Check if applicable:

В

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Т

Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2022 calendar year, or tax year beginning and ending C Name of organization D Employer identification number BOYS & GIRLS CLUBS

	Addr	ge OF GREATER SI. LOUIS INC					
	Name	pe Doing business as	43-6061693				
	Initia	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Final retur			314-335-			
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	21,406,195.		
	Amer	SAINI LOUIS, MO 85107		H(a) Is this a group re	eturn		
	Appli dion	F Name and address of principal officer: DR • FLINI FOWLER		for subordinates	? Yes X No		
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No		
<u>I</u> T	ax-e>	xempt status: 🗴 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) (or 📃 527	If "No," attach a	list. See instructions		
	Vebs			H(c) Group exemption			
		f organization: 🔀 Corporation 📄 Trust 🦳 Association 🦳 Other	L Year	of formation: 1967 N	A State of legal domicile: MO		
Pa	rt I	Summary					
Ð	1	Briefly describe the organization's mission or most significant activities: TO E	NABLE	YOUTH TO REA	ALIZE THEIR		
nce		FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE	AND (CARING CITIZ	ENS.		
Governance	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass			
0V6	3			41			
8 0	4	Number of independent voting members of the governing body (Part VI, line 1b)			41		
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		312			
iviti	6	Total number of volunteers (estimate if necessary)		185			
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12		0.			
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		0.		
				Prior Year	Current Year		
er	8	Contributions and grants (Part VIII, line 1h)		18,884,696.	18,087,329.		
ent	9	Program service revenue (Part VIII, line 2g)		267,832.	573,842.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,048,581.	<u>69,758.</u> -197,337.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-76,096.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		20,125,013.	18,533,592.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	-		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,962,985.	7,424,990.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		43,518.	9,274.		
ă.		Total fundraising expenses (Part IX, column (D), line 25) 1,156,47		4 225 242	4 705 066		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,335,343. 12,341,846.	<u>4,705,066.</u> 12,139,330.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)					
	19	Revenue less expenses. Subtract line 18 from line 12		7,783,167. ginning of Current Year	<u>6,394,262</u>		
ts or nces			Ве	• •	End of Year		
Assets Balanc	20	Total assets (Part X, line 16)	······	34,830,394.	38,176,427.		
et A	21	Total liabilities (Part X, line 26)	······ —	2,759,709.	1,239,542.		
	22 rt II	Net assets or fund balances. Subtract line 21 from line 20		32,070,685.	36,936,885.		
r a							

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

Sign	Signature of officer			Date							
Here DR. FLINT FOWLER, EXECUTIVE DIRECTOR Type or print name and title											
										Print/Type preparer's name	Preparer's signature
Paid	KIMBERLY A RYAN			self-employed P00829977							
Preparer	Firm's name RUBINBROWN LLP			Firm's EIN 43-0765316							
Use Only	Firm's address 7676 FORSYTH BLVD	, SUITE 2100									
SAINT LOUIS, MO 63105 Phone no. (314) 290-											
May the I	Aay the IRS discuss this return with the preparer shown above? See instructions										
232001 12-1	2001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)										

	BOYS & GIRLS CLUBS			
Form	990 (2022) OF GREATER ST. LOUIS INC	43-606	1693	Page 2
Pa	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III		<u></u>	X
1	Briefly describe the organization's mission:	י דיזיק ס		
	TO INSPIRE AND ENABLE YOUTH AGES 6 TO 18 TO REALIZE THEI POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS		BOYS A	
	GIRLS CLUBS OF GREATER ST. LOUIS INC PROVIDES RECREATION			
	AND EDUCATIONAL FACILITIES FOR YOUTH IN THE METROPOLITAN			
2	Did the organization undertake any significant program services during the year which were not listed on the	<u> </u>	010	
-	prior Form 990 or 990-EZ?		Yes	XNo
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	XNo
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by	expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe			nd
	revenue, if any, for each program service reported.			
4a				890.)
	THE HERBERT HOOVER CLUB (HHC) IS OUR ORIGINAL FACILITY L			RTH
	ST. LOUIS CITY. HHC SERVES APPROXIMATELY 1,700 YOUTH AN			
	78,000 SQUARE-FOOT STATE LICENSED FACILITY HOUSES A COMP			
	DENTAL CLINIC, EMERSON TECHNOLOGY CENTER, LEARNING CENTE	-		ICS
		EN CENT	ER,	
	PERFORMING ARTS STUDIO, FOOTBALL FIELD, FITNESS CENTER A ADMINISTRATIVE OFFICES OF THE CLUB.	ND THE		
	ADMINISTRATIVE OFFICES OF THE CLOB.			
4b	(Code:) (Expenses \$1,576,940. including grants of \$) (Rever	nue \$	51,	867.)
	MATHEWS-DICKEY BOYS' AND GIRLS' CLUB MERGED WITH THE ORG			/
	2021. THE GOAL OF MATHEWS-DICKEY IS TO FOSTER A SENSE OF	COMPET	ENCE,	A
	SENSE OF PURPOSE, AND A SENSE OF POWER IN EVERY YOUNG PE	RSON. T	'HE	
	MATHEWS-DICKEY CLUB SERVES YOUNG PEOPLE EACH YEAR THROUG			GE
	OF PROGRAMS AND SUPPORT SERVICES, INCLUDING VARIOUS SPOR	TS PROG	RAMS.	
4-	(Code:) (Expenses \$ 1,236,005. including grants of \$) (Rever		10	239.)
4c	(Code:) (Expenses \$1,236,005. including grants of \$) (Revent FERGUSON TEEN CENTER (FTC) OPENED IN THE FALL OF 2019 AN			
	AGES 12-18, GIVING THEM A SAFE ENVIRONMENT STRUCTURED AR			
		S PROGR	AM HA	s
	AN EMPHASIS ON HEALTH & WELLNESS, EDUCATION & WORKFORCE			
	LEADERSHIP & CIVIC ENGAGEMENT.			
4d	Other program services (Describe on Schedule O.)			
	0.042 E14	263,815	•)	
4e	Total program service expenses9,243,714.			00
			Form 9	990 (2022)
232002	2 12-13-22 2			
600	2 $2022 04030 BOYS S GIRLS ($	יז.זיפ סי		00112

05460927 132842 00113.0000

OF GREATER ST. LOUIS INC

43-6061693 F	Page 3
--------------	--------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10		10	x	
11	or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
u	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1.0		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u> </u>
16		16		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes."			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		х
232003	12-13-22		990 (

3

232003 12-13-22

Form 990 (2022)

Part IV Checklist of Required Schedules

05460927 132842 00113.0000

OF GREATER ST. LOUIS INC

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24 2	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		<u> </u>
24 a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		├──
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a		28a		x
L	"Yes," complete Schedule L, Part IV	20a		X
	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	200		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00		x
	"Yes," complete Schedule L, Part IV	28c	v	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1		1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	1
Pa		<u> </u>	•	
	Check if Schedule O contains a response or note to any line in this Part V			
		<u></u>	Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 103			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
U	(gambling) winnings to prize winners?	1c		
232004	4 12-13-22		990	(2022)
				()

Form 990 (2022)

2022.04030 BOYS & GIRLS CLUBS OF GRE 00113.01

4

BOYS & GIRLS CLUBS

Form	990 (2022) OF GREATER ST. LOUIS INC	43-6061	693	Pa	age 5			
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
				Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a 312						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	X				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule (D	3b					
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	4a		X			
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).						
5a			5a		<u>X</u>			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		X			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	organization solicit						
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		_X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts						
	were not tax deductible?		6b					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a	X				
b			7b	X				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required						
	to file Form 8282?		7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f 7g		X			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat		7h					
8								
	sponsoring organization have excess business holdings at any time during the year?							
9								
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a					
b			9b					
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12	10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b						
11	Section 501(c)(12) organizations. Enter:	44.						
	Gross income from members or shareholders	<u>11a</u>						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	446						
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b 10412	100					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	12a					
ы 13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?		13a					
a	Note: See the instructions for additional information the organization must report on Schedule O.		104					
h	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans	13b						
с	Enter the amount of reserves on hand	13c						
14a			14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera							
	excess parachute payment(s) during the year?		15		х			
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х			
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	ivities						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17					
_	If "Yes," complete Form 6069.							
232005	12-13-22		Form	990	(2022)			

