

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2023

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

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

A For the 2023 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BOYS AND GIRLS CLUB OF HENDERSON COUNTY/HENDERSONVILLE, INC.		D Employer identification number 56-1803125
	Doing business as Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 1460		E Telephone number 828-693-9444
	City or town, state or province, country, and ZIP or foreign postal code HENDERSONVILLE NC 28793		G Gross receipts \$ 3,823,794
	F Name and address of principal officer: STEPHEN GWALTNEY P.O. BOX 1460 HENDERSONVILLE NC 28793-1460		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number	
J Website: WWW.BGCHENDERSONCO.ORG		L Year of formation: 1993 M State of legal domicile: NC	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	118
	6	Total number of volunteers (estimate if necessary)	6	182
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		2,911,558	3,413,663
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		71,416	110,003
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		86,310	164,458
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,069,284	3,688,124
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14 Benefits paid to or for members (Part IX, column (A), line 4)			0	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,535,338	1,875,817	
16a Professional fundraising fees (Part IX, column (A), line 11e)			0	
b Total fundraising expenses (Part IX, column (D), line 25)		245,331		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		835,227	1,165,257	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,370,565	3,041,074	
19 Revenue less expenses. Subtract line 18 from line 12		698,719	647,050	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)		9,153,205	9,895,376
	22 Net assets or fund balances. Subtract line 21 from line 20		115,346	123,895

Part II Signature Block

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

Sign Here	Signature of officer BRETT SHAFFER		Date	
	Type or print name and title TREASURER			
Paid Preparer Use Only	Print/Type preparer's name TERRY B ANDERSEN CPA	Preparer's signature <i>Terry B. Andersen, CPA</i>	Date 11/13/2024	Check <input type="checkbox"/> if self-employed
	Firm's name GOULD KILLIAN CPA GROUP, P.A.	Firm's EIN 56-1042836	PTIN P00932175	
	Firm's address 100 COXE AVE ASHEVILLE, NC 28801-2354	Phone no. 828-258-0363		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part 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 INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes 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 \$ **2,593,384** including grants of \$) (Revenue \$)

PROVIDES DIVERSE ACTIVITIES AND PROGRAMS TO MEET THE INTERESTS OF ALL YOUTH AND THEIR PHYSICAL, EMOTIONAL, CULTURAL, AND SOCIAL NEEDS. PROGRAMS ARE MODELED AND ACTIVITIES BASED UPON THE BOYS & GIRLS CLUBS OF AMERICA CORE AREAS: EDUCATION & CAREER DEVELOPMENT, CHARACTER AND LEADERSHIP DEVELOPMENT, HEALTH & LIFE SKILLS, THE ARTS, SPORTS, FITNESS AND RECREATION.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **2,593,384**

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		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		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		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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	X	
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X

Part 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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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.	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		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part 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	118		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<input checked="" type="checkbox"/>	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			<input checked="" type="checkbox"/>
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			<input checked="" type="checkbox"/>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			<input checked="" type="checkbox"/>
c	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?	6a			<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<input checked="" type="checkbox"/>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<input checked="" type="checkbox"/>	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			<input checked="" type="checkbox"/>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			<input checked="" type="checkbox"/>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			<input checked="" type="checkbox"/>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
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			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			<input checked="" type="checkbox"/>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			<input checked="" type="checkbox"/>
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

Section 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 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.		
	1a 18		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, 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
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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?		X
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?	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on 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.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

