ors the	hat	t received more th ling with or within	nan \$100,000 of the organization's	s tax		
	(A)						T		(5)				
	Name and busine	ess address							(B) Description of service	es Cor	(C) npens	ation	
					-							2001	
***********************							-						-
							+-						
													-
Total numb	er of independent contractor 100,000 in compensation fro	ors (including but	20f II.	mit-	d +-	6 h			1 1 1				-

(A) Name and title	(B) Average hours per week (list any hours for	(do box, office	not c unles	Pos heck ss pe	C) sition mor erson	e than of the tor/trus	one an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	n	(F) Estima amoun other	ted t of
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the from the from the from the from the front the f	he ation ated
9) RAQUEL CASE DIRECTOR	1.00	Х				0.		0				
)) JULIE ANDERSON DIRECTOR	1.00							0.	0	-		
) WALTER BOND	1,00	X		-	_			0.	0			
DIRECTOR	0.	X						0.	0			
DIRECTOR	$\frac{1.00}{0.1}$	Х						_				
) ROB BROWN	1.00	Λ		+	-		\dashv	0.	0 .	-		
DIRECTOR) ROBERT FARENHEM	0.	Х	1					0.	0.			
DIRECTOR	$\frac{1.00}{0.1}$	х							_			
) JEFF KING	1.00		+	+	\dashv		+	0.	0.			
DIRECTOR) CARL LENDER	1.00	Х	4	4	1			0.	0.			
DIRECTOR	0.	Х						0.	0.			
) KRISTENE LUNDBALD DIRECTOR	1.00			T	1		1		0.			
) CHANTIS MANTILLA DIRECTOR	1.00	X		-	1		+	0.	0.	0.		
) SEAN MCCAFFREY	1.00	X	+	+	+	-	+	0.	0.			
DIRECTOR Sub-total	0.	Х						0.	0.			
Total from continuation sheets to Part of Total (add lines 1b and 1c). Total number of individuals (including but	not limited to the	eo lie	hote	abo	ve)	who	rec	eived more than \$	100,000 of			
reportable compensation from the organi	zation ▶	3								-	Tu	
Did the organization list any former employee on line 1a? If "Yes" complete Si	officer, director,	or	trus	tee,	ke	y en	plo	yee, or highest	compensated		Yes	N
1 - 5	medule a lot such	marv	riaua	H .						3		>
For any individual listed on line 1a, is organization and related organizations individual.												
										4	X	
Did any person listed on line 1a receive for services rendered to the organization?	If "Yes," complete	Sche	ation <i>dule</i>	$\int fc$	om or si	any u uch pe	nre erso	lated organization	or individual	5		X
ction B. Independent Contractors Complete this table for your five highest compensation from the organization. Rep year.	compensated ind	onon	dont		m4==		Ma -					
(A) Name and busines	s address							(B) Description of service	ces Co	(C)		

Table												
Total number of independent contractors more than \$100,000 in compensation from	a lingluding but	no+ 1	ma ik a	1 .			12 1	1 1 1				

Part VII Section A. Officers, Directors, (A)	(ID)			10	`	-	9		zimpioyees	COITE	nuea)	
Name and title	(B) Average hours per week (list any hours for related	(do box,	not ch unles	Posit heck n ss pers	ion nore the son is ector/	nan or both a	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	m c	(F) Estima amoun othe) ated nt of er
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC		from torganization and relations and relations and relations and relations are seen and relations and relations and relations and relations are seen and relations and relations are seen and relations and relations are seen are seen are seen are seen and relations are seen are	ation ated
0) LAUREN MCFADDEN	1.00				+	0.				-		
DIRECTOR 1) JEFF SLADE	0.	X						0.	0			
DIRECTOR	$\frac{1.00}{0.1}$	v										**********
2) HARRY STAMPLER	1.00	X	-	+	+	-	+	0.	0			
DIRECTOR	0.	х						0.	0			
3) CRAIG VAUGHAN	1.00			+	+	+	+	V.	0.	-		
DIRECTOR	0.	Х						0.	0.			
4) MICHAEL WILD DIRECTOR	1.00											
5) GIANCARLO ZUNIGA	0.	X	-		-		1	0.	0.			
DIRECTOR	1.00	х										
5) BRIAN QUAIL	40.00	X		-	+	-	1	0.	0.			
CHIEF EXECUTIVE OFFICER	0.			x				359,729.	0		23,	_
7) MATT ORGAN	40.00					-	+	555,125.	0.	0.		
EXECUTIVE VICE-PRESIDENT	0.			X		Nicos in		154,396.	0.	0.		80
) DAYANAND MAHARAJ CHIEF OF CLUB OPERATIONS	40.00						1				5,20	
CHIEF DEVELOPMENT OFFICER	40.00			X		+		103,993.	0.			
) MICHELE CLARKE	40.00		12	X	+	_	+	96,629.	0.		8,	21
CONTROLLER	10.00		1	X				83,623.	0.		7,	
c Total from continuation sheets to Part VII, d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization)	t limited to the				e) w	ho r	rece	eived more than \$	100,000 of			
Did the organization list any former offi	oos disasts										Yes	N
Did the organization list any former offi employee on line 1a? If "Yes," complete Sched	dule J for such	or indiv	trust iduai	ee, /	key	em	plo	yee, or highest	compensated			
For any individual listed on line 1a is the	sum of rono	rtable	001	~~~						3		1 2
										4	X	
Did any person listed on line 1a receive or for services rendered to the organization? If "Y												
- mappingent oominaciois										5		>
Complete this table for your five highest comcompensation from the organization. Report of year.	npensated ind compensation	epend for th	dent ne ca	con	tract	ors ear	tha	t received more the ding with or within	han \$100,000 of the organization	's tax		
(A) Name and business a do	dress							(B) Description of servi	ces C	(C)		
								TTO PRIOTION SOLVI	000	mpens	auon	
Tatal												
Total number of independent contractors (ir more than \$100,000 in compensation from the	ncluding but e organization	not li	mite	d to	tho	se li	iste	ed above) who re	ceived			Table Control

				25
-				₹
μ	2	G	2	æ

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	руе	es,	and	Hig	hest Compensa	ted Employees	(contii	nued)	Pa
(A) Name and title	Average hours per week (list any hours for	(do i box, office	not ci unles	Pos heck ss pe	c) ition mor rson irec	e than is both tor/trus	one an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	1	(F) Estima amoun othe	ated at of er
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the fro	ation ated
1) RICHARD OUELLETTE	40.00					α.		Marie Company of the		-	-	
CHIEF CLUB OPERATIONS	0.			X				84,379.	0.		7,	,09
										- P		
o Sub-total C Total from continuation sheets to Part VII, Se d Total (add lines 1b and 1c)	ction A											
Total number of individuals (including but not li reportable compensation from the organization	mited to the	se lis	ted	abo	ve)	who	rec	eived more than \$	100,000 of			
Did the organization list any former office employee on line 1a? If "Yes " complete Schools"	r, director,	or 1	rusi	tee,	ke	ev en	olan	vee, or highest	hatesnanmon		Yes	N
Too, complete ochedal	e a for such	maivi	aua	1 .						3		>
For any individual listed on line 1a, is the su organization and related organizations great individual.	ater than	\$150,	000) ?	IŤ	"Yes,"	CO	mplete Schedule	J for such	4	X	
for services rendered to the organization? If "Yes	CCTUO COM		4:	F			inre	lated organization	or individual	4	- 1	
Complete this table for your five highest compression from the organization. Report compensation	ancated ind	00000	lont							5		X
						, , ,		ang with or within	the organization	s tax		
(A) Name and business addre	SS	-						(B) Description of servi	ces Co	(C) mpens	ation	
											-	
Total number of independent contractors (incl. more than \$100,000 in compensation from the	ludina but	not liv	nite	d t	o ti	2000	liete	ad abovo) who				
more than \$100,000 in compensation from the	organization	1			- LI	1038	11516	anove) who re	ceived			