5

05460927 132842 00113.0000

BOYS	&	GIRI	S	CI	LUBS	
OF GI	REZ	ATER	ST	١.	LOUIS	INC

Form	990 (2022) OF GREATER ST. LOUIS INC		43-606	1693	Р	age 6			
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below, and for	a "No" r	espon	se			
-	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.								
	Check if Schedule O contains a response or note to any line in this Part VI					X			
Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4	1					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	1b	4	1					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	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	t supervision						
	of officers, directors, 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 99		s filed?			X			
5	Did the organization become aware during the year of a significant diversion of the organization's asso	ets?		. 5		X X			
6	Did the organization have members or stockholders?			6		<u> </u>			
/a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			7-		x			
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ookho	ldoro or	<u>7a</u>					
b	persons other than the severing had 2			76		x			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			7b					
		-	-	8a	Х				
	The governing body? Each committee with authority to act on behalf of the governing body?				- 23	x			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			0.0					
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev		Code)						
		<u>/cnuc</u>	0000.)		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a	Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such cha								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	Х				
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	flicts?	. 12b	Х				
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe						
	on Schedule O how this was done			12c	Х				
13	Did the organization have a written whistleblower policy?			13	X				
14	Did the organization have a written document retention and destruction policy?			14	X				
15	Did the process for determining compensation of the following persons include a review and approval	by ind	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				37				
	The organization's CEO, Executive Director, or top management official				X				
b	Other officers or key employees of the organization			15b	X				
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		ith a						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem			10-		x			
L	taxable entity during the year?			<u>16a</u>					
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi-	-							
				16b					
Sec	exempt status with respect to such arrangements?								
17	List the states with which a copy of this Form 990 is required to be filed IL								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	-T (section 501(c)(3)s only)	availal	ble			
	for public inspection. Indicate how you made these available. Check all that apply.	2 000		-,, y) '	unu				
	Own website Another's website X Upon request Other (explain	on Sc	hedule ()						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, col			nd financ	cial				
	statements available to the public during the tax year.		, and the point of						
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records						
	DR. FLINT FOWLER - 314-335-8000								
	2901 NORTH GRAND BOULEVARD, ST. LOUIS, MO 63107								
232006	12-13-22			Form	990	(2022)			

232006 12-13-22

OF GREATER ST. LOUIS INC

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

Employees, and Independent Contractors

Form 990 (2022)

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

		Tgu	mza			ipen	Juic			
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Average Position (do not check more than one					one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss per	rson i	s both	n an	compensation	compensation	amount of
	week					i/irus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		ee	bens		(W-2/1099-MISC/	1099-NEC)	organization and related
	organizations below	ual tr	tional		yolqr	t con /ee	~	1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DR. FLINT FOWLER	60.00				×	1 0	ш			
CHIEF EXECUTIVE OFFICER		1		x				266,846.	0.	12,770.
(2) RUTH L. LEDERMAN	40.00									
VICE PRESIDENT OF RESOURCE DEV.					Х			156,716.	0.	6,526.
(3) INDIGO SAMS	40.00									
VICE PRESIDENT OF PROGRAMS						X		146,177.	0.	9,435.
(4) RENEE SEAMAN	40.00									
VICE PRESIDENT OF HR & ADMIN						X		137,563.	0.	11,879.
(5) REGINA KNAPP	40.00									
VICE PRESIDENT OF FINANCE				X				136,696.	0.	10,639.
(6) MARK J. BULANDA	2.00									
CHAIR		Х		X				0.	0.	0.
(7) MARK E. STALLION	2.00									
VICE CHAIR		Х		X				0.	0.	0.
(8) MATT REDENIUS	2.00									
TREASURER		Х		X				0.	0.	0.
(9) MICHELE SOWERS	2.00									
SECRETARY		Х		Х				0.	0.	0.
(10) MIKE ANDREW	2.00									
BOARD MEMBER		Х						0.	0.	0.
(11) DAVID APLINGTON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) GREGG BERDY, M.D., F.A.C.S.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(13) LISA BERTAIN	2.00								0	
BOARD MEMBER (14) MARY M. BONACORSI	2.00	X		-		-		0.	0.	0.
BOARD MEMBER	2.00	x						0.	0.	0.
(15) LORENZO M. BOYD	2.00	Δ						0.	0.	0.
BOARD MEMBER	2.00	х						0.	0.	0.
(16) JEN CALL	2.00							0.		<u> </u>
BOARD MEMBER	2:00	х						0.	0.	0.
(17) MARK C. DARRELL	2.00								Ŭ.	
BOARD MEMBER		x						0.	0.	0.
232007 12-13-22										Form 990 (2022)
					-					(-)

BOYS & GIRLS CLUBS	BOYS	&	GIRLS	CLUBS
--------------------	------	---	-------	-------

OF GREATER ST. LOUIS INC

43-6061693 Page 8

Form 990 (2022) OF GREAT	ER ST. I	JOU	JIS	I	NC	ч -			43-6061	693	Page 8
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)		
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Posi	ition			Reportable	Reportable		nated
Name and the	hours per		not cl					compensation	compensation		unt of
	week		cer an					from	from related		her
	(list any	tor						the	organizations		ensation
	hours for	direc						organization	(W-2/1099-MISC/		n the
	related	e or	stee			Isate		(W-2/1099-MISC/	1099-NEC)		ization
	organizations	ruste	l trus		ee	nper		1099-NEC)	1000 (120)	j v	related
	below	dual t	Ition		lold	yee	-				izations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organ	
(18) JOHN FARMER	2.00			0	×						
BOARD MEMBER	2.00	x						0.	0.		0.
		^				<u> </u>		0.	0.		0.
(19) DANIEL S. FARRELL	2.00								•		•
BOARD MEMBER		Х				<u> </u>		0.	0.		0.
(20) CRYSTAL GALE, PH.D.	2.00										
BOARD MEMBER		Х						0.	0.		0.
(21) CLIVE GRANNUM	2.00										
BOARD MEMBER		x						0.	0.		0.
(22) KEITH GROSZ	2.00							•••	•••		
BOARD MEMBER	2.00	x						0.	0.		0.
		^				<u> </u>		0.	0.		0.
(23) LEAH REYNOLDS HARRIS	2.00								•		•
BOARD MEMBER		Х				<u> </u>		0.	0.		0.
(24) SEAN JOE, PH.D.	2.00										
BOARD MEMBER		Х						0.	0.		0.
(25) TALIYA KING	2.00										
BOARD MEMBER		x						0.	0.		0.
(26) MARK LEVISON	2.00										
BOARD MEMBER	2.00	x						0.	0.		0.
		Δ						843,998.	0.	E 1	,249.
1b Subtotal										1 21	
c Total from continuation sheets to Part V								0.	0.		0.
d Total (add lines 1b and 1c)								843,998.	0.	51	,249.
2 Total number of individuals (including but i	not limited to th	iose	liste	d ab	ove) wh	io re	eceived more than \$100,	000 of reportable		
compensation from the organization											5
										Y	'es No
3 Did the organization list any former officer	, director, trust	ee. k	kev e	mpl	ove	e. or	hia	hest compensated empl	ovee on		
line 1a? If "Yes," complete Schedule J for s			-	•				•	•	3	X
4 For any individual listed on line 1a, is the s											
-	-		-					-	-		
and related organizations greater than \$15										4	x
5 Did any person listed on line 1a receive or											
rendered to the organization? If "Yes," cor	nplete Schedul	e J f	or su	ich p	oers	on .				5	X
Section B. Independent Contractors											
1 Complete this table for your five highest co	ompensated inc	depe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compensa	tion from	1
the organization. Report compensation for	the calendar v	ear e	endin	a wi	ith c	or wi	thin	the organization's tax ve	ear.		
(A)	y			0				(B)		(C)	
Name and business	s address	N	ONE	2				Description of s	ervices C	Compens	ation
										-	
							_				
• Tatalarank (1) bir tatalar											
2 Total number of independent contractors (u u	ot lir	niteo	ι το t			ted	above) who received mo	ore than		
\$100,000 of compensation from the organ				— —	(-					
SEE PART VII, SECTIO	N A CONT	'TN	UΑ	TI(ON	S	ΗE	ETS		Form 99	90 (2022)

