Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990 rtax vear beginning JUL 1, 2013 and ending JUN 30, 2014 A For the 2013 calendar year, or tax year beginning JUL 1, 2013

В	Check if applicab	C Name of organization		D Employer identific	cation number
_	Addre	THE BOIS & GIRLS CLUB OF BURBANK AND			
H	chang Name chang			۸- ۸	405745
F	Initial		5 / 11		485745
F	return Terminated		Room/suite		
F	Amen	dad			842-9333 2285641.
F	return Applic			G Gross receipts \$	
L	⊥ltiòn pendi	F Name and address of principal officer:LORRIE COPELAND		H(a) Is this a group re	
		SAME AS C ABOVE		H(b) Are all subordinates in	? Yes X No
	Tay-ov	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) d	or 52	⊣ ` ′	list. (see instructions)
		te: NWW BGCBURBANK ORG	01 32	H(c) Group exemptio	
_		organization: X Corporation Trust Association Other	I Vear		1 State of legal domicile: CA
		Summary	IL TOU	or formation. 2002 N	y otate or logal dorniolic. C11
	A CONTRACTOR AND ADDRESS OF THE	Briefly describe the organization's mission or most significant activities: TO Pl	ROVIDI	E PROGRAMS F	OR KIDS AND
Activities & Governance		TEENS AGE 6 TO 17 YRS OLD WHILE BUILDING	CHAR	ACTER AND SE	LF-ESTEEM.
rna	2	Check this box if the organization discontinued its operations or dispose			
ove				3	22
S		Number of independent voting members of the governing body (Part VI, line 1b)			22
es		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			140
viti	6	Total number of volunteers (estimate if necessary)		6	200
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)		1310360.	1154007.
Revenue		Program service revenue (Part VIII, line 2g)		1024592.	1112575.
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4412.	8199.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<22272.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2317092.	2231046.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
101		Benefits paid to or for members (Part IX, column (A), line 4)		1491707.	1638752.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	·····	1491/0/.	1638752.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 1754	/11	U •	U •
EXT	17			738918.	654184.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2230625.	2292936.
		Revenue less expenses. Subtract line 18 from line 12		86467.	<61890.>
or es	13	nevenue less expenses. Subtract line 16 from line 12	R	eginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)	۲	584747.	653995.
Ass Ba	21	Total liabilities (Part X, line 16) Total liabilities (Part X, line 26)		151981.	114785.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		432766.	539210.
Pa	art II	Signature Block			3372231
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and stater	ments, and to the best of m	y knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh			
Sig	n	Signature of officer		Date	-
Her	e				
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai		ROBERT GABON ROBERT GABON		03/03/15 if self-employ	P00178995
	parer	Firm's name JLK ROSENBERGER, LLP		Firm's EIN	27-1532099
Use	Only	Firm's address 801 N BRAND BLVD., SUITE 550			
		GLENDALE, CA 91203		Phone no. (8	18) 334-8623
MA	tho IE	RS discuss this return with the preparer shown above? (see instructions)			X Voc No

Form	aan	(2013)
	990	(2013)

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TO FOSTER AND PROMOTE PHYSICAL, SOCIAL, EDUCATIONAL, VOCATIONAL &
	CHARACTER DEVELOPMENT OF BOYS AND GIRLS, ESPECIALLY THOSE IN BURBANK.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1933857. including grants of \$) (Revenue \$1112795.)
	THIS CORPORATION FOLLOWS THE NATIONAL GUIDE LINES FOR BOYS AND GIRLS
	CLUBS OF AMERICA. THE CORPORATION PROVIDES AFTER SCHOOL AND DAY CAMP
	ACTIVITIES INCLUDING EDUCATIONAL PROGRAMS, ATHLETICS, TOURS, SOCIALS
	ETC.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
) (Leapenines 4) (Leapenines 4)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1933857.

332002 10-29-13

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			7.7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	Х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	77	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ŭ	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		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	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 Did the organization maintain an office, employees, or agents outside of the United States?	13		X
14a	Did the organization maintain an office, employees, or agents outside of the Onlited States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		-22
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
•	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		_	000	