Part VIII Statement of Revenue

		Check if Schedule O contains a response or no		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelate ^d busines ^s revenue	(D) Revenue excluded from ta under sections 512-514
ants	1a						
Contributions, Gifts, Grants and Other Similar Amounts	b		7,426.				
iffs,	0	Fundraising events 1c 41	6,266.				
0 0	d	Related organizations 1d					
Sin	е	500013/1	4,250.				
outi	F	All other contributions, gifts, grants,					
至		and similar amounts not included above . 1f 10,97	9,372.				
Cor	g		2,285.				
	h	Total. Add lines 1a-1f	. ▶	13,917,314.			
Program Service Revenue		Business	Code				
Š	2a						
65	b						
356	C					-	
3	d						
55	e						
S	f	All other program service revenue					
<u>σ</u> _	9	Total, Add lines 2a-2f ,	. >	ρ.	-		
	3	Investment income (including dividerids, inter	rest,			The same of the sa	
		and other similar amounts).	. ▶	1,035,397.			1,035,397.
	4	Income from investment of tax-exempt bond proceeds	. ▶	0.1			1 337.
	5	Royalties		319,520			319,529.
		(i) Real (ii) Perso	onal				1
	6a	Gross rents		1 48			
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss). Gross amount from sales of (i) Securities (ii) Oth	. ▶	0-			
	7a	the state of the s	er				
		assets other than inventory 5,359,343.					
	b	Less: cost or other basis			and the state of t		
		and sales expenses 5,357,208.					
	¢	Gain or (IOSS)					
	d	Net gain pr (loss)	. 🕨	2,135.		-	2,135.
Other Revenue	8 a	Gross income from fundraising		- 6 1 - 1 - 1 6 - 1			
3VE		events (not including \$416,266.					
02		of contributions reported on line 1c).					
he		See Part IV, line 18					
ō	р	Less: direct expenses , b 2,649,					
		Net income or (loss) from fundraising events	, 🌬	224,291.			224,291.
	9a	Gross income from gaming activities.					
- 1		See Part IV, line 19 a	0.				
- 1	b	Less: direct expenses b	0.				
	С	Net income or (loss) from gaming activities	>	0.			
	10a	Gross sales of inventory, less					
		returns and allowances a	0.				
	b	Less: cost of goods sold b	0.				
- 1	C	Net income or (loss) from sales of inventory					
		Miscellaneous Revenue Business C		0.		Miles and the second	
	14.	NTCODY I SUBSING	ode				
	11a	300033		144,182.	144,182.		
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	>	144,182.			
	2	Total revenue. See instructions					

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	Check if Schedule O contains a resp not include amounts reported on lines 6b, 7b,	(A)	ID IT UTILS FOR LIA		
80,	9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.		1	одренява
2	Grants and other assistance to domestic individuals. See Part IV, line 22	26,500.	26,500.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,	0.			
	trustees, and key employees	882,749.	750 000	1	
6	Compensation not included above, to disqualified	002,749.	752,308.	49,579.	80,86
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	5,214,457.	4 425 500		
8	Pension plan accruals and contributions (include	3,214,437.	4,435,588.	278,368.	500,50
	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	866,068.	662 246		
10	Payroll taxes	The state of the s	663,340.	93,997.	108,733
11	Fees for services (non-employees):	461,071.	403,651.	13,677.	43,743
a	Management				
h	Management	0.			
	Legal	25,505.		25,505.	
q	Accounting	74,413.		74,413.	
6	Lobbying	0.			
f	Professional fundraising services. See Part IV, line 17.	0.			
	Investment management fees	168,120.		168,120.	
9	Other, (if line 11g amount exceeds 10% of line 25, column	100 000			
12	(A) amount, list line 11g expenses on Schedule O.)	128,832.	29,787.	70,070.	28,975
13 (Advertising and promotion	33,701.	4,351.	29,350.	
14 1	Office expenses	114,375.	70,864.	20,127.	23,384
15 F	Information technology	0.			
16 (Royalties.	0.			
17 7	Occupancy	1,759,374.	1,250,389.	57,466.	451,519
17 1	Travel	358,336.	337,724.	11,140.	9,472
10 F	Payments of travel or entertainment expenses				
10 0	or any federal, state, or local public officials	0.			
20 1	Conferences, conventions, and meetings	0.			***************************************
20 li 21 P	nterest	0.			
22 D	Payments to affiliates	0.			
23 Ir	Depreciation, depletion, and amortization	934,058.	879,633.	32,998.	21,427.
24 0	nsurance	758,838.	730,512.	14,163.	14,163.
24 0	Other expenses. Itemize expenses not covered				
lie	bove (List miscellaneous expenses in line 24e. If				
/ A	ne 24e amount exceeds 10% of line 25, column				
- SI	A) amount, list line 24e expenses on Schedule O.) JPPLIES & EQUIPMENT				
	DOD PROGRAMS	1,510,335.	1,389,250.	63,382.	57,703.
	SCELLANEOUS	1,181,516.	1,175,395.	6,121.	37,703.
	JES & SUBSCRIPTIONS	55,730.	14,038.	22,292.	19,400.
		63,513.	43,822.	19,691.	20,300.
	Il other expenses				
6 10	otal functional expenses. Add lines 1 through 24e	14,617,491.	12,207,152.	1,050,459.	1,359,880.
fro	pint costs. Complete this line only if the ganization reported in column (B) joint costs om a combined educational campaign and indraising solicitation. Check here			, , , , , , ,	1,339,000.
fol	Illowing SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	8,674,307	1	10,682,238
	2	Savings and temporary cash investments	0	-	0
	3	Pleages and grants receivable, net	1,511,311.		1,285,049
	4	Accounts receivable, net	340,984.		450,334
	5	Loans and other receivables from current and former officers, directors.		1	100/054
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section).	0	-	
The second second	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) valuntary employees beneficiary			0
618	7	organizations (see instructions). Complete Part II of Schedule L	0.		0
(n)	8	Notes and loans receivable, net	327,558.	-	297,780
-		Inventories for sale or use Prepaid expenses and deferred charges ATCH 2	-0.	-	0
1	9	Prepaid expenses and deferred charges ATCH Z	276,493.	9	407,368
1	ua	Land, buildings, and equipment: cost or		l	
	l.	other basis. Complete Part VI of Schedule D 25,795,391.			
4		Less: accumulated depreciation	14,404,092.	10c	
1		Investments - publicly traded securities	17,351,049.	11	17,535,247.
1		Investments - other securities. See Part IV, line 11	0.	12	0
1		Investments - program-related. See Part IV, line 11	0.	13	0.
1		Intangible assets	0.	14	0.
1		Other assets. See Part IV, line 11	7,615,533.	15	7,238,115.
1	Correspondence (Correspondence	Total assets. Add lines 1 through 15 (must equal line 34)	50,501,327.	16	52,470,258.
1	7	Accounts payable and accrued expenses.	1,485,850.	17	1,685,998.
11	8	Grants payable	0.	18	0.
1	9	Deferred revenue	98,433.	19	409,535.
21	U	lax-exempt bond liabilities	0.	20	0.
2	1	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
22	2	Loans and other payables to current and former officers, directors,		Alex S	
		trustees, key employees, highest compensated employees, and			
22		disqualified persons. Complete Part II of Schedule L	0	22	0.
23	3	Secured mortgages and notes payable to unrelated third parties	0.		0.
24	4	Unsecured notes and loans payable to unrelated third parties.	0.	Da G	
25	5	Other liabilities (including federal income tax, payables to related third	0.	24	0.
		parties, and other liabilities not included on lines 17-24). Complete Part X	- 11		
		of Schedule D	0		
26	6	Total liabilities. Add lines 17 through 25		25	0.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.	1,584,283.	26	2,095,533.
27			20 202 2		
28	3	Unrestricted net assets	30,303,016.	27	32,011,189.
29	3	Temporarily restricted net assets	5,302,707.	28	18,363,536.
23		containently restricted fiet assets	13,311,321.	29	0.
	1	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
30)	Capital stock or trust principal, or current funds		30	
31		raid-iii of capital surplus, or land, building, or equipment fund			
32	4 1	Retained earnings, endowment, accumulated income, or other funds		31	
27 28 29 30 31 32 33	3	Total net assets or fund balances	48,917,044.	32	EO 274 705
34		Total liabilities and net assets/fund balances	50,501,327.	33	50,374,725.
-			30,301,321.	34	52,470,258.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

X Form 990 (2018)

3h

X

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Open to Public

Employer identification number

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC. 59-1108790 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 1 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 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. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

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.)