232008 12-13-22

8

Form 990 OF GREAT				5 I	NC	1			43-606	1693
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(C	heck	(all '	that	app	ly)	compensation	compensation	amount of other
	per week					e		from the	from related organizations	compensation
	(list any	ctor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ted en		(W-2/1099-MISC)	,	organization
	related	stee o	rustee			oen sa				and related
	organizations	al tru	onal t		ploye	com				organizations
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(27) ROBERT MINKLER, JR., CPA/CGMA	2.00	-	-	0	×	-	Ē			
BOARD MEMBER		х						0.	0.	0.
(28) JESS MOORE	2.00									
BOARD MEMBER		Х						0.	Ο.	0.
(29) RICHARD NIX, JR.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(30) CHONDA NWAMU	2.00	1								
BOARD MEMBER		Х						0.	0.	0.
(31) LARRY E. PARRES	2.00									
IMMEDIATE PAST CHAIR		Х						0.	0.	0.
(32) NICK RAGONE	2.00								0	0
BOARD MEMBER	2 00	Х						0.	0.	0.
(33) ADAM W. RANDLE BOARD MEMBER	2.00	x						0.	0.	0.
(34) MATT RENNER	2.00	A				-		0.	0.	0.
BOARD MEMBER	2.00	x						0.	0.	0.
(35) MEGAN RIDGEWAY	2.00								0.	0.
BOARD MEMBER	2.00	x						0.	0.	0.
(36) SUZIE SPENCE	2.00									
BOARD MEMBER		х						0.	0.	0.
(37) CYNTHIA STOKLEY	2.00									
BOARD MEMBER		х						0.	Ο.	0.
(38) JOHN STUPP III	2.00									
BOARD MEMBER		Х						0.	0.	0.
(39) NICOLE TATE	2.00									
BOARD MEMBER		Х						0.	0.	0.
(40) DAVE TOUCHETTE	2.00									
BOARD MEMBER		Х						0.	0.	0.
(41) LYNN ANN VOGEL	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(42) KELVIN R. WESTBROOK	2.00								0	0
BOARD MEMBER	2 00	Х	-	<u> </u>	-			0.	0.	0.
(43) T. WILLIAM WHITE BOARD MEMBER	2.00	x						0.	0.	0.
(44) ERIKA WILLIAMS	2.00	^		-	-	-		U•	U •	U•
BOARD MEMBER	2.00	x						0.	0.	0.
(45) ALAN WINSLOW	2.00	- 23						<u>0.</u>	•	0.
BOARD MEMBER		x						0.	0.	0.
(46) SUSAN YATES	2.00							.	~ •	
BOARD MEMBER		x						0.	Ο.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) (A) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 743,198. Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 46,304. 1b b Membership dues c Fundraising events 1,056,667. 1c d Related organizations 1d 1,633,993. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 14607167. similar amounts not included above ... 1f 108,148. 1g \$ g Noncash contributions included in lines 1a-1f 18087329. h Total. Add lines 1a-1f **Business Code** 573,842. 711300 573,842. 2 a PROGRAM REVENUE Program Service b Revenue С d f All other program service revenue 573,842. g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 230,837. 230,837. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 19,635. 6a 6 a Gross rents 0. 6b **b** Less: rental expenses 19,635. c Rental income or (loss) 6c 19,635. 19,635. d Net rental income or (loss) (i) Securities (ii) Other **7 a** Gross amount from sales of 7a 2333842. assets other than inventory **b** Less: cost or other basis 7ь2479167. 15,754. Other Revenue and sales expenses c Gain or (loss) ______ 7c - 145325. - 15,754. -161,079. -161,079. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 1,056,667. of contributions reported on line 1c). See 8a 158,741. Part IV, line 18 8b377,682. **b** Less: direct expenses -218,941. 218,941. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** iscellaneous 11 a Revenue b 711300 1,969. 1,969. d All other revenue 1,969. e Total. Add lines 11a-11d 0.-129,548. 18533592. 575,811 **12** Total revenue. See instructions Form 990 (2022)

BOYS & GIRLS CLUBS

OF GREATER ST. LOUIS INC

232009 12-13-22

Form 990 (2022)

05460927 132842 00113.0000

10

2022.04030 BOYS & GIRLS CLUBS OF GRE 00113.01

43-6061693

Page 9

OF GREATER ST. LOUIS INC Part IX Statement of Functional Expenses

(D) Fundraising expenses 297. 275,08 902. 618,77 068. 81,48 997. 67,47 022. 585.
expenses expenses 297. 275,08 902. 618,77 068. 81,48 997. 67,47 022.
297. 275,08 902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
902. 618,77 068. 81,48 997. 67,47 022.
068. 81,48 997. 67,47 022.
068. 81,48 997. 67,47 022.
068. 81,48 997. 67,47 022.
068. 81,48 997. 67,47 022.
997. 67,47 022.
997. 67,47 022.
997. 67,47 022.
022.
585.
061.
9,27
879.
000 1 14
290. 1,14
641. 96,89 968. 1,73
968. 1,73
616.
080. 6
000.0
596. 2,31
090.
<u> </u>
560.
343.
526. 2,15
618. 8
139. 1,156,47

11

232010 12-13-22

Form 990 (2022)

05460927 132842 00113.0000

Form 990 (2022)

F .	000 "	BOYS & GIRLS CI				12	6061603 - 44
Form Par	990 (2 † X	2022) OF GREATER ST. Balance Sheet	т00	TD TINC		43-	6061693 Page 11
T ai	נא	Check if Schedule O contains a response or note	to any	line in this Part Y			
		Check in Schedule O contains a response of hote	to any				(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			147,705.	1	29,942.
	2	Savings and temporary cash investments			1,481,462.	2	3,106,453.
	3	Pledges and grants receivable, net			2,861,876.	3	1,666,912.
	4	Accounts receivable, net			379,016.	4	618,643.
	5	Loans and other receivables from any current or				-	
	-	trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifi	•				
	-	under section 4958(f)(1)), and persons described				6	
6	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				64,156.	9	83,284.
		Land, buildings, and equipment: cost or other			•		•
		basis. Complete Part VI of Schedule D	10a	36,052,205.			
	b	Less: accumulated depreciation		16,715,792.	20,430,381.	10c	19,336,413.
	11	Investments - publicly traded securities		· · · · ·	9,249,835.	11	13,287,657.
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		215,963.	13	0.	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			0.	15	47,123.
	16	Total assets. Add lines 1 through 15 (must equa			34,830,394.	16	38,176,427.
	17	Accounts payable and accrued expenses			800,294.	17	433,042.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete P			21		
s	22	Loans and other payables to any current or forme	er office	er, director,			
Liabilities		trustee, key employee, creator or founder, substa					
abil		controlled entity or family member of any of these	e perso	ns		22	
Ë	23	Secured mortgages and notes payable to unrelat	ed third	d parties	1,959,415.	23	759,934.
	24	Unsecured notes and loans payable to unrelated	third pa	arties		24	
	25	Other liabilities (including federal income tax, pay	ables t	o related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X			
		of Schedule D			0.	25	46,566.
	26	Total liabilities. Add lines 17 through 25			2,759,709.	26	1,239,542.
		Organizations that follow FASB ASC 958, chec	ck here	X			
ces		and complete lines 27, 28, 32, and 33.					
lan	27				22,720,787.	27	30,084,177.
Ba	28	Net assets with donor restrictions			9,349,898.	28	6,852,708.
pun		Organizations that do not follow FASB ASC 95	68, cheo	ck here			
Ē		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current funds				29	
Sei	30	Paid-in or capital surplus, or land, building, or equ				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc			20 000 000	31	
Ne	32	Total net assets or fund balances			32,070,685.	32	36,936,885.
	33	Total liabilities and net assets/fund balances	<u></u>		34,830,394.	33	38,176,427.
							Form 990 (2022)