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		103	140
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d		24d		
25a	Section 501(c)(3) and 501(c)(4) 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		Х
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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
24	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		х
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- J		
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
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			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V									
					Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming							
	(gambling) winnings to prize winners?			1c						
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	140							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns a return of the control of the	rns?		2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			х				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?									
b	If "Yes," enter the name of the foreign country: ►									
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		Х				
	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					Х				
	any contributions that were not tax deductible as charitable contributions?			6a						
D	If "Yes," did the organization include with every solicitation an express statement that such contribut		-	CL						
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b						
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices n	rovided to the navor?	7a	х					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			7.5						
·	to file Form 8282?	-		7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	t?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7f		Х				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fe			7g	N/	A				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h	N/	A				
8	$Sponsoring\ organizations\ maintaining\ donor\ advised\ funds\ and\ section\ 509 (a) (3)\ supporting\ organizations.\ D$	id the s	upporting N/A							
	$organization, or a donor \ advised \ fund \ maintained \ by \ a \ sponsoring \ organization, \ have \ excess \ business \ holdings \ at$	any tim	e during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.									
	Did the organization make any taxable distributions under section 4966?		/ _	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A	9b						
10	Section 501(c)(7) organizations. Enter:		l							
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A	امدا								
		11a								
р	Gross income from other sources (Do not net amounts due or paid to other sources against									
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)	100						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year $\frac{N}{A}$.	1041		12a						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	IZD								
	Is the organization licensed to issue qualified health plans in more than one state?		N/A	13a						
4	Note. See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	13c								
	Did the consideration and in a constant for independent of the land of the constant of the con			14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b						
				Form	990	(2013)				

GREATER EAST VALLEY, INC.

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 22 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 22 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Х 12c X Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. **X** Upon request Other (explain in Schedule O) Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MIRA SHAH, CONTROLLER - 818-842-9333

Form 990 (2013)

BURBANK,

2244 N. BUENA VISTA STREET,

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Form 990 (2013)

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

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

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

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

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

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

(A)	(B)	l	111126	((npe	isai	(D)	(E)	(F)
Name and Title	Average	Posi		Position eck more than one			Reportable	Reportable	Estimated	
	hours per	box	box, unless p		rson	is bot	h an	compensation	compensation	amount of
	week (list any					,, a de	T	from the	from related organizations	other compensation
	hours for	trustee or directo				Ð		organization	(W-2/1099-MISC)	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC)	(,	organization
	organizations	al trus	naltri		loyee	om pe				and related
	below	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ARMOND AGHAKHANIAN	line) 3 • 0 0	рш	su	#0	ē.	흜틃	휸			
(1) ARMOND AGHAKHANIAN DIRECTOR	3.00	x						0.	0.	0.
(2) RODNEY CAMPBELL	3.00							0.	0.	
DIRECTOR	3.00	x						0.	0.	0.
(3) GARETT CHIPMAN	3.00	 								
DIRECTOR		x						0.	0.	0.
(4) MICHAEL DRAGAN	3.00							-		
DIRECTOR		x						0.	0.	0.
(5) JOAN ORTIZ	3.00									
DIRECTOR		Х						0.	0.	0.
(6) RON DAVIS	3.00									
DIRECTOR		Х						0.	0.	0.
(7) KEVIN MCCARNEY	3.00									_
DIRECTOR		Х						0.	0.	0.
(8) MICHELLE BOUSE	3.00									
DIRECTOR		Х						0.	0.	0.
(9) MICHAEL WALBRECHT	3.00								_	_
DIRECTOR		Х						0.	0.	0.
(10) DAN STILLWELL	3.00	ļ								•
RESOURCE DEVELOPMENT CHAIR		Х		Х				0.	0.	0.
(11) AL SHAPIRO	3.00								0	0
DIRECTOR	2 00	Х						0.	0.	0.
(12) DAVE AUGUSTINE	3.00	ļ ,,		3,7					0	0
BOARD DEVELOPMENT CHAIR	3.00	Х		Х				0.	0.	0.
(13) LORRIE COPELAND	3.00	x		х				0.	0.	0
VICE-PRESIDENT (14) LEENA MATHEW	3.00	_		Λ				0.	0.	0.
IMMEDIATE PAST PRESIDENT	3.00	x		х				0.	0.	0.
(15) SHERINE SAAD	3.00	^		Λ				0.	0.	<u></u>
PRESIDENT	3.00	x		Х				0.	0.	0.
(16) SALLY KNUTSON	3.00							0.	0.	
BUDGET & FINANCE CHAIR	3.00	x		х				0.	0.	0.
(17) LYNN WHITE SHELBY	3.00	Ť								
SECRETARY		x		х				0.	0.	0.
	-	_	_	_	_	-	_			Carra 000 (0010)