	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,507,355.	9,425,106.	15,413,006.	14,256,020.	13,917,314.	62,518,801.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	9,507,355.	9,425,106.	15,413,006.	14,256,020.	13,917,314.	62,518,801.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						5,124,152.
Sec	tion B. Total Support						57,394,649.
-	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(6) Takal
7	Amounts from line 4	9,507,355.	9,425,106.	15,413,006.	14,256,020.	13,917,314.	(f) Total 62,518,801.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,136,733.	1,136,733.	1,485,632.	1,073,625.	1,354,926.	6,187,649.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	146,925.	156,553.	118,757.	113,449.	144,182.	679,866.
11	Total support. Add lines 7 through 10	1	1				69,386,316.
12	Gross receipts from related activities, etc. (se	ee instructions)				12	
13 Sec	First five years. If the Form 990 is fo organization, check this box and stop here. tion C. Computation of Public Supp			, third, fourth, (or fifth tax yea	r as a section 5	501(c)(3)
14	Public support percentage for 2018 (lin			1 aalumm /5\\		4.1	00 70
15	Public support percentage from 2017 S	Schedule A Part	t II line 1/	r, column (r)).		14	82.72%
16a	331/3% support test -2018. If the org	anization did no	t check the hov	on line 13 one	lling 14 in 224	10 9/ 07	11.12%
	box and stop here. The organization qu	alifies as a nubli	cly supported or	raanization	1 11116 14 18 331	73 % or more, cn	eck this
b	331/3% support test - 2017. If the organization this box and stop here. The organization	anization did not	check a box on	line 13 or 16a	and line 15 is	331/3 % or more	check
17a	10%-facts-and-circumstances test - 20 10% or more, and if the organization Part VI how the organization meets th	118. If the orga meets the "fact e "facts-and-cin	nization did not s-and-circumsta cumstances" tes	check a box o nces" test, chec st. The organiza	n line 13, 16a, ck this box and ation qualifies a	or 16b, and lind stop here. Ex	e 14 is plain in
b	organization	D17. If the organization meets neets the "fa	nization did not the "facts-and-octs-and-circums	check a box of circumstances" tances" test, Ti	on line 13, 16a test, check thing ne organization	, 16b, or 17a, a is box and stop	nnd line here.
18	Private foundation. If the organization of instructions	did not check a l	pox on line 13, 1	16a, 16b, 17a, o	or 17b, check t	his box and see	
		The second second second		The state of the s	-		

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.)

Se	ction A. Public Support		10100	ociow, piease c	ompiete rait i	1.)	
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(4) 2017	11001	T
1	Gifts, grants, contributions, and membership fees		1 (2) 2010	(0) 2010	(d) 2017	(e) 2018	(f) Total
	received. (Do not include any "unusual grants.")		The state of the s				
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose			1.3 (47)		* 1	
3	Gross receipts from activities that are not an		-	-			
	unrelated trade or business under section 513						
4	Tax revenues levied for the			-			
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities		-	-			
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3					Almost the second secon	
,	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					and the second s	
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Sac	line 6.)						
	tion B. Total Support		·				
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
IVa	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on				Signature and the second secon		
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11,						
	and 12.)			1			
14	First five years. If the Form 990 is for	the organizati	ion's first secon	d third fourth	or fifth to		
-	organization, check this box and stop here.			d, ama, rourar,	or militax yea	r as a section	501(c)(3)
Sect	ion C. Computation of Public Supp	ort Percentac	ie		* * * * * * * * *		
15	Public support percentage for 2018 (line 8, c	column (f), divide	d by line 13, colun	n (f))			
16	Public support percentage from 2017 Sched	ule A, Part III, line	15	(///		15	%
Sect	on D. Computation of Investment	ncome Perce	entage	, , , , , , , , ,		16	%
17	nvestment income percentage for 2018 (line	10c column (f)	divided by line 1	2 column (6))			
8	nvestment income percentage from 2017 Sc	hedule A Part II	I line 17	3, column (1))		17	%
9 a	331/3% support tests - 2018. If the orga	nization did not	check the have	on line 44		18	%
	17 is not more than 331/3% check this	hox and eta-	here The	on line 14, and	ine 15 is more	than 331/3 %, an	d line
b :	17 is not more than 331/3%, check this 331/3% support tests - 2017. If the organi	zation did not a	hook o have a "	nzation qualities	as a publicly su	pported organiza	ation . >
1	33 1/3 % support tests - 2017. If the organi ine 18 is not more than 331/3 % check the	nis how and at-	neck a pox on III	ne 14 or line 19a,	and line 16 is n	nore than 331/39	%, and
0	ine 18 is not more than 331/3%, check the reverse foundation. If the organization did	d not check a	hov on line org	anization qualifies	as a publicly su	pported organiza	ition 🕨
SA 1 1.000	Private foundation. If the organization dis	- not onder a	DOX OIT IINE 12	, 19a, or 19b,			
					Sch	edule A (Form 990	Ar 900 E71 2019

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 IV.)

360	etion A. All Supporting Organizations			
1	Are all of the organizations and the		Yes	N
	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).			
3 a				
b				
С				
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.	4a		
С	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.	4b		
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).	4c		
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?	5a 5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one of more of its supported organizations, or (iii) other supporting organizations that also support or			
7	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
,	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).	7		
8	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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.	9a		
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.	9b		
С	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 M.	9c		
10 a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	·va		

determine whether the organization had excess business holdings.)

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.

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.

Parent of Supported Organizations. Answer (a) and (b) below.

Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

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.

2a 2b 3a

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

Pai	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)	Page
Sec	tion D - Distributions		(continuou)	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		Current Year
2	Amounts paid to perform activity that directly furthers exe	emnt nurnoses of suppor	fod	
	organizations, in excess of income from activity	simple purposes of suppor	ieu	
3	Administrative expenses paid to accomplish exempt purp	inses of supported argon	izotiona	
4	Amounts paid to acquire exempt-use assets	oses of supported organ	izations	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is seen		
	(provide details in Part VI). See instructions.	i tile organization is rest	onsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	and a difficult divided by fine a amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
С	From 2015			
d	From 2016		120	
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
755	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014	The second secon		
b	Excess from 2015			
C	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			
PROSPERATION	EXCOSO HOTH ZOTO, 1			

Schedule A (Form 990 or 990-EZ) 2018

Page 8

Part VI

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

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC.

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

2018

Employer identification number

59-1108790 Organization type (check one): Filers of: Section Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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).