232011 12-13-22

	BOYS & GIRLS CLUBS					
Form	1 990 (2022) OF GREATER ST. LOUIS INC	43-	60616	93	Pag	_{ge} 12
	rt XI Reconciliation of Net Assets					2
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,			
3	Revenue less expenses. Subtract line 2 from line 1	3				62.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	32,	070),6	85.
5	Net unrealized gains (losses) on investments	5	-1,	528	3,0	62.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
_	column (B))	10	36,	936	5,8	85.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>		X
			-		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 1			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		····· -	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis				37	
b	Were the organization's financial statements audited by an independent accountant?		····· -	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			0	x	
	review, or compilation of its financial statements and selection of an independent accountant?			2c	<u> </u>	
0-	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	aule O	·			
Ja	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			20	x	1
Ŀ	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		F	3a	<u>л</u>	<u> </u>
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		I	3b	x	1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits					(2022)

Form **990** (2022)

232012 12-13-22

(Form 990) Complete if the organization is a section 501(c)(3) organization or a section	OMB No. 1545-0047
4947(a)(1) nonexempt charitable trust.	Open to Public
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection
	ntification number
	6061693
Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.	
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)	
1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).	
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)	
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).	
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the h	hospital's name,
city, and state:	
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in	1
 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). 	
 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 	ic doscribod in
section 170(b)(1)(A)(vi). (Complete Part II.)	
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 	
 9 A agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 	eae
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or	090
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross	oss receipts from
activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from g	
income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after J	June 30, 1975.
See section 509(a)(2). (Complete Part III.)	
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).	
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purport	ooses of one or
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check	ck the box on
lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.	
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving	ng
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the suppor	orting
organization. You must complete Part IV, Sections A and B.	
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having	
control or management of the supporting organization vested in the same persons that control or manage the supported	ed
organization(s). You must complete Part IV, Sections A and C.	
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with	ith,
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.	
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentivenes	
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.	:55
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III	
functionally integrated, or Type III non-functionally integrated supporting organization.	
f Enter the number of supported organizations	
g Provide the following information about the supported organization(s).	
(i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization listed in your governing document? (v) Amount of monetary (vi	vi) Amount of other
above (see instructions)) Yes No support (see instructions) supp	oport (see instructions)
Total	

Sch		F GREATER					1693 Page 2
Pa	rt II Support Schedule for	Organizations	Described in	Sections 170(b)(1)(A)(iv) and	l 170(b)(1)(A)(v	i)
	(Complete only if you checked	d the box on line 5	, 7, or 8 of Part I or	r if the organizatio	n failed to qualify u	under Part III. If the	organization
	fails to qualify under the tests	listed below, pleas	se complete Part I	II.)			
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9079309.	9763258.	8807434.	18884696.	18087329.	64622026.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	9079309.	9763258.	8807434.	18884696.	18087329.	64622026.
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)						4962266.
	Public support. Subtract line 5 from line 4.						59659760.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	9079309.	9763258.	8807434.	<u>18884696.</u>	<u>18087329.</u>	64622026.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	268,327.	327,360.	291,534.	268,366.	250,472.	1406059.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)				114,369.		114,369.
11	Total support. Add lines 7 through 10						66142454.
	Gross receipts from related activities,	•	,			<u></u>	<u>,938,395.</u>
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	ourth, or fifth tax	year as a section 5	01(c)(3)	
_	organization, check this box and stor						·····
	ction C. Computation of Publi					11	00.00
14	Public support percentage for 2022 (I						90.20 %
15	Public support percentage from 2021						90.07 %
1 6a	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	VI how the organiz	zation
	meets the facts-and-circumstances te	-		• • • •	-		
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets th						
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2022

(Complete only if you checked t			organization failed	to qualify under Pa	art II. If	the organizat	tion fails to
qualify under the tests listed be Section A. Public Support	low, please comp	lete Part II.)					
••				()) ((n) —
alendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and							
membership fees received. (Do not							
include any "unusual grants.")							
2 Gross receipts from admissions, merchandise sold or services per-							
formed, or facilities furnished in							
any activity that is related to the							
organization's tax-exempt purpose							
3 Gross receipts from activities that							
are not an unrelated trade or bus-							
iness under section 513							
4 Tax revenues levied for the organ-							
ization's benefit and either paid to							
or expended on its behalf							
5 The value of services or facilities							
furnished by a governmental unit to							
the organization without charge							
6 Total. Add lines 1 through 5							
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons							
b Amounts included on lines 2 and 3 received							
from other than disqualified persons that							
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.)							
Section B. Total Support							
alendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						<u> </u>	
10a 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							
c Add lines 10a and 10b							
11 Net income from unrelated business activities not included on line 10b,							
whether or not the business is							
regularly carried on							
12 Other income. Do not include gain or loss from the sale of capital							
assets (Explain in Part VI.)							
13 Total support. (Add lines 9, 10c, 11, and 12.)							
14 First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, ⁻	fourth, or fifth tax y	ear as a section 5	601(c)(3)	organization	١,
check this box and stop here							[
	Cupport Dor	centage					
	Support Per		olumn (f))		15		
Section C. Computation of Public		ivided by line 13, o			16		
Section C. Computation of Public Public support percentage for 2022 (lir Public support percentage from 2021 section 2021	ne 8, column (f), di				1 10 1		
 Section C. Computation of Public Public support percentage for 2022 (lin Public support percentage from 2021 statements) 	ne 8, column (f), di Schedule A, Part I	III, line 15					
Section C. Computation of Public 15 Public support percentage for 2022 (lin 16 Public support percentage from 2021 Section D. Computation of Invest	ne 8, column (f), di Schedule A, Part I tment Income	III, line 15 Percentage			17		
 Section C. Computation of Public Public support percentage for 2022 (lin Public support percentage from 2021 section D. Computation of Invest Investment income percentage for 202 	ne 8, column (f), di <u>Schedule A, Part I</u> tment Income 22 (line 10c, colun	III, line 15 Percentage nn (f), divided by li	ne 13, column (f))		· · ·		
 Section C. Computation of Public Public support percentage for 2022 (lir Public support percentage from 2021 section D. Computation of Invest Investment income percentage for 202 Investment income percentage from 2 	ne 8, column (f), di Schedule A, Part I Itment Income 22 (line 10c, colun 021 Schedule A, I	III, line 15 Percentage nn (f), divided by li Part III, line 17	ne 13, column (f))		17 18	, and line 17	is not
Section C. Computation of Public15Public support percentage for 2022 (lin16Public support percentage from 2021 (lin16Public support percentage from 2021 (lin17Investment income percentage for 20218Investment income percentage from 219a331/3% support tests - 2022. If the computation of the co	ne 8, column (f), di Schedule A, Part I Itment Income 22 (line 10c, colun 1021 Schedule A, l organization did n	III, line 15 Percentage nn (f), divided by li Part III, line 17 ot check the box of	ne 13, column (f)) on line 14, and line	15 is more than 3	17 18 3 1/3%		Г
 Section C. Computation of Public Public support percentage for 2022 (lin Public support percentage from 2021 section D. Computation of Invest Investment income percentage for 202 Investment income percentage from 2 19a 33 1/3% support tests - 2022. If the emore than 33 1/3%, check this box and 	he 8, column (f), di Schedule A, Part I tment Income 22 (line 10c, colun 021 Schedule A, l organization did n d stop here. The	III, line 15 Percentage nn (f), divided by li Part III, line 17 ot check the box o organization quali	ne 13, column (f)) on line 14, and line fies as a publicly s	15 is more than 3 upported organiza	17 18 33 1/3%		[
 Section C. Computation of Public Public support percentage for 2022 (lin Public support percentage from 2021 section D. Computation of Invest Investment income percentage from 2021 Investment income percentage from 2021	he 8, column (f), di Schedule A, Part I tment Income 22 (line 10c, colun 221 Schedule A, I organization did n d stop here. The organization did n	III, line 15 Percentage nn (f), divided by li Part III, line 17 ot check the box o organization quali ot check a box on	ne 13, column (f)) on line 14, and line fies as a publicly si line 14 or line 19a	15 is more than 3 upported organiza , and line 16 is mo	17 18 33 1/3% ation	33 1/3%, an	[d
 Section C. Computation of Public Public support percentage for 2022 (lin Public support percentage from 2021 section D. Computation of Invest Investment income percentage for 202 Investment income percentage from 2 Investment income percentage from 3 Investment income percentage from 3 Investment income percentage from 3 	he 8, column (f), di Schedule A, Part I Itment Income 22 (line 10c, colun 021 Schedule A, l organization did n d stop here. The organization did n ck this box and sto	III, line 15 Percentage nn (f), divided by li Part III, line 17 ot check the box of organization quali ot check a box on op here. The orga	ne 13, column (f)) on line 14, and line fies as a publicly s line 14 or line 19a nization qualifies a	15 is more than 3 upported organiza , and line 16 is mo s a publicly suppo	17 18 33 1/3% attion pre than	33 1/3%, an ganization	[d