332007 10-29-13

Form 990 (2013) GREATER 1	TASI VAI	ועני	L L	<u>, -</u>	T 1/1	<u>. </u>			95-44	<u> </u>	743	P	age o
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do	not c	Pos	ition	1 than	one	Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n	an	nount	of
	week	⊢	cer ar	nd a d	irecto	or/trus	itee)	from	from related			other	
	(list any	or director						the	organizations			pensa	
	hours for related	or dir	g.			ated		organization	(W-2/1099-MIS	(C)		om th	
	organizations	量	truste		a	bens		(W-2/1099-MISC)			_	anizat	
	below	nal tri	ional		ploye	tcom	١.					d relat anizati	
	line)	Individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer				orga	ııızaıı	ons
(18) BRETT EVERHART	3.00	드	드	0	₹.	포능	굔						
DIRECTOR	3.00	x						0.		0.			0.
(19) MICHAEL MORGAN	3.00	 				H							
DIRECTOR		x						0.		0.			0.
(20) DAVID EMTER	3.00	Ħ								Ť			
DIRECTOR		x						0.		0.			0.
(21) JAMI RICE	3.00	 				H							
DIRECTOR		x						0.		0.			0.
(22) BRET HANNIFIN	3.00	Ë				H							
DIRECTOR		x						0.		0.			0.
(23) NICOLETTE SCHWARTZ	3.00												
DIRECTOR		x						0.		0.			0.
(24) DORISA SHAHMIRZAI	3.00												
DIRECTOR		x						0.		0.			0.
(25) DARIN RYBURN	3.00												
DIRECTOR		x						0.		0.			0.
(26) TOM STEELE	3.00												
DIRECTOR		x						0.		0.			0.
1b Sub-total			•			•	▶	0.		0.			0.
c Total from continuation sheets to Part VI								141875.		0.			0.
d Total (add lines 1b and 1c)								141875.		0.			0.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bove	e) wl	no r	eceived more than \$100	0,000 of reportable	e			
compensation from the organization													1
												Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization				
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J t	for such individual			4		X
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	uni (elat	ted organization or indiv	idual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch	pers	son					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	ipensa	ation f	rom	
the organization. Report compensation for	the calendar y	ear (endi	ing v	vith	or w	rithir	n the organization's tax	year.				
(A)								(B)			(C		
Name and business	address	NC	INC	E				Description of s	services	C	ompei	nsatio	'n
							_						
							_						

\$100,000 of compensation from the organization ► 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 GREATER	EAST VAI	ГLI	ΞY,	<u>, </u>	INC	<u>. </u>			95-448	5745
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	oyee	s, a	nd ŀ	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	osition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	ا ا				oloyee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(***-2/1099-101130)	organization
	related	tee or	ıstee			ensate		(** = *********************************		and related
	(list any hours for related organizations below line)	al frus	In stitutional trustee		Key employee	Highest compensated employee				organizations
	below	lividu	titutio	Officer	y emp	hest	Former			
-	line)	i E	Si .	#5	ą.	Ξ̈́	윤			
(27) HANI YOUSSEF	3.00	,,							0	0
DIRECTOR	40.00	Х						0.	0.	0.
(28) SHANNA WARREN	40.00			٦,				1 4 1 0 7 5	0	0
EXECUTIVE DIRECTOR				Х				141875.	0.	0.
-										
		1								
		-								
		1								
		_		_	_					
								141075		
Total to Part VII, Section A, line 1c								141875.		

Га	rt VI	Check if Schedule O cont		or note to any lin	e in this Part VIII			
		Grieck ir Scriedule O Corte	ains a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c c d e e f f g h c c d e e f f		1b 1c 1d ions) 1e ts, and ve 1f 1a-1f: \$	Business Code 900099	1154007. 1112575.	1112575.		
	3 4 5	Investment income (including other similar amounts) Income from investment of ta	dividends, inter	est, and oroceeds	8199.			8199.
	6 a	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
e	d	Gain or (loss) Net gain or (loss) Gross income from fundraisin	g events (not	>				
Other Revenue	b	including \$ 3778 contributions reported on line Part IV, line 18 Less: direct expenses	1c). See a	FAFOF				
0	9 a	Net income or (loss) from function Gross income from gaming active Part IV, line 19 Less: direct expenses	draising events ctivities. See a		<43955.	>		<43955.
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	ning activities returns a		220.	220.		
	C	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
	11 a							
		Total. Add lines 11a-11d Total revenue. See instructions.		>	2231046.	1112795.	0.	<35756.