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) (2018)

Employer identification number 59-1108790

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JM FAMILY ENTERPRISES, INC. 100 JIM MORAN BLVD. DEERFIELD BEACH, FL 33442	\$\$\$.	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	P.O. BOX 14250 FORT LAUDERDALE, FL 33302	\$\$\$	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_	CHILDREN'S SERVICES COUNCIL 6600 W. COMMERCIAL BLVD. TAMARAC, FL 33319	\$\$	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_	STATE OF FLORIDA DEPARTMENT OF FINANCIAL 200 E GAINES ST TALLAHASSEE, FL 32399	\$ 2,238,366.	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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 59-1108790

Part II Nor	ncash Property (see instructions). Use duplicate copie	es of Part II if additional space is n	eeded.
(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
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of o	regnization DOVO & OTDIO CTAINS		Page			
rianic or o	organization BOYS & GIRLS CLUBS OF	BROWARD COUNTY INC.	Employer Identification number			
Part III	Evelusively religious aboutable at		59-1108790			
	(10) that total more than \$1,000 for	the year from any one contri tions completing Part III, enter the ne vear. (Enter this information)	ns described in section 501(c)(7), (8), or butor. Complete columns (a) through (e) and ne total of exclusively religious, charitable, etconce. See instructions.) > \$			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	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			
-						
	Transferee's name, address, a	(e) Transfer of gift and 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 gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	/d\ Donatistic of the state of			
Part I		(o) osc of gift	(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
			to transferee			

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2018

Name of the organization Employer identification number BOYS & GIRLS CLUBS OF BROWARD COUNTY INC. 59-1108790 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . . 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year a 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 4 Number of states where property subject to conservation easement is located ▶ _ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sah.	BOYS edule D (Form 990) 2018	& GIRLS CLU	JBS OF I	BROWARD	COUNTY	INC.		59-11	08790	
CONTRACTOR OF THE PARTY OF THE		o Callagiana	C A . 4 . 1 . 1 . 4	7 1 199	TORON MASSAGE NEW YORK CONTRACTOR	Min	THE RESERVE OF THE PERSON NAMED IN	MATERIAL STATES OF THE STATES	Pa	ge 2
3	No. of the Control of	y Conections of	Art, HIST	orical ire	easures,	or Other	Similar	Assets (continued)	
	Using the organization's acquisition collection items (check all that apply)	, accession, and	other reci	oras, cnec	k any of	the follow	ving that	are a sig	nificant use of	its
а).								
b	TOTAL TO A CONTROL OF THE PARTY		d		or exchan	ge progra	ms			
	and the state of t		е	Other						
C	Preservation for future genera									
4	Provide a description of the organiz XIII.	ation's collection	s and exp	lain how	they furth	er the or	ganizatio	n's exemp	t purpose in P	art
5										
3	During the year, did the organization	solicit or receive	donations	of art, hist	orical trea	sures, or	other sim	ilar		
	assets to be sold to raise funds rather	r than to be maint	ained as p	art of the	organizatio	on's colle	ction?	* * * *	Yes	No
	Escrow and Custodial Arr		n =			ii				
	Complete if the organization	on answered "Ye	es" on Fo	rm 990, F	art IV, lin	ne 9, or r	eported	an amou	nt on Form	
4 -	990, Part X, line 21.									
1a	5 11	custodian or oth	er interme	diary for c	ontribution	ns or othe	r assets n	ot		
	included on Form 990, Part X?								Yes	No
D	If "Yes," explain the arrangement in I	art XIII and com	plete the fo	ollowing tab	ole:					
	B							Amount		
C					10	С				
a	Additions during the year				10	d				
9	3 ,				10	е				
f	Ending balance				11	F				
Za.	Did the organization include an amou	int on Form 990,	Part X, lin	e 21, for e	scrow or o	custodial	account li	ability?	Yes 1	Vo
D	If "Yes," explain the arrangement in F	Part XIII. Check h	ere if the e	explanation	has been	provided	on Part XI	11		
Fe	rt V Endowment Funds.	1.82.4								
	Complete if the organization				-		A			
		(a) Current year		or year	(c) Two ye		-	years back	(e) Four years bad	k
	Beginning of year balance	19,991,359.	19,36	3,797.	17,93	LONG THE RESIDENCE OF THE PARTY		8,275.	18,789,3	50.
	Contributions		(98)		15	7,318.	1	.0,000.	10,0	00.
C	Net investment earnings, gains,	007.010								
	and losses	207,219.	62	27,563.	1,27	5,271.	-21	7,067.	16,9	41.
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs								678,0	16.
	Administrative expenses									
		20,198,578.	-	1,360.	19,36			1,208.	18,138,2	15.
2	Provide the estimated percentage of	the current year	end balanc	e (line 1g,	column (a)) held as:				
	Board designated or quasi-endowmen	t >	_%							
	Permanent endowment > 75.800									
C	Temporarily restricted endowment									
2	The percentages on lines 2a, 2b, and									
ba	Are there endowment funds not in the	possession of the	e organiza	ation that a	are held as	nd admin	istered for	the		
	organization by:								Yes N	0
	(i) unrelated organizations								3a(i) 2	ζ
la.	(ii) related organizations			* * * * * *					3a(ii) 2	<
0	If "Yes" on line 3a(ii), are the related of	organizations liste	as require	ed on Sche	dule R?.				3b	
7	Describe in Part XIII the intended use	s of the organizat	ion's endo	wment fun	ds.					Deliconomy.
ા	Land, Buildings, and Equip Complete if the organization	ment. on answered "Ye	s" on For	rm 990 D	art IV lin	0110 9	oo Earm	000 D-	d V line 40	
	Description of property	(a) Cost or	other basis	(b) Cost or	other basis		umulated		T X, line 10. Book value	
l a	Land	(invest		(oth	ner)		ciation	(α)		
	Land			-	72,055.				1,972,055	-
	Buildings			19,4	72,399.	8,51	.8,571.		10,953,828	

3,143,707.

1,207,230.

1,993,978.

708,714

14,574,127. Schedule D (Form 990) 2018

1,149,729.

498,515.

d Equipment. . . .

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

1			0
	2	е	

Complete if the organization answered (a) Description of security or category	100 0111 01111 990,		
(including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year marke	on:
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B) (C)			
(D)			
(E)			
(F)			
(r) (G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered	"Yes" on Form 990, F	Part IV, line 11c. See Form 990, I	Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation	n:
(1)		Cost or end-of-year market	value
(2)			
(3)			- Oldban
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered ' (a) Desc (1) BENEFICIAL INTEREST IN IRREV	"Yes" on Form 990, P cription	Part IV, line 11d. See Form 990, F	art X, line 15 (b) Book value
(2) CONTRIBUTIONS RECEIVABLE ON DO			4,366,1
(3) CASH SURRENDER VALUE OF LIFE			2,484,6
(4)			387,2
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line	e 15)		7 000
Part X Other Liabilities. Complete if the organization answered " line 25.			7,238,1 990, Part X,
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(7)			
(7) (8)			
(7) (8) (9)			
(6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text ganization's liability for uncertain tax positions under FIN 49. (A)			

Page 4

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	-	Page 4
	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	19,226,266.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
d	Recoveries of prior year grants		
e	Add lines 2a through 2d	2e	3,751,538.
3	Subtract line 2e from line 1.	3	15,474,728.
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 168, 120.		
b	Other (Describe in Part XIII.)		
5	Add lines 4a and 4b	4c	168,120.
Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Retur	5	15,642,848.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total expenses and losses per audited financial statements	1	17,768,585.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	11,100,303.
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	3,319,214.
3		3	14,449,371.
а	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 168,120.		
b	Other (Describe in Part XIII.)		
C	Add lines 4 41	1c	168,120.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990 Part line 18)	5	14,617,491.
Part	All Supplemental Information.		
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informa	V, lir	ne 4; Part X, line
	PAGE 5	HOTI.	
-		-	

-			

Part XIII Supplemental Information (continued)

PART X, LINE 2:

THE CLUB HAS BEEN GRANTED AN EXEMPTION FROM INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C) (3) AS A NOT-FOR-PROFIT ORGANIZATION. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS REQUIRED AS OF JUNE 30, 2019 AND 2018. THE CLUB RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. THE CLUB DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX POSITIONS. THE CLUB IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2016.