Schedule A (Form 990) 2022

05460927 132842 00113.0000

¹⁶

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Schedule A (Form 990) 2022 OF (Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

17

232024 12-09-22

10b Schedule A (Form 990) 2022

BOYS & GIRLS CLUBS	BOYS	&	GIRLS	CLUBS
--------------------	------	---	-------	-------

OF GREATER ST. LOUIS INC

Pa	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported			
2	organization (s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			

, , , , , , , , , , , , , , , , , , ,	
or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
or management of the supporting organization was vested in the same persons that controlled or managed	
the supported organization(s)	

Section D	. All Type III Supporting Organizations

Schedule A (Form 990) 2022

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	d that the organization used	d to satisfy the Integral Part	t Test during the vear	(see instructions)
•	Check the DOX heat to the method	<i>inal line organization use</i>			1000 1100 000

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity	Describe in Part VI how you supported a governmental entity (see instructions).	
---	--	--	---	--

18

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*232025 12-09-22

3b | | Schedule A (Form 990) 2022

2a

2b

3a

Yes No

05460927 132842 00113.0000

Sche	dule A (Form 990) 2022 OF GREATER ST. LOUIS I	NC		43-6061693 Page 6
_	rt V Type III Non-Functionally Integrated 509(a)(3) Support			·3
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
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		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see

instructions).

Schedule A (Form 990) 2022

232026 12-09-22

05460927 132842 00113.0000

BOYS	&	GIRI	S	CLUBS		
OF CI	ਨ ਸ਼ਾਤ	ላ ጥ ድ ጽ	ST	٦	LOUTS	TNC

_	dule A (Form 990) 2022 OF GREATER ST		·	4	3-6061693	Page 7
Par	<u> </u>	a)(3) Supporting Orga	nizations (continu	ied)	1	
Secti	on D - Distributions				Current Yea	ır
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
_4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	IS	(iii) Distributabl Amount for 20	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
b	From 2018					
C	From 2019					
d	From 2020					
e	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2022 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j and 4c.					
8	Breakdown of line 7:					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					

Schedule A (Form 990) 2022

232027 12-09-22

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 E, lines 2, 5, and 6. Also complete this part for any additional information.						
(See instructions.)						
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:						
INSURANCE PROCEEDS						

2021 AMOUNT: \$ 114,369.

Schedule A (Form 990) 2022

232028 12-09-22

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,

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; ** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

Name of the organization	
BOYS & GIRLS CLUBS	
OF GREATER ST. LOUIS INC	43-6061693
Organization type (check one):	

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

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set of the parts unless totaling the year for an *exclusively* for the parts unless totaling \$5,000 or more during the year for an *exclusively* set is the set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless total set of the parts unless the set of the parts unless total set

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

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

Schedule B (Form 990) (2022)

	B (Form 990) (2022)		-	Page 2	
			Emplo	yer identification number	
	& GIRLS CLUBS EATER ST. LOUIS INC		43	-6061693	
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(c) Total contributions		
<u> 1</u>		\$743,1	<u>98.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution	
2		\$ 403,332.		Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio			
3		\$430,5		Type of contribution Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution	
4		\$4,000,0		Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution	
5		\$422,0	<u>49.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution	
223452 11-15		\$1,000,5	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)	

Schedule B (Form 990) (2022)

Schedule I	B (Form 990) (2022)			Page 2
Name of o			Emplo	yer identification number
	& GIRLS CLUBS EATER ST. LOUIS INC		43	-6061693
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
7		\$ <u>5,200,0</u>	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

	3 (Form 990) (2022)		Page 3
Name of or			Employer identification number
	& GIRLS CLUBS EATER ST. LOUIS INC		43-6061693
Part II		if additional analos is peode	•
	Noncash Property (see instructions). Use duplicate copies of Part II i		J.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		 \$	

Schedule B (Form 990) (2022)

05460927 132842 00113.0000

Schedule I	B (Form 990) (2022)			Page 4			
	organization		Employer id	dentification number			
BOYS	& GIRLS CLUBS						
	EATER ST. LOUIS INC			061693			
Part III	Exclusively religious, charitable, etc., contributio			han \$1,000 for the year			
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, c	haritable, etc., contributions of \$1,000 or I	25S for the year. (Enter this info. once.) \$				
	Use duplicate copies of Part III if additional s	pace is needed.					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of ho	w aift is hold			
Part I	(b) Furpose of gift		(d) Description of no	w gift is field			
		(e) Transfer of gif					
				_			
	Transferee's name, address, an		Relationship of transferor to tra	insferee			
(a) No.							
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of ho	w gift is held			
<u> </u>							
		(e) Transfer of gif					
	Transferee's name, address, ar	ansferee					
(a) No.							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of ho	w gift is held			
Part I							
			<u> </u>				
		(e) Transfer of gif	I				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to tra	ansferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of ho	w aift is held			
Part I							
		/ \ -					
		(e) Transfer of gift					
	T						
	Transferee's name, address, an	iu ZIP + 4	Relationship of transferor to tra	INSTEREE			
		[
223454 11-15	5-22	I		edule B (Form 990) (2022)			
		26	Cent				

26 2022.04030 BOYS & GIRLS CLUBS OF GRE 00113.01

SC	SCHEDULE D Supplemental Financial Statements							
(Forn	n 990)		nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		ZU2	2022		
	ment of the Treasury	Α	ttach to Form 990.		Open to			
	I Revenue Service		0 for instructions and the latest information		Inspection r identification number			
Nam	e of the organization	OF GREATER ST. LOUI	IS INC		3 - 60616			
Par	rt I Organiza		d Funds or Other Similar Funds or <i>I</i>					
		answered "Yes" on Form 990, Part IV, lin						
			(a) Donor advised funds	(b) Funds an	d other accou	nts		
1	Total number at en	d of year						
2		contributions to (during year)						
3	Aggregate value of	grants from (during year)						
4	Aggregate value at	end of year						
5	-		writing that the assets held in donor advised fu					
			exclusive legal control?		Yes	No		
6	5 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only							
			r donor advisor, or for any other purpose confe	0	—			
Par					Yes	No		
			ganization answered "Yes" on Form 990, Part	IV, line 7.				
1		ervation easements held by the organizatio						
		of land for public use (for example, recreat f natural habitat	tion or education) Preservation of a his			L		
		of open space		ertinea historic	structure			
2		• •	ied conservation contribution in the form of a	conservation e	asoment on th	o last		
2	day of the tax year				at the End of th			
а								
b								
c	•		ucture included in (a)					
d		vation easements included in (c) acquired a						
		., .		2d				
3			eased, extinguished, or terminated by the orga		g the tax			
	year							
4	Number of states v	vhere property subject to conservation eas	ement is located					
5	Does the organizat	ion have a written policy regarding the per	iodic monitoring, inspection, handling of					
	violations, and enfo	prcement of the conservation easements it	holds?		Yes	No		
6	Staff and volunteer	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easement	s during the ye	ear		
7	Amount of expense	es incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation e	easements dur	ing the year			
8			e satisfy the requirements of section 170(h)(4)(—	<u> </u>		
-					Yes	No		
9		•	on easements in its revenue and expense state					
			ote to the organization's financial statements	that describes	the			
Par		ounting for conservation easements.	Art, Historical Treasures, or Other	Similar As	sets			
		the organization answered "Yes" on Form						
10			8, not to report in its revenue statement and b	alance sheet w	orke			
ia	•	· •	lic exhibition, education, or research in further					
			icial statements that describes these items.					
b	· •		8, to report in its revenue statement and balan	ce sheet work	s of			
			exhibition, education, or research in furtheran					
		ng amounts relating to these items:			,			
				\$				
2	If the organization		asures, or other similar assets for financial gair	n, provide				
		ints required to be reported under FASB A						
а	Revenue included	on Form 990, Part VIII, line 1		\$				
				\$				
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	for Form 990.	Sche	dule D (Form	990) 2022		
232051	1 09-01-22		0.5					
			27	~ ~ ~ ~ ~ ~				