Form 990 (2013) GREATER EAST Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	er organizations must co	mplete column (A).	<u> </u>
	Check if Schedule O contains a response include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and		схропосо	general expenses	СХРОПОСО
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,	150000.	105000.	30000.	15000
	trustees, and key employees	130000.	103000.	30000.	13000
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	1241057.	1102282.	97181.	41594
	Pension plan accruals and contributions (include			3,101	11001
	section 401(k) and 403(b) employer contributions)	29814.	24746.	2981.	2087
	Other employee benefits	115763.	105468.	9453.	842
	Payroll taxes	102118.	84758.	10212.	7148
	Fees for services (non-employees):			-	
	Management				
	Legal				
	Accounting	11326.	9627.	906.	793
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	54162.	15245.	5092.	33825
12	Advertising and promotion				
13	Office expenses	21180.	9222.	11100.	858
14	Information technology				
15	Royalties	40000	445500		2661
16	Occupancy	129029.	117702.	7663.	3664
	Travel				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates	51536.	47904.	2514.	1118
	Depreciation, depletion, and amortization	24585.	21337.	2248.	1000
	Insurance Other expenses. Itemize expenses not covered	24303.	21337.	2240.	1000
	amount, list line 24e expenses on Schedule 0.)				
	MATERIALS	256669.	196599.	0.	60070
	MISCELLANEOUS EXPENSES	57067.	50684.	2043.	4340
	VEHICLE EXPENSES	19874.	19874.	0.	0
	MEMBERSHIP & DUES	15458.	11868.	1029.	2561
	All other expenses	13298.	11541.	1216.	541
	Total functional expenses. Add lines 1 through 24e	2292936.	1933857.	183638.	175441
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2013)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) End of year Beginning of year 39073. 11760. 1 Cash - non-interest-bearing 1 <u>500.</u> 175000. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 50069. 111437. 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net 49000. Inventories for sale or use 8 8 1425. 15479. Prepaid expenses and deferred charges 9 9 **10a** Land, buildings, and equipment: cost or other 644774. basis. Complete Part VI of Schedule D _____ 10a b Less: accumulated depreciation 10b 478107. 173035. 166667. 10c Investments - publicly traded securities 11 11 271645. 173652. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 584747. 653995. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 129305. 91940. Accounts payable and accrued expenses 17 17 18 Grants payable 18 22676. 22845. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties _____ 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 151981. 114785. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 426624. 388710. 27 27 Unrestricted net assets 6142. 150500. Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 432766. 539210. 33 Total net assets or fund balances 33

Form **990** (2013)

653995.

34

Total liabilities and net assets/fund balances

584747.

34

Form 990 (2013)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		310				
2	Total expenses (must equal Part IX, column (A), line 25)	2		929				
3	Revenue less expenses. Subtract line 2 from line 1	3	<61890 432766					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Net unrealized gains (losses) on investments							
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 in Schedule O)	9	1	443	58.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	5	392	10.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				LX			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat							
	consolidated basis, or both:	•						
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si							
	Act and OMB Circular A-133?	-	За		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					

SCHEDULE A

Public Charity Status and Public Support (Form 990 or 990-EZ) Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

Employer identification number 95-4485745

Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III - Non-functionally integrated **b** Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization organization in col. organization in col. in col. (i) listed in your (described on lines 1-9 organization support (i) organized in the aovernina document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

Total

Schedule A (Form 990 or 990-EZ) 2013 GREATER EAST VALLEY, INC.

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

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

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	740897.	808777.	1056658.	1310360.	1154007.	5070699.
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						
4	Total. Add lines 1 through 3	740897.	808777.	1056658.	1310360.	1154007.	5070699.
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)						411802.
	Public support. Subtract line 5 from line 4.						4658897.
Sec	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	740897.	808777.	1056658.	1310360.	1154007.	5070699.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1690.	1845.	2504.	4412.	8199.	18650.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						5089349.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	4655759.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					<u></u> ▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2013 (14	91.54 %
	Public support percentage from 2012					15	92.82 %
16a	33 1/3% support test - 2013. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2012. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ						▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2013

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

Name of the organization

Employer identification number

THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

95-4485745

Organization type (check one):									
Filers of:	Section:								
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.								
General Rule									
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one plete Parts I and II.								
Special Rules									
509(a)(1) and 170	For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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.								
total contribution	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, s of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III.								
contributions for If this box is chec purpose. Do not ((c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. sked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively be, etc., contributions of \$5,000 or more during the year								
ū	that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), n 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								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