PART XI, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENTS DIRECT EXPENSES

PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENTS DIRECT EXPENSES

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Part I	& GIRLS CLUBS OF BROWARD	COUNTY INC				Employer identificati	on number
				OBOULORO	I IIVaali an Fana	59-1108790	45
	Form 990-EZ filers are not r	required to com	ploto this	answered	res on Form	990, Part IV, line	17.
1 1							
	ndicate whether the organization rais Mail solicitations						
a					non-government g		
b	Internet and email solicitations	1			government grant	S	
C	Phone solicitations	1	g 💹 Spe	cial fundra	ising events		
d L	In-person solicitations						
2a [old the organization have a written or	oral agreement	with any in	dividual (in	cluding officers, o	lirectors, trustees,	
C	ir key employees listed in Form 990,	Part VII) or entit	v in conne	ction with p	professional fundra	ising services?	Yes N
D II	f "Yes," list the 10 highest paid indivious ompensated at least \$5,000 by the o	iduals or entities	(fundraise	ers) pursua	int to agreements	under which the	fundraiser is to
	ompensated at least \$5,000 by the o	organization.					
			7			1	
	(i) Name and address of individual		(iii) Did fui	ndraiser have	(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid t
	or entity (fundraiser)	(ii) Activity		or control of butions?	from activity	fundraiser listed in	(or retained by)
						col. (i)	organization
1			Yes	No			
2			-	-			
-				+=			
3			-	-			
4			-	-			
5				1			
6							
7							
8							
9	100		1				
0							
otal .				>			
3 LI	st all states in which the organization	on is registered	or licensed	to solicit	contributions or I	as been notified	it is exempt fro
re	gistration or licensing.						onompt no
	-						
			VI				
			Accompany of the second				

Page 2 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

-		events with gross receipts gre	eater than \$5,000.			
			(a) Event #1 CONCOURS D'ELEG	(b) Event #2 RENDEVOUS	(c) Other events	(d) Total events (add col. (a) through
٥			(event type)	(event lype)	(total number)	col. (c))
Revenue	1	Gross receipts	782,647.	176,375.	2,331,493.	3,290,515
L	2	Less: Contributions Gross income (line 1 minus	281,992.	10,824.	123,450.	416,266
		line 2)	500,655.	165,551.	2,208,043.	2,874,249
	4	Cash prizes				
	5	Noncash prizes	22,911.	5,940.	18,912.	47,763
Direct Expenses	6	Rent/facility costs	301,260.	38,417.	75,045.	414,722
t Expe	7	Food and beverages	251,204.	250,330.	143,157.	644,691
Direc	8	Entertainment	507,649.	408,708.	56,674.	973,031
	9	Other direct expenses	330,838.	21,739.	217,174.	569,751
Pa	11	Direct expense summary. Add line Net income summary. Subtract lir Gaming. Complete if the orga \$15,000 on Form 990-EZ, line	ne 10 from line 3, colu anization answered "\	ımn (d)	b-	2,649,958 224,291 reported more than
Revenue		\$ 10,000 OH OH 000-LZ, IIIR	(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				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
irect E	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes%	Yes%	
	7	Direct expense summary. Add line	s 2 through 5 in colun	nn (d)		
	8	Net gaming income summary. Sub	otract line 7 from line			
9 a b	E	Enter the state(s) in which the organist sthe organization licensed to cond	nization conducts gan	ning activities: n each of these state	s?	Yes No
0	-					
0 a b	V II	Vere any of the organization's gaming "Yes," explain:	licenses revoked, suspe		ring the tax year?	Yes No

BOYS	E.	GIRLS	CLUBS	OF	BROWARD	COIMING	TNIC

59-1108790

Sche	dule G (Form 990 or 990-EZ) 2018
11	Does the organization conduct gaming activities with nonmembers? Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	Tormed to administer charitable gamine?
13	Indicate the percentage of gaming activity conducted in:
a	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ▶
	Name Address
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	if tes, enter the amount of gaming revenue received by the organization \(\)
	amount of gaming revenue retained by the third party > \$
c	If "Yes," enter name and address of the third party:
	Name ►
	Address ▶
16	Gaming manager information:
	Manage N.
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE (Form 990) Department of the Treasury Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No. 1545-0047 % % 0,7 %

Open to Public Inspection

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

Employer identification number 59-1108790

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and General Information on Grants and Assistance Part

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC.

No. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, X Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II

	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table		1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2)		(1)								
(4) (5) (6) (7) (8) (9) (1) (1)		(2)		-						
(4) (5) (6) (7) (8) (9) (10) (1) (2)		(3)								
(5) (6) (7) (8) (9) (9) (1)		(4)								
(7) (8) (9) (9) (1)		(5)								
(2) (8) (9) (1) (2)		(9)								
(3) (9) (1) (1) (2)		(2)		The second secon						
(9) 10) 11) 2)		(8)		Paradamining and the Control of the						
11)		(6)		The state of the s						
11)		(0)								
2)		1)								
		2)								

JSA 8E1288 1.000 7537MP P66C

Page 2

Schedule I (Form 990) (2018)

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 non-cash assistance
1 SCHOLARSHIPS	.00°	26,500.			
2					
8					
4					
ro.					
9					
Part IV Sundamental Information Desired					
information.	ne information rec	quired in Part I, I	ine 2, Part III, c	olumn (b); and any othe	r additional

PART I DESCRIPTION OF PROCEDURE FOR MONITORING USE OF FUNDS

SCHOLARSHIP RECIPIENTS ARE REQUIRED TO MAINTAIN AT LEAST A 2.0 GRADE

POINT AVERAGE AND FULL-TIME STUDENT STATUS IN ORDER FOR THEIR

SCHOLARSHIPS TO CONTINUE. THE STUDENTS ARE REQUIRED TO SUBMIT THEIR

GRADES AT THE END OF EACH SEMESTER.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC.

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

Inspection Employer identification number

59-1108790 **Questions Regarding Compensation** Yes No 1a Check the appropriate 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 charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing 4 organization or a related organization: a Receive a severance payment or change-of-control payment?.... X 4a 4b X c Participate in, or receive payment from, an equity-based compensation arrangement?.... X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X X 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X 6a X 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe X 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

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.

BRIAN QUAIL CHIEF EXECUTIVE OFFICER MATT ORGAN EXECUTIVE VICE-PRESIDENT (ii)	-	DI GGRADINI CI	(b) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	mas	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	in column (B) reported as deferred on prior Form 990
	(1)	359,729.	0	0	19,600.	3,941.	383,270.	0.
		0.	0	0	0.0	0.	0.	0
		154,396.	0.	.0	11,117.	1,781.	167,294.	0.
	(ii)	.0	0.	.0	0	.0	0.	0,
	(E)							
3	(100)		Annual Carteria angularan da Atanaha ana ana ana ana ana ana angularan da angularan da angularan angularan ang					The state of the s
	(1)				7.00			William to the state of the sta
(i)	()							
1)) (editeration or exercise and accomply destinated by the control of			
(ii)	i) (i				And the second s			
) [ACCULATE AND ACCUL					
(ii) 9	(i							
(1)								
7	(i							
6)			American designation of the contract of the co				
(ii) 8	(1)							
8								
(ii) 6	0							
							And the second s	
10 (ii)	(1							
)							
11 (II)	(6							
(2)								
12 (ii)								Annual venterative suppression places and an advantage designated by Annual Annual Annual Annual Annual Annual
8								
13 (ii)	0							
						AND THE REPORT OF THE PROPERTY		
14 (ii)								
(3)								
15 (ii)	(
(3)								
16	(

Schedule J (Form 990) 2018

Page 3

Schedule J (Form 990) 2018

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.

Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC.