05460927 132842 00113.0000

^{2022.04030} BOYS & GIRLS CLUBS OF GRE 00113.01

		GIRLS CLUBS										•
		TER ST. LOU						43-6	506	1693	Pa	age 2
Par	t III Organizations Maintaining C									(continu	ied)	
3												
	collection items (check all that apply):											
а	Public exhibition	d			hange progra	am						
b	Scholarly research	e		Other								
С	Preservation for future generations											
4	Provide a description of the organization's co								art XI	II.		
5												
_	to be sold to raise funds rather than to be ma					<u></u>				Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered '	"Yes" on	Form	990, Part	IV, line	e 9, or		
	reported an amount on Form 990, Pa											
1a	Is the organization an agent, trustee, custodi											-
	on Form 990, Part X?									Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing t	able:			_					
									Α	mount		
С	Beginning balance						. 1	c				
d	Additions during the year						. 1	d				
е	Distributions during the year						. 1	e				
f	Ending balance							f				
2a	Did the organization include an amount on Fe									Yes		No
b	If "Yes," explain the arrangement in Part XIII.]
Par	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 1	0.					
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Thr	ree years ba	ack (e) Four y	years	back
1a	Beginning of year balance	6,899,012.	5	,667,848.	5,313	3,012.		4,596,70	97.	5,0	022,	567.
b	Contributions	48,825.		877,988.	377,988.							
с	Net investment earnings, gains, and losses	-1,249,074.		581,340.	523	1,262.		853,48	84.	- 3	312,	272.
d	Grants or scholarships											
	Other expenditures for facilities											
	and programs	249,722.		228,164.	160	5,426.		137,17	9.	1	113,	588.
f	Administrative expenses											
g	End of year balance	5,449,041.	6	,899,012.	5,66	7,848.	ļ	5,313,01	.2.	4,5	596,	707.
2	Provide the estimated percentage of the curr	· · · · · ·				,		, ,		•	,	
	Board designated or quasi-endowment	.0000	%	g, oolanni (a)								
b	Permanent endowment 97.3900	%	_/*									
c	Term endowment 2.6100											
Ŭ	The percentages on lines 2a, 2b, and 2c sho											
39	Are there endowment funds not in the posse		tion tha	t are held an	nd administer	ed for th	۵					
oa	organization by:	ssion of the organiza					C				Yes	No
	c								1	3a(i)		X
	· · · · · · · · · · · · · · · · · · ·									3a(ii)		X
Ь	(ii) Related organizations									3b		
										30		
_	Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.											
	Complete if the organization answere		Part IV	/ line 11a S	ee Form 990	Part X	line 10)				
	Description of property	(a) Cost or o basis (investr		• • •	or other (other)		ccumu oreciat		(0	d) Book	value	9
	Lond	· · · · ·	iony		4,043.	uep	orcordi		1	,734	0	13
	Land					10 3	201	602				
	Buildings				<u>3,205.</u>			603.		,528		
	Leasehold improvements				4,073.			622.	1	<u>,181</u>	-	
	Equipment				<u>4,941.</u>			045.		500	-	
	Other				5,943.			522.	1 0	391		
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part J	X, colun	nn (B), line 10	0c.)					,336		
								Sched	lule D	(Form	990)	2022

232052 09-01-22

BOZ	ζS	&	GIRI	LS CI	LUBS	
OF	GF	REZ	ATER	ST.	LOUIS	INC

43-6061693 Page 3

Part VII	Investments -	Other S	Securities
Schedule D) (Form 990) 2022	OF	GREATE

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

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

<u>1. (a)</u> D	1. (a) Description of liability	
(1) Federal income taxes		
(2) CURRENT PORT	ION OF LEASE LIABILITY	21,361.
(3) NONCURRENT P	ORTION OF LEASE	
(4) LIABILITY		25,205.
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Fo	orm 990, Part X, col. (B) line 25.)	46,566.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Schedule D (Form 990) 2022

232053 09-01-22

	BOYS & GIRLS CLUBS				
Sche	dule D (Form 990) 2022 OF GREATER ST. LOUIS INC				6061693 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wit	h Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.			
1	Total revenue, gains, and other support per audited financial statements			1	16,951,651.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-1,528,062.		
b	Donated services and use of facilities	. 2b	30,000.		
с	Recoveries of prior year grants	. 2c			
d					
е	Add lines 2a through 2d			2e	-1,498,062.
3	Subtract line 2e from line 1			3	18,449,713.
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	83,879.		
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	83,879.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	18,533,592.		
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		ith Expenses per F	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l			
1				1	12,085,451.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2 a	30,000.		
b	Prior year adjustments	. 2b			
С	Other losses	. <u>2c</u>			
d					
е				2e	30,000.
3	Subtract line 2e from line 1			3	12,055,451.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		83,879.		
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines 4a and 4b			4c	83,879.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	12,139,330.
Pa	t XIII Supplemental Information.				

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

PART V, LINE 4:

ENDOWMENT	FUNDS	GO	TOWARDS	CHARACTER	AND	LEADERSHIP	PROGRAMS	, MENTORING
-----------	-------	----	---------	-----------	-----	------------	----------	-------------

PROGRAMS, TECHNOLOGY PROGRAMS AND EDUCATION AND CAREER DEVELOPMENT.

232054 09-01-22

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19, or if the	2022
Department of the Treasury		Attach to Form 990					Open to Public
Internal Revenue Service		o www.irs.gov/Form990 for instru	ctions	and th	ne latest informatio	າ.	Inspection
Name of the organization	2010 4	GIRLS CLUBS TER ST. LOUIS INC				Employer	identification number 61693
Part I Fundrais		Complete if the organization answe	ered "Y	es" or	Form 990, Part IV, I		
required to	complete this part	t.					
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list b If "Yes," list the 10 	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising o ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes DNo
compensated at le	ast \$5,000 by the	organization.					
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col. (by) to (or retained by)
			Yes	No			
		1	1	I			
Total			<u></u>	<u></u>			
3 List all states in whitor licensing.	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is exempt fror	n registration

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

Schedule G (Form 990) 2022

232081 10-27-22

0.1			0000
Schedule (э (гош	1 990)	2022

BOYS & GIRLS CLUBS OF GREATER ST. LOUIS INC

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ. lines 1 and 6b. List events with gross receipts greater than \$5,000.

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2 DINNER	(c) Other events	(d) Total events (add col. (a) through
			GOLF EVENT	AUCTION	5	col. (c)
a)			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	383,772.	654,735.	176,901.	1,215,408.
	2	Less: Contributions	281,236.	624,735.	150,696.	1,056,667.
	3	Gross income (line 1 minus line 2)	102,536.	30,000.	26,205.	158,741.
	4	Cash prizes				
	5	Noncash prizes	28,136.		425.	28,561.
Direct Expenses	6	Rent/facility costs		16,000.		16,000.
	7	Food and beverages	52,655.	74,418.	57,396.	184,469.
Dir	8	Entertainment		2,550.	600.	3,150.
	9	Other direct expenses	21,833.	94,390.	29,279.	145,502.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)			377,682.
_		, , , , , , , , , , , , , , , , , , , ,				-218,941.
Ра	rt I		answered "Yes" on Form	1 990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	1	(b) Pull tabs/instant		(d) Total gaming (add
IUe			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
Å	1	Gross revenue				
ŝ	2	Cash prizes				
t Expenses	3	Noncash prizes				