Employer identification number

95-4485745

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BOYS & GIRLS CLUB OF AMERICA 1275 PEACHTREE ST NE ATLANTA, GA 30309	\$90764.	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BOYS & GIRLS CLUB WEST SAN GABRIEL 328 S. RAMONA AVE MONTEREY PARK, CA 91754	\$30000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	AS&F 625 FAIR OAKS # 360 SOUTH PASADENA, CA 91030	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	WEINGART FOUNDATION 1055 W. SEVENTH STREET SUITE 3050 LOS ANGELES, CA 90017	\$ <u>125000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	MACY'S P.O. BOX 7888 SAN FRANCISCO, CA 94188	\$51434.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	PACIFIC YOUTH FOUNDATION 1224 LINCOLN BLVD SUITE 5 SANTA MONICA, CA 90401	\$ <u>25000.</u>	Person X Payroll

Name of organization
THE BOYS & GIRLS CLUB OF BURBANK AND
GREATER EAST VALLEY, INC.

Employer identification number

95-4485745

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
7	UNITED WAY 1150 S. OLIVE ST SUIT T 500 LOS ANGELES, CA 90015	\$ 459	Person X Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
8	BURBANK YOUTH TASK FORCE PO BOX 7145 BURBANK, CA 91510	\$250	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
9	WARNER BROS 4000 WARNER BLVD BLDG 137 BURBANK, CA 91522	\$380	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d)
10	THE RALPH M. PARSONS FOUNDATION 888 W. 6TH STREET 7TH FLOOR LOS ANGELES, CA 90017		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
11	BOYS & GIRLS CLUB OF AMERICA 1275 PEACHTREE ST NE ATLANTA, GA 30309	\$245	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
12	ROSE HILLS FOUNDATION 225 S. LAKE AVE SUITE 1250 PASADENA, CA 91101	\$300	Person X Payroll Noncash (Complete Part II for noncash contributions.)

		S & GIRLS (RBANK AND			
Sche	edule D (Form 990) 2013 GREATER	EAST VALLI	EY, INC.		95-	4485745 Pag	_{je} 2
Pa	rt III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, or Oth	ner Similar A	ssets(continued)	
3	Using the organization's acquisition, access	ion, and other record	s, check any of the	following that are a	significant use o	f its collection items	
	(check all that apply):						
а	Public exhibition	d	Loan or exc	hange programs			
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's c	ollections and explain	how they further t	he organization's ex	empt purpose in	Part XIII.	
5	During the year, did the organization solicit of	or receive donations o	of art, historical trea	sures, or other simil	ar assets		
	to be sold to raise funds rather than to be m	aintained as part of the	ne organization's co	ollection?		Yes	No
Pa	rt IV Escrow and Custodial Arran	igements. Comple	te if the organizatio	n answered "Yes" t	o Form 990, Part	IV, line 9, or	
	reported an amount on Form 990, Pa		· ·		,	,	
	Is the organization an agent, trustee, custod	lian or other intermed	iary for contribution	ns or other assets no	ot included		
	on Form 990, Part X?		•			Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			•	
	, ,	·	· ·			Amount	
С	Beginning balance				1c		
	Additions during the year						
	Distributions during the year						
f	Ending balance						
2a	Did the organization include an amount on F					Yes	No
	If "Yes," explain the arrangement in Part XIII						
_	irt V Endowment Funds. Complete						
		(a) Current year	(b) Prior year		1	ack (e) Four years ba	ack
1a	Beginning of year balance	100337.	91887.	, ,	,	1,	
b	Contributions	0.	702.	85526			
c	Net investment earnings, gains, and losses	15324.	9583.	7685			
d	Grants or scholarships						
e	0.1						
•	and programs						
f	Administrative expenses	1973.	1835.	1324			
g g		113688.	100337.	91887			
2	Provide the estimated percentage of the cur	rent vear end halance	e (line 1a. column (s	a)) held as:	1		
– a		100.00	%	2)) 1101d do.			
h	Permanent endowment	%					
c	Temporarily restricted endowment						
Ū	The percentages in lines 2a, 2b, and 2c sho						
За	Are there endowment funds not in the posse	· ·	tion that are held a	nd administered for	the organization		
-	by:	occion of the organiza	anon that are mora a	ara darriiriiotoroa ror	and organization		No
	(i) unrelated organizations					 	
							X
h	(ii) related organizations If "Yes" to 3a(ii), are the related organization	e lieted as required or	n Schedule R2				
4	Describe in Part XIII the intended uses of the						
	ert VI Land, Buildings, and Equipn		willetti turius.				
. u	Complete if the organization answere		Part IV. line 11a S	ee Form 990 Part X	C line 10		
	Description of property	(a) Cost or ot			Accumulated	(d) Book value	
	besomption of property	basis (investm	1 ' '	' '	epreciation	(u) Dook value	
10	Land	<u> </u>	-, 22510		1		
b	Land						
	Buildings			+			
·	Loadonoid improvementa					l .	