Employer identification number 59-1108790

1 2 3 4 5 6 7 8	Art - Works of art			Form 990, Part VIII, line 1g	HOMEGON GC	ntribu	tion ar	ing mounts
3 4 5 6 7	Art - Historical treasures Art - Fractional interests Books and publications					-		
4 5 6 7	Art - Fractional interests Books and publications				-			
5 6 7	Books and publications				 			
6	Clothing and house beld					-		
7	Clothing and nousehold				-			
7	goods	Х		2 200	TIME			
	Cars and other vehicles			2,200.	FMV			
8	Boats and planes							-
	Intellectual property							
9	Intellectual property							
	Securities - Publicly traded Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	or trust interests							
12	Securities - Miscellaneous							
	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
10	Real estate - Residential							
10	real estate - Commercial							
	redicate - Other , , ,	1						
	Odirectibles							
10	rood inventory							
20	Drugs and medical supplies , .							
21	Taxidermy					-		-
24	riistorical artifacts							
23	Scientific specimens							
24	Archeological artifacts						**********	
25	Other ▶(_ATCH 1)		170.	470,085.				
26	Other ▶()			170,005.				
27 (Other ▶(-
28 (Other ▶()							
Printer and Administration of the Park	Number of Forms 8283 received b	v the erge	ization during the L					
1	which the organization completed Fo	y 1116 Ulyan	nzation during the tax yea	ar for contributions for				
	- gameadon completed (c	1111 0200, F	art IV, Donee Acknowledge	ment	29			1.
30a [During the year, did the organization	n receive b	, contails, the				Yes	No
2	During the year, did the organization 28, that it must hold for at least through	n receive b	y contribution any property	y reported in Part I, lines	1 through			
t	28, that it must hold for at least thre	o ontire had	m the date of the initial co	ontribution, and which isr	't required			
b I	to be used for exempt purposes for th If "Yes," describe the arrangement in I	ie entire noi	aing period?			30a		X
31	These the organization have a	Part II.						
0	Does the organization have a gi	n accepta	nce policy that requires	the review of any no	onstandard			
-	pointibutions:					31	X	
	and the organization file of use t	miro parties	or related organizations	to solicit process or as	11			
·	Contributions!					32a		X
	roo, describe in Falt II.							
	f the organization didn't report an an describe in Part II. rerwork Reduction Act Notice, see the Instruc			rty for which column (a) is	s checked,			

JSA

Page 2

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. Part II

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION (A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
GIFT CARDS/CERTIFICATES	X	141.	443,628.	FMV
TICKETS FOR VARIOUS EVENT	X	22.	24,522.	FMV
JEWELRY	X	7.	1,935.	FMV
TOTALS	-	170.	470,085.	

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

59-1108790

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE BOYS AND GIRLS CLUBS OF BROWARD COUNTY OFFER MULTIPLE PROGRAMS FOR

BOYS & GIRLS CLUBS OF BROWARD COUNTY INC.

YOUTH IN THE FOLLOWING AREAS: MENTORING, GANG PREVENTION, CHARACTER AND LEADERSHIP EDUCATION AND CAREER DEVELOPMENT, HEALTH AND LIFE SKILLS, THE ARTS, SPORTS, FITNESS, AND RECREATION. EXAMPLES INCLUDE: (1) THE UNITED WAY PROGRAM INTRODUCING CAREERS IN THE MARINE INDUSTRY AND FREE NUTRITIOUS SNACKS TO CLUB MEMBERS; (2) THE Y.E.S. PROGRAM WORKING TO IMPROVE STUDENT PERFORMANCE IN READING AND MATH BY PROVIDING ADDITIONAL LEARNING OPPORTUNITIES TO APPROXIMATELY 700 YOUTH FROM ALL LOCATIONS.

FORM 990, PART VI, SECTION A, LINE 2: RICK CASE AND RITA CASE - HUSBAND AND WIFE; ALAN GOLDBERG AND CARY GOLDBERG - FATHER AND SON; DOUGLAS VON ALLMEN AND LINDA VON ALLMEN - HUSBAND AND WIFE.

EXPENSES \$ 9,005,502. INCLUDING GRANTS OF \$ 26,500. REVENUE \$ 0.

RICK CASE AND RAQUEL CASE - FATHER AND DAUGHTER. RITA CASE AND RAQUEL CASE - MOTHER AND DAUGHTER.

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S FORM 990 IS REVIEWED BY DESIGNATED MEMBERS OF THE FINANCE COMMITTEE. COPIES OF THE COMPLETED DRAFT ARE AVAILABLE TO ALL BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REQUIRES ALL BOARD MEMBERS, MEMBERS OF CERTAIN

COMMITTEES, AND KEY EMPLOYEES TO SIGN A CODE OF ETHICS STATEMENT THAT

INCLUDES A SECTION ON CONFLICTS OF INTERESTS. POTENTIAL INSTANCES OF

CONFLICTS OF INTERESTS ARE BROUGHT TO THE ATTENTION OF THE EXECUTIVE

COMMITTEE OF THE BOARD, WHICH MEETS REGULARLY AND REVIEWS ALL SUCH ITEMS.

FORM 990, PART VI, SECTION B, LINE 15:

ALL EMPLOYEES OF THE ORGANIZATION ARE SUBJECT TO THE ORGANIZATION'S

SALARY ADMINISTRATION PLAN, WHICH SETS FORTH GUIDELINES FOR COMPENSATION

AND SALARY INCREASES. THE NATIONAL ORGANIZATION (BOYS AND GIRLS CLUBS OF

AMERICA) PROVIDES BENCHMARK SALARY GRADE LEVELS, EACH WITH A MINIMUM,

MID-POINT, AND MAXIMUM, FOR ALL EMPLOYEES, INCLUDING THE CEO AND TOP

MANAGEMENT OFFICIALS. ANNUAL RAISES ARE BASED ON NUMERICAL PERFORMANCE

RATINGS, WHICH ARE STANDARDIZED THROUGHOUT THE ORGANIZATION. THE CEO'S

INITIAL COMPENSATION AND ANNUAL PERFORMANCE RATING IS DONE BY A BOARD

COMMITTEE TASKED WITH THIS RESPONSIBILITY. ALL OTHER EMPLOYEES, INCLUDING

TOP MANAGEMENT, ARE RATED BY THEIR SUPERVISORS.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. WE HAVE PROVIDED SUCH INFORMATION VIA EMAIL, FAX, AND HARD COPY. WE DO NOT CHARGE COPYING COSTS FOR HARD COPY REQUESTS. A COPY OF OUR ANNUAL REPORT, WHICH INCLUDES CONDENSED FINANCIAL INFORMATION, IS ON OUR WEBSITE AND

Employer identification number 59-1108790

ACCESSIBLE WITHOUT ANY PASSWORD REQUIREMENTS. OUR DONORS RECEIVE ACKOWLEDGEMENT LETTERS, WHICH INCLUDE OUR FEDERAL TAX ID# AND INFORMATION FOR CONTACTING THE FLORIDA DIVISION OF CONSUMER AFFAIRS, WHICH WILL PROVIDE A COPY OF OUR OFFICIAL REGISTRATION AND FINANCIAL INFORMATION REQUEST.

FORM 990, PART XII, LINE 2C: THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

ATTACHMENT	1
AT ITIOITITE	

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
DIANA FOOD GROUP 4020 NE 10TH WAY POMPANO BEACH, FL 33064	CATERING SERVICES	1,455,389.
AFFINITY ENTERTAINMENT INC. 224 DATURA STREET, SUITE #711 WEST PALM BEACH, FL 33401	EVENT MANAGEMENT	622,575.
ATLANTIC BUS SALES 1200 S DIXIE HWY W POMPANO, FL 33060	AUTO DEALER	406,012.
A1A TRANSPORTATION PO BOX 841879 DALLAS, TX 75284	TRANSPORTATION	363,902
BOCA RATON RESORT & CLUB 501 EAST CAMINO REAL BOCA RATON, FL 33432	LODGING & CATERING	344,715

Name of the organization BOYS & GIRLS CLUBS OF BROWARD COUNTY INC. Employer identification number 59-1108790

ATTACHMENT 2

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION

ENDING BOOK VALUE

PREPAID EXPENSES

407,368.