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))				
1	Gross revenue								
2	Cash prizes								
3	Noncash prizes								
4	Rent/facility costs	(a) Bingo bing (b) Bingo bing (a) Bingo bing (b) Bingo bing (c) Bingo (c) Bingo (c) Bingo							
5	Other direct expenses								
6	Volunteer labor		└── Yes % └── No	Yes %					
7									
8	Net gaming income summary. Subtract line 7	from line 1, column (d)							
ls t	he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No				
	, , , , , , , , , , , , , , , , , , , ,		•		Yes No				
	2 3 4 5 6 7 8 Ent 1 Ist 0 If "	1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 8 Net gaming income summary. Subtract line 7 Enter the state(s) in which the organization condu Is the organization licensed to conduct gaming action of the organization's gaming licenses restricted to the organization of the organization's gaming licenses restricted to the organization of t	1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these If "No," explain:	(a) Bingo bingo/progressive bingo 1 Gross revenue	(a) Bingo bingo/progressive bingo (c) Other gaming 1 Gross revenue				

232082 10-27-22

Schedule G (Form 990) 2022

<u> </u>	BOYS & GIRLS CLUBS	COC1 CO 3	
		6061693	<u> </u>
11 12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	Yes	No
	to administer charitable gaming?	Yes	No No
	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility		%
	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records:	13b	%
14	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Ves	🗌 No
	 If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party: 		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
â	Mandatory distributions: a 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	🗌 Yes	No
Pa	organization's own exempt activities during the tax year \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, lines 9,	9b, 10b,
2320	83 10-27-22 Sche	dule G (Form	990) 2022

nedule G	(Form	990)	
	-		

Schedule G	G (Form 990)	OF GREATER	ST.	LOUIS	INC	43-6061693	Page 4
Part IV	G (Form 990) Supplemental Infor	rmation (continued)					
						.	
						Schedule G (F	orm 990)

SCI	HEDULE J	Compensation Information		OMB No. 1	545-004	47
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest	ľ	20	n n	
-	-	Compensated Employees		20	22	
Dopor	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Nam	e of the organization			identificatio		nber
		OF GREATER ST. LOUIS INC	43-6	506169:	3	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate 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 c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
		ation and gross-up payments	s			
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b	Х	
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	X	
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
		ation of the CEO/Executive Director, but explain in Part III.				
	X Compensatior					
		compensation consultant X Compensation survey or study				
	Form 990 of o	ther organizations X Approval by the board or compensation c	ommittee			
	During the second line	Lange and the lange from 200. De taille Andrea Andrea de la ille anno at the line filmer				
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
-	organization or a re			10		x
		e payment or change-of-control payment?				X
	-	eive payment from a supplemental nonqualified retirement plan?		4.		X
С		hes 4a-c, list the persons and provide the applicable amounts for each item in Part III.		+0		- 23
	IT TES to any of in	les 4a°c, list the persons and provide the applicable amounts for each item in Fart III.				
	Only section 501/c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
5	contingent on the r					
а	-			5a		x
b	Any related organiz	ation?		5u 5b		x
~		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r					
а	-	~ 		6a		Х
		ation?				X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	;			
		nes 5 and 6? If "Yes," describe in Part III		7		Х
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?	<u></u>	9		
LHA		eduction Act Notice, see the Instructions for Form 990.		dule J (Forn	n 990)	2022

232111 10-18-22

BOYS & GIRLS CLUBS OF GREATER ST. LOUIS INC

Schedule J (Form 990) 2022

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) DR. FLINT FOWLER	(i)	266,846.	0.	0.	8,575.	4,195.	279,616.	0.	
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) RUTH L. LEDERMAN	(i)	156,716.	0.	0.	5,800.	726.	163,242.	0.	
VICE PRESIDENT OF RESOURCE DEV.	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) INDIGO SAMS	(i)	146,177.	0.	0.	5,020.	4,415.	155,612.	0.	
VICE PRESIDENT OF PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2022

Page 2

43-6061693

Schedule J (Form 990) 2022

Part III Supplemental Information

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

PART I, LINE 1A:

THE EXECUTIVE DIRECTOR IS PROVIDED A MEMBERSHIP TO A SOCIAL CLUB IN ORDER

TO HOLD BUSINESS LUNCHES, MEETINGS, ETC. RELATED TO THE BOYS AND GIRLS

CLUBS OF GREATER ST. LOUIS INC.

43-6061693

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

(FOI	rm 990)		·	`omplete if t	he oro	anizatione	answered "Yes" o	n Eorm 990 Dar	t IV lines (20 or 30		20	22
	nent of the T Revenue Se		C	-		-	Attach to Form 9 990 for instruction	90.				Open to Inspec	
		ganizatior		(S & GI		-		is and the latest	mormauc		nployer ide	•	
Name		gamzation		GREATE								-60616	
Par	†Ι ∣ Τ	ypes of				1 • 100	ID INC				ŦĴ	00010	
<u></u>		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	11000	<u> </u>		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part	orted on	nor	Method of ncash contr		0
1	Art - Wor	ks of art											
				ods									
						X	9	79	9,587.	FAIR	MARKE	T VAI	JUE
				ock									
		s - Partne	rship, LL										
12													
13	Qualified	conserva structures	tion cont	ribution -									
14				ribution - Oth									
20				 S									
				·····									
25	Other			ITEMS		x	60	2.8	8.561.	FATR	MARKE		JUE
26	Other	·			;				<u>,,,,,</u>				
27	Other	(;								
28	Other	(;								
		of Forms	8283 rec	eived by the	, organi [.]	zation during	g the tax year for co	ontributions					
							Donee Acknowledge		29				
		r the orga		,ompicted i t	02	00,1 art v, L	Solice Acknowledge		23				Yes No
30a	•	•	Ũ				on any property rep ontribution, and whi			•	at it		
				ntire holding		•						30a	x
b		•		gement in Pa								Ju	
31	,			0		policy that re	equires the review o	of any nonstanda	rd contribu	tions?		31	X
		-			-		ganizations to solic	-					
	contribut	tions?		•				· · ·				32a	x
		describe i											
33			didn't rep	port an amou	int in c	olumn (c) fo	r a type of property	for which colum	n (a) is che	cked,			
		in Part II.											
LHA	For Pa	perwork	Reductio	on Act Notic	e, see	the Instruc	tions for Form 990).			Schedule	e M (Form	990) 202

232141 09-09-22

BOYS	&	GIRLS	CLUBS

OF GREATER ST. LOUIS INC Schedule M (Form 990) 2022 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

<u>SCHEDULE M, PART I,</u> COLUMN (B):

THE BOYS AND GIRLS CLUB OF GREATER ST. LOUIS INC. IS REPORTING THE

NUMBER OF AUCTION ITEMS AND SECURITIES RECEIVED.

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. BOYS & GIRLS CLUBS



43-6061693

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

OF GREATER ST. LOUIS INC

COMMUNITY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES OFFERED BY THE BOYS AND GIRLS CLUBS OF GREATER

ST. LOUIS INC. INCLUDE: ADAMS PARK CLUB, SOUTH EAST MIDDLE SCHOOL CLUB,

A PROJECT LEARN PLUS PROGRAM AT HAZELWOOD EAST HIGH SCHOOL, HAZELWOOD

ELEMENTARY SCHOOL CLUB, O'FALLON PARK CLUB, RIVERVIEW GARDENS CLUB, LEE

HAMILTON ELEMENTARY SCHOOL CLUB, THE BE GREAT: GRADUATE PROGRAM AT

ROOSEVELT AND NORMANDY HIGH SCHOOLS, MENTOR ST. LOUIS, ST. LOUIS

INTERNSHIP PROGRAM, BETHALTO CLUB, AND THE LOVEJOY SCHOOL.

EXPENSES \$ 4,265,337. INCLUDING GRANTS OF \$ 0. REVENUE \$ 263,815.

FORM 990, PART VI, SECTION A, LINE 8B:

THE EXECUTIVE COMMITTEE DOES NOT HAVE THE AUTHORITY OF ACT ON BEHALF OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE RETURN IS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM. THE

RETURN IS REVIEWED BY THE BOARD TREASURER AND FINANCE COMMITTEE. THE

RETURN IS THEN MADE AVAILABLE TO THE ENTIRE BOARD PRIOR TO FILING.