► 166667. Schedule D (Form 990) 2013

166667.

478107.

d Equipment

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

e Other.

644774.

Schedule D (Form 990) 2013 GREATER EAS	T VALLEY, INC	95	-4485745 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other	112600	END OF VEAD MADKET	1 773 7 7777
(A) ENDOWMENT FUND	113688	END-OF-YEAR MARKET	. AUTOE
(B) PUBLICLY TRADED STOCKS & (C) BONDS	59964	END-OF-YEAR MARKET	1 173 T TTE
	33304	END-OF-TEAK MARKET	VALUE
(D)			
(E) (F)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	173652		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	to 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 en	d-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"	to Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
	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	e 15.)	>	
Part X Other Liabilities.	,		
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	i.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	05)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) ▶		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

Га	Reconciliation of Revenue per Audited Financial Sta		Revenue per H	teturn.	
_	Complete if the organization answered "Yes" to Form 990, Part IV, line				2368086.
1	Total revenue, gains, and other support per audited financial statements			1	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	22076		
а			23976.		
b			113064.	-	
С	. , , ,			-	
d	, , , , , , , , , , , , , , , , , , , ,	2d		_	127040
е	J			2e	137040.
3	Subtract line 2e from line 1			3	2231046.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	, , , ,			-	
b	, , , , , , , , , , , , , , , , , , , ,			_	0
С				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				2231046.
Ра	rt XII Reconciliation of Expenses per Audited Financial Sta		ı Expenses per	Return	1.
	Complete if the organization answered "Yes" to Form 990, Part IV, line				2406000
1	Total expenses and losses per audited financial statements			1	2406000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	112064		
а			113064.	-	
b	, , ,				
С					
d	7				112064
е	J			2e	113064.
3	Subtract line 2e from line 1			3	2292936.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	, , , ,				
b	Other (Describe in Part XIII.)	4b			•
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	R.)		5	2292936.
	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an				

Schedule G (Form 990 or 990-EZ) 2013 GREATER EAST VALLEY, INC.

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			ANNUAL	BACK-A-YOUTH		(add col. (a) through
			DINNER DANCE	FUNDRAISER	4	
a)			(event type)	(event type)	(total number)	col. (c))
nue						
Revenue	1	Gross receipts	225036.	111698.	51804.	388538.
	2	Less: Contributions	214396.	111698.	51804.	377898.
	3	Gross income (line 1 minus line 2)	10640.			10640.
		, , , , , , , , , , , , , , , , , , , ,				
	4	Cash prizes	4000.			4000.
Se	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	40833.			40833.
ect Ey	7	Food and beverages				
ä						
	8	Entertainment		054	0500	0.00
	9	Other direct expenses		254.	9508.	9762.
	10	Direct expense summary. Add lines 4 through				54595.
Da	11	Net income summary. Subtract line 10 from li	ne 3, column (d)			<43955.
Pa	rt I		answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.		(I-) Dull taba/instant		(-1) T-t-1
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Вĕ						
	1	Gross revenue				
es	2	Cash prizes				
eus	_					
Ä	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses	T 1			
			Yes %			
	6	Volunteer labor	└── No	└── No	└── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
					·	
9	Ent	ter the state(s) in which the organization opera	tes gaming activities: C	A		
а	ls t	the organization licensed to operate gaming ac	tivities in each of these s	states?		X Yes No
b	If "	No," explain:				
10a	 We	ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax v	/ear?	Yes X No
		ere any of the organization's gaming licenses re				Yes X No
						Yes X No
		Va - II I - i - i				Yes X No
b	If "	Va - II I - i - i				Yes X No

332082 09-12-13

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

2013

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

Employer identification number 95-4485745

Par	rt I Types of Property							
		(a)	(b)	(c)		(d)		
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of		_	_
		applicable		Form 990, Part VIII, line 1g	noncash cont	ribution ar	nount	S
1	Art - Works of art			, , , , ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							—
24	Archeological artifacts Other ► (MATERIALS & S)	X	300	101775.	CURRENT MA	ABKET	RΔ	ਜੂਦ ਟ
25 26	Other (FURNITURE &EQ)	X	1		CURRENT MA			
20 27	. ` —			1033.	COMMENT III	11111111	1111	
28	Other () Other ()							—
29	Number of Forms 8283 received by the organiz	zation during	the tax vear for o	contributions				
	for which the organization completed Form 828							
		,, -		g <u> j</u>			Yes	No
30a	During the year, did the organization receive by	contributio	on any property rej	oorted in Part I, lines 1 - 28, t	hat it must hold for			
	at least three years from the date of the initial of							
	the entire holding period?			·		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any non-standard contrib	utions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		_X_
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is ch	ecked,			
	describe in Part II.							