TOTALS

407,368.



H. Wayne & Marti Huizenga Campus David & Kay Hughes Administrative Headquarters 877 Northwest 61st Street Fort Lauderdale, Florida 33309

> Phone: 954-537-1010 Fax: 954-537-1070

August 24, 2020

BGCBC's Matching Gift Documentation

BGCBC has systems in place that allow companies to match employer donations through our on-line giving site. In addition, BGCBC has received grants where there was a matching component and BGCBC was able to utilize the grants to go out and raise more money in the community.

Through the support of our Corporate Board and their fundraising activities, in addition to aggressively pursuing all grant opportunities available, BGCBC will continue to expand upon and improve our programing offerings in order to serve our Club members and their needs.

Budget 2020-2021 City of Pompano Beach

Purpose	Projected (Action Plan)	Projected Expenses	
HBCU Day	Supplies	\$20	
	Food	\$25	
	Total Amount	\$45	
	Florida International University: 12 Club Members attending One-Day College Tour (Breakfast, Lunch & Parking)	\$20	
Six One-Day College Tours	Lynn University: 12 Club Members attending One-Day College Tour (Breakfast, Lunch & Parking)	\$204	
	Broward College: 12 Club Members attending One-Day College Tour (Breakfast & Lunch)	\$20	
	Barry University: 12 Club Members attending One-Day College Tour (Breakfast, Lunch & Parking)	\$204	
	University of Miami: 12 Club Members attending One-Day College Tour (Breakfast, Lunch &parking)	\$204	
	Florida Memorial University: 12 Club Members attending One-Day College Tour (Breakfast & Lunch)	\$204	
	Transportation (\$60 X 6 trips)	\$360	
	Breakfast (\$7 per person)	\$33(
	Lunch (\$7 per person)	\$33	
	Total Amount	\$1,03	
Snacks for Workforce Development Programs	Total Amount	\$1,584	
	Snacks and pizza party for Workforce Development Programs	\$250	
	Total Amount	\$25	
Magoosh SAT Prep	25 Club Members recieiving license for SAT Preperation program		
	\$25 x 20 licenses	\$50	
	Total Amount	\$50	
Individual STEM projects	Girls in STEM project: \$20 x 20 girls	\$40	
marardar a rein projects	Total Amount	\$40	
	Robotics kit \$25 x 20 kits	\$50	
	Crystal growing kit \$20x 20	\$40	
	Terrariums kit \$25 x 20	\$50	
	Total Amount	\$1,80	

	30 Members attending I Fly (\$52.50pp)	\$1,575
I-Fly STEM Field Trip	Lunch	\$150
	Transportation (\$225)	\$225
	Total Amount	\$1,950
Four (4) Workforce Development Career Tours	Transportation (\$60x4)	\$240
	Dinner for 12 Members (\$10 per person X 4 trips)	\$480
	Total Amount	\$720
O. J. NI. J.	memberships x 10 members	\$2,500
Code Ninjas	Total Amount	\$2,500
Supplies	College Corner Supplies	\$1,000
	Workforce Development Supplies	\$500
	Individual kits for virtual host site learning	\$1,000
	Total Amount	\$2,500
The state of the s	Grant Total Amount	\$12,254

Exhibit "B" Payment Schedule

A. AWARD DISBURSEMENTS

The awards disbursement process will begin upon full execution of the appropriations contract and will end in September, 30 for the fiscal year that this contract is approved.

B. PAYMENT SCHEDULE

The total amount awarded for the <u>BOYS & GIRLS CLUBS OF BROWARD COUNTY, INC.</u> (name of the non-profit organization) for <u>College and Career Readiness</u> (title of the program) for the current fiscal year is: <u>\$10,000</u>.

There will be three (3) payout/s during the period (depending on the amount awarded to each organization):

1. The first will equal 34% of the total allocation or \$3,400; be issued in advance. For any funds advanced the RECIPIENT agrees to provide the CITY with an itemization of how funds advanced were spent, along with invoices and proof of payment. Such an accounting must be provided to the CITY in the quarterly financial report as indicated in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description. Failure to comply with this requirement may result in the denial of the future requests for payments.

2. The second will equal 33% of the total allocation or \$3,300; will be issued upon receipt AND approval of the second quarterly narrative and financial report (including any

additional requested documents);

3. The third payout will be the final 33% of the total allocation or \$3,300; will be issued upon receipt AND approval of the third and final quarterly narrative and financial report (including any additional requested documents).

EXHIBIT C

INSURANCE REQUIREMENTS: NON PROFIT ORGANIZATION

ORGANIZATION shall not commence services under the terms of this Agreement until certification or proof of insurance detailing terms and provisions has been received and approved in writing by the CITY's Risk Manager. If you have questions regarding the insurance requirements hereunder, please contact the City's Purchasing Department at (954) 786-4098. If the contract has already been awarded, please direct any queries and proof of the requisite insurance coverage to City staff responsible for oversight of the subject project/contract.

ORGANIZATION is responsible to deliver to the CITY for timely review and written approval/disapproval Certificates of Insurance which evidence that all insurance required hereunder is in full force and effect and which name on a primary basis, the CITY as an additional insured on all such coverage. Such policy or policies shall be issued by United States Treasury approved companies authorized to do business in the State of Florida. The policies shall be written on forms acceptable to the City's Risk Manager, meet a minimum financial A.M. Best and Company rating of no less than Excellent, and be part of the Florida Insurance Guarantee Association Act. No changes are to be made to these specifications without prior written approval of the City's Risk Manager.

Throughout the term of this Agreement, CITY, by and through its Risk Manager, reserve the right to review, modify, reject or accept any insurance policies required by this Agreement, including limits, coverages or endorsements. CITY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of poor financial condition or failure to operate legally.

Failure to maintain the required insurance shall be considered an event of default. The requirements herein, as well as CITY's review or acceptance of insurance maintained by ORGANIZATION, are not intended to and shall not in any way limit or qualify the liabilities and obligations assumed by ORGANIZATION under this Agreement.

Throughout the term of this Agreement, ORGANIZATION and all subcontractors or other agents hereunder, shall, at their sole expense, maintain in full force and effect, the following insurance coverages and limits described herein, including endorsements.

- A. Worker's Compensation Insurance covering all employees and providing benefits as required by Florida Statute, Chapter 440, regardless of the size of the company (number of employees) or the state in which the work is to be performed or of the state in which the ORGANIZATION is obligated to pay compensation to employees engaged in the performance of the work. ORGANIZATION further agrees to be responsible for employment, control and conduct of its employees and for any injury sustained by such employees in the course of their employment.
 - B. Liability Insurance.
- (1) Naming the City of Pompano Beach as an additional insured as City's interests may appear, on General Liability Insurance only, relative to claims which arise from

ORGANIZATION'S negligent acts or omissions in connection with Contractor's performance under this Agreement.

(2) Such Liability insurance shall include the following checked types of insurance and indicated minimum policy limits.