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

THE BOARD OF DIRECTORS AND ALL EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF

INTEREST POLICY ON AN ANNUAL BASIS. THE EXECUTIVE DIRECTOR REVIEWS

INFORMATION CONTAINED IN THE SIGNED STATEMENTS TO MONITOR POTENTIAL

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990) 202223221110-28-22

40

Schedule O (Form 990) 2022 Page 2 Name of the organization BOYS & GIRLS CLUBS Employer identification number 43-6061693 OF GREATER ST. LOUIS INC CONFLICTS THAT COULD ARISE. ANY CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE BOARD CHAIR FOR RESOLUTION AND POTENTIAL DISCUSSION AT THE UPCOMING BOARD MEETING. IF THE BOARD CHAIR IS CONSIDERED TO HAVE A REAL OR PERCEIVED CONFLICT OF INTEREST, THE DECISION FOR THE EXISTENCE OF A CONFLICT IS DELEGATED TO THE VICE CHAIR. ANY PERSON WHO IS UNDER CONSIDERATION OF BEING IN CONFLICT IS PRECLUDING FROM PARTICIPATING IN DISCUSSIONS AND DECISIONS ON THE MATTER. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION FOR THE EXECUTIVE DIRECTOR BASED ON AN INDEPENDENT ANALYSIS, DONE BY THE BOYS AND GIRLS CLUBS OF AMERICA (BGCA), THAT REVIEWS RELEVANT SALARY SURVEYS AND COMPARABLE POSITIONS REGIONALLY AND NATIONALLY. THE SALARY DECISIONS OF THE EXECUTIVE COMMITTEE ARE DOCUMENTED IN THE

EMPLOYEE'S PERMANENT FILE. THE ANALYSIS FOR THE EXECUTIVE DIRECTOR IS

COMPLETED PERIODICALLY BY THE BOARD OF DIRECTORS, WHILE THE ANALYSIS FOR

THE COMPENSATION FOR ALL OTHER OFFICERS AND EMPLOYEES, ALSO PREPARED BY

BGCA, WAS LAST PERFORMED DURING 2016.

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

WE MAKE OUR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

NO CHANGE FROM PRIOR YEAR.

232212 10-28-22

232161	09-14-22	LHA
--------	----------	-----

(Form 990)	Comple	Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.									
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form990 for i	instructions and the latest info	ormation.			Open to Public Inspection				
Name of the organizatio	n BOYS & GIRLS C OF GREATER ST.	CLUBS					entification number 61693				
Part I Identification	n of Disregarded Entities. Comple	ete if the organization answered "Yes" o	on Form 990, Part IV, line 33.								
	(a)	(b)	(c)	(d)	(e)		(f)				
Name, addre	ess, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year asse	ets Di	rect controlling				
of d	isregarded entity		foreign country)				entity				
AP MERGER SUB, LLC	1	PROVIDE FACILITIES TO BOYS									
2901 NORTH GRAND B	OULEVARD	AND GIRLS CLUBS OF GREATER				BOYS AND	D GIRLS CLUBS OF				
ST. LOUIS, MO 631	07	ST. LOUIS INC.	MISSOURI	-134,375.	3,437,19	8. GREATER	ST. LOUIS INC.				
MSL MERGER SUB, LL	C										
2901 NORTH GRAND B	OULEVARD	PROVIDE MENTORING TO PUBLIC				BOYS AND	D GIRLS CLUBS OF				
ST. LOUIS, MO 631	07	SCHOOL STUDENTS	MISSOURI	-38,646.	727,09	0. GREATER	ST. LOUIS INC.				
MD CONVERSION SUB,	LLC										
2901 NORTH GRAND B	OULEVARD	7				BOYS AND	D GIRLS CLUBS OF				

YOUTH ENRICHMENT PROGRAMS

YOUTH ENRICHMENT PROGRAMS

Related Organizations and Unrelated Partnerships

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13 trolled tity?
				501(c)(3))		Yes	No
	_						
	_						
						+	
	_						
						+	<u> </u>
	_						
	-						
						+	+
	-						

MISSOURI

ILLINOIS

Ο.

0.

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

Schedule R (Form 990) 2022

493,537. GREATER ST. LOUIS INC.

BOYS AND GIRLS CLUBS OF

0. GREATER ST. LOUIS INC.

OMB No. 1545-0047

SCHEDULE R	
(Farma 000)	

ST. LOUIS, MO 63107

324 E. CENTRAL AVENUE

BETHALTO, IL 60210

BOYS AND GIRLS CLUB OF BETHALTO, LLC

1

Schedule R (Form 990) 2022 OF GREATER ST. LOUIS INC

43-6061693 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		-								1	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	lo
	-										
	-										
										+ +	
	1										
										+	+
	4										
	1										
	l					1		1	l		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)		01 11000				Yes	No
									<u> </u>
	1							'	
	1							1	

Schedule R (Form 990) 2022 OF GREATER ST. LOUIS INC

Part V	Transactions With Related Organization	ons Complete if the organization answe	ered "Yes" on Form 990, Part IV, line 34, 35b, o	or 36
	Transactions with helated organization	Jij . Complete in the organization anowe		JI 00.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a				
	Gift, grant, or capital contribution to related organization(s)	1b				
	Gift, grant, or capital contribution from related organization(s)	1c				
	Loans or loan guarantees to or for related organization(s)	1d				
	Loans or loan guarantees by related organization(s)	1e				
f	Dividends from related organization(s)	1f				
g	Sale of assets to related organization(s)	1g				
	Purchase of assets from related organization(s)	1h				
	Exchange of assets with related organization(s)	1i				
	Lease of facilities, equipment, or other assets to related organization(s)	1j				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k				
	Performance of services or membership or fundraising solicitations for related organization(s)	11				
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m				
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n				
	Sharing of paid employees with related organization(s)	10				
р	Reimbursement paid to related organization(s) for expenses	1p				
q	Reimbursement paid by related organization(s) for expenses	1q				
r	Other transfer of cash or property to related organization(s)	1r				
S	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	1s				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.					

(a) Name of related organ	nization Trans	b) (c) saction Amount involved e (a·s)	(d) d Method of determining amount involved
(1)			
<u>(2)</u>			
<u>(</u> 3)			
<u>(</u> 4)			
<u>(5)</u>			
_(6)			

Schedule R (Form 990) 2022 OF GREATER ST. LOUIS INC

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	(g) Share of end-of-year assets	(r Disprotion allocat Yes) opor- ate ions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General of managin partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2022

BOYS & GIRLS CLUBS OF GREATER ST. LOUIS INC

Part VII Supplemental Information

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

Schedule R (Form 990) 2022

232165 09-14-22

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type o print	r Name of exempt organization or other filer, see instru BOYS & GIRLS CLUBS	Taxpayer	ridentification nun	nber (TIN)					
P	OF GREATER ST. LOUIS INC				43-6061693				
File by the due date t filing your return. Se	Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.						
	instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAINT LOUIS, MO 63107								
Enter th	Enter the Return Code for the return that this application is for (file a separate application for each return)								
Applica	ation	Return	Application			Return			
ls For		Code	Is For			Code			
Form 9	90 or Form 990-EZ	01	Form 1041-A			08			
Form 4	720 (individual)	03	Form 4720 (other than individual)			09			
Form 9	90-PF	04	Form 5227			10			
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 9	90-T (trust other than above)	06	Form 8870			12			
Form 9	90-T (corporation) DR • FLINT FOWLI	07							
Tele • If th • If th box • 1 I tt 2 If	request an automatic 6-month extension of time until ne organization named above. The extension is for the orga ▶ X calendar year 2022 or	s in the Uni Group Exe and atta NOVE! anization's , an heck reaso	Fax No. ▶ ited States, check this box	f this is fo all membe	r the whole group ers the extension i opt organization re	s for.			
a	ny nonrefundable credits. See instructions.			3a	\$	0.			
	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b					0.			
c E	c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by								
u	sing EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.			
Cautio instruct	n: If you are going to make an electronic funds withdrawal tions.	(direct det	bit) with this Form 8868, see Form 84	453-TE and	d Form 8879-TE fo	r payment			
LHA	For Privacy Act and Paperwork Reduction Act Notice.	see instru	ictions.		Form 8868 (Rev. 1-2022)			