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

Schedule M (Form 990) (2013)

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

Employer identification number 95-4485745

FORM 990, PART VI, SECTION A, LINE 2:

EXPLANATION: AL SHAPIRO AND DAN STILLWELL, ARE FATHER AND SON AND BOTH OF THEM ARE CURRENT DIRECTORS.

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

EXPLANATION: EACH OF THE BOARD MEMBERS RECEIVES A COPY OF THE FORM 990 TO REVIEW AND APPROVE PRIOR TO IT BEING FILED.

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

EXPLANATION: WE HAVE A CONFLICT OF INTEREST POLICY THAT ALL BOARD MEMBERS ARE REQUIRED TO REVIEW AND SIGN ANNUALLY.

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

EXPLANATION: FOR DETERMINING THE SALARY OF THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES THE BOARD OF DIRECTORS REVIEWS THE NATIONAL STUDY OF SALARIES PRODUCED BY THE BOYS AND GIRLS CLUB OF AMERICA THAT SHOWS NATIONAL TRENDS FOR THE DIFFERENT POSITIONS AND THEN VOTES ON THE SALARIES AT A BOARD MEETING.

FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: THE FORM 1023 AND 990 ARE AVAILABLE UPON REQUEST TO THE FINANCE DIRECTOR AT THE CLUB LOCATION.

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

EXPLANATION: THE FORM 1023 AND 990 ARE AVAILABLE UPON REQUEST TO THE

FINANCE DIRECTOR AT THE CLUB LOCATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

GREATER EAST VALLEY, INC.	95-4485745
·	
EODM 000 DADM VI IINE O GUANGEC IN NEW ACCEMO.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCREASE IN TEMPORARILY RESTRICTED NET ASSETS	144358.
FORM 990, PART XI, LINE 2C	
EXPLANATION: THE FINANCE COMMITTEE APPROVES THE SELECTION	OF THE
INDEPENDENT AUDITOR AND OVERSEES THE AUDIT.	

Department of the Treasury
Service Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. Business or activity to which this form relates OMB No. 1545-0172 Attachment Sequence No. 179

Identifying number

Name(s) shown on return THE BOYS & GIRLS CLUB OF BURBANK AND GREATER EAST VALLEY, INC.

FORM 990 PAGE 10

990

95-4485745

Pa	art Election To Expense Certain Prope	rty Under Section 1	79 Note: If you ha	ive any liste	ed property, d	complete Part	V before yo	ou complete Part I.
1	Maximum amount (see instructions)						1	500000.
2	Total cost of section 179 property place							
	Threshold cost of section 179 property							2000000.
	Reduction in limitation. Subtract line 3							
	Dollar limitation for tax year. Subtract line 4 from line							
6	(a) Description of pr	operty	(b)	Cost (busines	ss use only)	(c) Elected	cost	
7	Listed property. Enter the amount from	ı line 29			7			
	Total elected cost of section 179 prope						8	
	Tentative deduction. Enter the smaller							
	Carryover of disallowed deduction from							
	Business income limitation. Enter the s							
	Section 179 expense deduction. Add li							
	Carryover of disallowed deduction to 2							
_	e: Do not use Part II or Part III below fo				19		I	
Pá	art II Special Depreciation Allowa	nce and Other D	epreciation (Do	not include	e listed prope	ertv.)		
14	Special depreciation allowance for qua		•					
17	the tax year		•	. ,,,		Ü	14	
15	Property subject to section 168(f)(1) ele						··· ⊢ →	
	Other depreciation (including ACRS)						16	51536.
	art III MACRS Depreciation (Do no	at include listed n					10	313301
	WAONO Depreciation (Do no	ot include listed pl	Sectio					
								