Type of Insurance

Limits of Liability

GENERAL LIABILITY:

Minimum \$1,000,000 Per Occurrence and

\$2,000,000 Per Aggregate

* Policy to be written on a claims incurred basis

10	ney to be written on a ciamis men	arred basis		
XX XX	comprehensive form premises - operations explosion & collapse hazard	bodily injury and probodily injury and probability injury and probab		
\overline{XX}	underground hazard products/completed operations hazard	bodily injury and pr	roperty damage co	ombined
XX XX XX XX	contractual insurance broad form property damage independent contractors personal injury	bodily injury and probability injury and propersonal injury	roperty damage co roperty damage co	ombined ombined
XX —	sexual abuse/molestation liquor legal liability	Minimum \$1,000,0 Minimum \$1,000,0	00 Per Occurrenc 00 Per Occurrenc	e and Aggregate e and Aggregate
AUT	OMOBILE LIABILITY:	Minimum \$10,000/	\$20,000/\$10,000	. The last and the last list list list list list list list li
XX XX	comprehensive form owned hired non-owned			
REA	L & PERSONAL PROPERTY		all alle and the fine and and and and any and any and any and any and any and any and and and any any a	HE 400 THE
_	comprehensive form	Agent must show pr	roof they have thi	s coverage.
EXC	ESS LIABILITY		Per Occurrence	Aggregate
	other than umbrella	bodily injury and property damage combined	\$1,000,000	\$1,000,000
PRO	FESSIONAL LIABILITY		Per Occurrence	Aggregate
*	Policy to be written on a claims i	made basis \$1,000,0	00 \$1,000,000	

- (3) If Professional Liability insurance is required, Contractor agrees the indemnification and hold harmless provisions of Section 12 of the Agreement shall survive the termination or expiration of the Agreement for a period of three (3) years unless terminated sooner by the applicable statute of limitations.
- C. Employer's Liability. ORGANIZATION and all subcontractors shall, for the benefit of their employees, provide, carry, maintain and pay for Employer's Liability Insurance in the minimum amount of One Hundred Thousand Dollars (\$100,000.00) per employee, Five Hundred Thousand Dollars (\$500,000) per aggregate.
- D. Policies. Whenever, under the provisions of this Agreement, insurance is required of the ORGANIZATION, the ORGANIZATION shall promptly provide the following:
 - (1) Certificates of Insurance evidencing the required coverage;
 - (2) Names and addresses of companies providing coverage;
 - (3) Effective and expiration dates of policies; and
- (4) A provision in all policies affording CITY thirty (30) days written notice by a carrier of any cancellation or material change in any policy.
- E. Insurance Cancellation or Modification. Should any of the required insurance policies be canceled before the expiration date, or modified or substantially modified, the issuing company shall provide thirty (30) days written notice to the CITY.
- F. Waiver of Subrogation. ORGANIZATION hereby waives any and all right of subrogation against the CITY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then ORGANIZATION shall notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy which includes a condition to the policy not specifically prohibiting such an endorsement, or voids coverage should ORGANIZATION enter into such an agreement on a pre-loss basis.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/02/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT S
NAME: S
PHONE
(A/C, No, Ext):
E-MAIL
ADDRESS: SE Susan Arias The Beacon Group, Inc. (561) 994-9994 6001 Broken Sound Pkwy., N.W. FAX (A/C, No): (561) 997-7087 sarias@beacongroupinc.com Suite 500

Boca Raton			FL 33487-2730		INSURER(S) AFF	ORDING COVERAGE	NAIC
INSURED			11. 33467-2730			surance Company	211
	Boys & Girls Clubs of Broward	County In	•			ance Company	2110
877 NW 61 Street			u.	INSURER C: Technology Insurance Company			423
				INSURER D : Landm	ark American I	ns. Co.	3313
	Fort Lauderdale			INSURER E :			
OVEDAG			FL 33309	INSURER F:	-		
OVERAG		RTIFICATE	NUMBER: CL20331095	76		DEVISION MUMPED	
INDICATE	CERTIFY THAT THE POLICIES OF D. NOTWITHSTANDING ANY REQU	INSURANC	CE LISTED BELOW HAVE BEE!	N ISSUED TO THE INS	URED NAMED A	ABOVE FOR THE POLICY DE	DIOD
CENTIFICA	ALE MAY BE ISSUED OF MAY DED.	TAIRL TIPE IS	IOI Im Care -	CONTINUE OF OTHE	IN DUCUMENT	WITH RESPECT TO WHICH	THIS
EXCLUSIO	ATE MAY BE ISSUED OR MAY PER ONS AND CONDITIONS OF SUCH P	OLICIES. LI	MITS SHOWN MAY HAVE REE	N PEDLICED BY DAID	ED HEREIN IS	SUBJECT TO ALL THE TERM	IS,
R R	TYPE OF INSURANCE	INSD WV	RI	POLICY EEE	JLAINS.		
COMMERCIAL GENERAL LIABILITY	MMERCIAL GENERAL LIABILITY	TINGD VVVI	POLICY NUMBER	(MM/DD/YYYY	POLICY EXP (MM/DD/YYYY)	LIMITS	
	CLAIMS-MADE X OCCUR					EACH OCCURRENCE	\$ 1,000,000
	WILL IN DECOR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
		-	500 0000 10 -			MED EXP (Any one person)	\$ 10,000
CENII A	20050	- '	506-898812-7	04/01/2020	04/01/2021	PERSONAL & ADV INJURY	\$ 1,000,000
100	GGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	2 000 000
POL	JE01						1 000 000
	HER:					PRODUCTS - COMP/OP AGG	\$ 1,000,000
-	BILE LIABILITY				 	COMBINED SINGLE LIMIT	
-	AUTO SCHEDILLED					(Ea accident)	\$ 1,000,000
AUT	OS ONLY AUTOS		506-898812-7	04/01/2020	04/01/2021	BODILY INJURY (Per person)	\$
HIRE AUT	OS ONLY NON-OWNED AUTOS ONLY			0.0002020	04/01/2021	BODILY INJURY (Per accident) PROPERTY DAMAGE	\$
						(Per accident)	\$
WIMBRELLA LIAB OCCUR					Uninsured Motorist	\$ 1,000,000	
B EXCESS LIAB CLAIMS-MADE		582113977-2	04/04/0000		EACH OCCURRENCE	\$ 5,000,000	
DED		1	002110077-2	04/01/2020	04/01/2021	AGGREGATE	\$ 5,000,000
	COMPENSATION	\vdash					s
ANY PROP	OYERS' LIABILITY PRIETOR/PARTNER/EXECUTIVE					PER OTH- STATUTE ER	
OFFICER/N (Mandator)	VIEWBER EXCLUDED?	N/A	TWC3860582	04/01/2020	04/01/2021	E.L. EACH ACCIDENT	s 500,000
If yes deen	rihe under			0 110 112020	04/01/2021	E.L. DISEASE - EA EMPLOYEE	\$ 500,000
DESCRIPT	ION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500,000
Excess t	Jmbrella			Each Ocurrence	5,000,000		
		LHA089510	04/01/2020	04/01/2021	Aggregate		
			A CONTRACTOR OF THE CONTRACTOR			- 9994.0	5,000,000
RIPTION OF	F OPERATIONS / LOCATIONS / VEHICLE	S (ACORD 1	01, Additional Remarks Schedule, n	nay be attached if more sn	ace is required)		
ual Abuse	is 1,000,000 per person/3,000,000	per policy	period under the General Liab	pility US Fire policy and	d ¢5 000 000	-d- 11	
·y.				- In policy and	α φ5,000,000 <u>μ</u>	nder the Umbrella North Riv	rer
				ADDD	OLIED	1 3/2	
				APPRO	UVED		
				Ry Dania	llo The	LA BOLD	<
				by Daille	ne i norp	e at 3:43 pm, Oc	t 14, 2020
	HOLDER	- Management of the second	TO THE RESERVE TO THE PARTY OF				
TIFICATE	The second secon	-		CANCELLATION			The state of the s
TIFICATE			The second secon				
RTIFICATE							
RTIFICATE				SHOULD ANY OF THE	IE ABOVE DES	CRIBED POLICIES BE CANO	CELLED BEFORE
RTIFICATE	City of Pompano Beach					CRIBED POLICIES BE CANO	CELLED BEFORE
RTIFICATE	City of Pompano Beach 100 West Atlantic Blvd.			SHOULD ANY OF TH THE EXPIRATION DA ACCORDANCE WITH			CELLED BEFORE ED IN
RTIFICATE					THE POLICY		CELLED BEFORE ED IN

A072032

© 1988-2015 ACORD CORPORATION. All rights reserved.