7/	MACDS doductions for assets placed i	in convice in tax w	are boginning be	oforo 2013			17	
	MACRS deductions for assets placed in series and are electing to group any assets placed in series						17	
	If you are electing to group any assets placed in sen	vice during the tax year	into one or more gener	al asset accou	unts, check here	▶ _	j	am .
	If you are electing to group any assets placed in ser Section B - Assets	Placed in Service (b) Month and	ce During 2013 T	al asset accountable accountable asset accountable accountable asset accountable accountable asset accountable accountab	unts, check here sing the Gen	▶ ☐	ition Syste	
	If you are electing to group any assets placed in sen	vice during the tax year	into one or more generate During 2013 T	al asset account ax Year Uneciation nent use	unts, check here	▶ _	j	em (g) Depreciation deduction
	If you are electing to group any assets placed in ser Section B - Assets (a) Classification of property	Placed in Service (b) Month and year placed	into one or more gener ce During 2013 T (c) Basis for depr (business/investr	al asset account ax Year Uneciation nent use	unts, check here sing the Gen (d) Recovery	▶ ☐	ition Syste	
18	If you are electing to group any assets placed in service Section B - Assets (a) Classification of property 3-year property	Placed in Service (b) Month and year placed	into one or more gener ce During 2013 T (c) Basis for depr (business/investr	al asset account ax Year Uneciation nent use	unts, check here sing the Gen (d) Recovery	▶ ☐	ition Syste	
18 19a	If you are electing to group any assets placed in service Section B - Assets (a) Classification of property 3-year property 5-year property	Placed in Service (b) Month and year placed	into one or more gener ce During 2013 T (c) Basis for depr (business/investr	al asset account ax Year Uneciation nent use	unts, check here sing the Gen (d) Recovery	▶ ☐	ition Syste	
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Form 8868 (Rev. 1-2014)						Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	box			X
Note. Only complete Part II if you have already been granted an a If you are filing for an Automatic 3-Month Extension, comple	automatic	3-month extension on a previously fi				
Part II Additional (Not Automatic) 3-Month E			al (no c	opies n	eeded)	
, cantonal (retriated and contains	<u> </u>	Enter filer's	•	•		tructions
Type or Name of exempt organization or other filer, see instru	ctions	Enter mer 3			ation numb	
print THE BOYS & GIRLS CLUB OF BUI		AND	Linploye	i identine	ation name	oci (Eliv) oi
File by the GREATER EAST VALLEY, INC.	95-4485745			5		
due date for filling your return. See 244 N. BUENA VISTA ST	ee instruc	tions.	Social se	curity nu	ımber (SSN)
City, town or post office, state, and ZIP code. For a for BURBANK , CA 91504	oreign add	ress, see instructions.				
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)				01
Application	Return	Application				Return
Is For	Code	Is For				Code
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A				08
Form 4720 (individual)	03	Form 4720 (other than individual)				09
Form 990-PF	04	Form 5227				10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 990-T (trust other than above)	06	Form 8870				12
STOP! Do not complete Part II if you were not already granted			iously file	ed Form	8868.	
MIRA SHAH, CON						
• The books are in the care of 2244 N. BUENA	VISTA	STREET - BURBANK,	CA 9	1504		
Telephone No. ► 818-842-9333		Fax No.			_	
If the organization does not have an office or place of business						
If this is for a Group Return, enter the organization's four digit	1					
box . If it is for part of the group, check this box		ch a list with the names and EINs of	all memb	ers the e	extension is	for.
4 I request an additional 3-month extension of time until		15, 2015	TITN	. 20	2014	
		, 2013 , and ending			2014	
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on:	⊥ Final ı	return		
Change in accounting period						
7 State in detail why you need the extension WE REQUEST AN ADDITIONAL EXTER	NCTON	OF TIME TO CATHER	ਧੁਸ਼ਾ	מידעת	иверь	D TO
FILE A COMPLETE AND ACCURATE			11111	DAIA	MEDE	10 10
TILL A COMPLETE AND ACCORDED.	17121 11.					
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720.	or 6069	enter the tentative tax less any				
nonrefundable credits. See instructions.	, 0, 0000,	enter the terrative tax, less any	8a	\$		0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	enter an	v refundable credits and estimated	- Ju	 		
tax payments made. Include any prior year overpayment all						
previously with Form 8868.	owed as c	a orean and any amount para	8b	\$		0.
c Balance due. Subtract line 8b from line 8a. Include your pa	vment wit	h this form, if required, by using	1	<u> </u>		
EFTPS (Electronic Federal Tax Payment System). See instru	•	, , , , ,	8c	\$		0.
		st be completed for Part II o	nly.			
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this form.	ing accomp	_	_	of my knov	vledge and b	elief,
Signature ▶ Title ▶ C	C.P.A	•	Date	•		
				Fo	rm 9969 (D	ev. 1-2014)