KENAN JOHNSON P.O. BOX 1460 NC 28793 828-693-9444
HENDERSONVILLE

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, 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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS J. FAZIO	5.00									
CHAIRMAN	0.00	X		X			0	0	0	
(2) STEPHEN GWALTNEY	5.00									
PRESIDENT	0.00	X		X			0	0	0	
(3) JENNY BROWN	5.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(4) ADAM SHEALY	5.00									
SECRETARY	0.00	X		X			0	0	0	
(5) RANDY HUNTER	5.00									
ASSISTANT SECRETARY	0.00	X		X			0	0	0	
(6) BRETT SHAFFER	5.00									
TREASURER	0.00	X		X			0	0	0	
(7) DAVE E. ADAMS	5.00									
ASSISTANT TREASURER	0.00	X		X			0	0	0	
(8) KAREN BABCOCK	1.00									
DIRECTOR	0.00	X					0	0	0	
(9) LAURA BELANGER	1.00									
DIRECTOR	0.00	X					0	0	0	
(10) JOREECA DINNALL	1.00									
DIRECTOR	0.00	X					0	0	0	
(11) JUDY EDWARDS	1.00									
DIRECTOR	0.00	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) DIANEICE ELDRIDGE										
(12) DIRECTOR	1.00 0.00	X					0	0	0	
(13) SUSAN FAZIO										
(13) DIRECTOR	1.00 0.00	X					0	0	0	
(14) JOHNNY JOHNSTON										
(14) DIRECTOR	1.00 0.00	X					0	0	0	
(15) LAYNE KASISCHKE										
(15) DIRECTOR	1.00 0.00	X					0	0	0	
(16) JAN KING										
(16) DIRECTOR	1.00 0.00	X					0	0	0	
(17) STEPHEN MACE										
(17) DIRECTOR	1.00 0.00	X					0	0	0	
(18) JUSTIN STAEBEL										
(18) DIRECTOR	1.00 0.00	X					0	0	0	
(19) CAROLYN ASHWORTH										
(19) EXECUTIVE DIRECTOR	40.00 0.00			X			0	0	0	
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	9,876				
	b Membership dues	1b					
	c Fundraising events	1c	235,309				
	d Related organizations	1d					
	e Government grants (contributions)	1e	800,432				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,368,046				
	g Noncash contributions included in lines 1a-1f	1g	\$ 5,250				
	h Total. Add lines 1a-1f			3,413,663			
	Program Service Revenue			Business Code			
2a							
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			102,368		102,368	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents		(i) Real	(ii) Personal			
		6a					
		b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other			
		7a	2,625	5,010			
		b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c	2,625	5,010			
	d Net gain or (loss)				7,635		7,635
	8a Gross income from fundraising events (not including \$ 235,309 of contributions reported on line 1c). See Part IV, line 18						
		8a	142,941				
b Less: direct expenses		8b	135,670				
c Net income or (loss) from fundraising events				7,271		7,271	
9a Gross income from gaming activities. See Part IV, line 19							
	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a OTHER REVENUES			157,187		157,187	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d				157,187		
12 Total revenue. See instructions				3,688,124	0	0	
						274,461	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,610,206	1,322,252	122,333	165,621
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	33,756	26,273	2,988	4,495
9 Other employee benefits	103,275	84,806	7,846	10,623
10 Payroll taxes	128,580	105,586	9,769	13,225
11 Fees for services (nonemployees):				
a Management				
b Legal	1,386	1,040	346	
c Accounting	14,500	10,875	3,625	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	55,414	35,178	16,245	3,991
12 Advertising and promotion	2,055	1,686	157	212
13 Office expenses	13,141	8,626	2,114	2,401
14 Information technology	665	645	13	7
15 Royalties				
16 Occupancy	53,266	51,668	1,065	533
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	223,406	216,704	4,468	2,234
23 Insurance	80,856	60,877	16,646	3,333
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DESIGNATED EXPENSES	197,475	197,475		
b PROGRAM SUPPLIES	172,755	172,755		
c REPAIRS AND MAINTENANCE	105,210	102,054	2,104	1,052
d STUDENT TRANSPORTATION	42,856	42,856		
e All other expenses	202,272	152,028	12,640	37,604
25 Total functional expenses. Add lines 1 through 24e	3,041,074	2,593,384	202,359	245,331
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	22,579	1	51,473
	2 Savings and temporary cash investments	2,397,079	2	3,036,188
	3 Pledges and grants receivable, net	217,399	3	358,616
	4 Accounts receivable, net	6,536	4	11,478
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	23,377	9	22,846
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,254,861		
	b Less: accumulated depreciation	10b 2,297,601	5,154,776	10c 4,957,260
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	1,331,459	12	1,457,515
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)		9,153,205	16	9,895,376
Liabilities	17 Accounts payable and accrued expenses	108,896	17	118,529
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,450	25	5,366
	26 Total liabilities. Add lines 17 through 25	115,346	26	123,895
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	7,581,158	27	7,797,322
	28 Net assets with donor restrictions	1,456,701	28	1,974,159
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	9,037,859	32	9,771,481
33 Total liabilities and net assets/fund balances	9,153,205	33	9,895,376	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,688,124
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,041,074
3	Revenue less expenses. Subtract line 2 from line 1	3	647,050
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,037,859
5	Net unrealized gains (losses) on investments	5	86,572
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	9,771,481

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? 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. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

2023

Open to Public Inspection

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **BOYS AND GIRLS CLUB OF HENDERSON
COUNTY/HENDERSONVILLE, INC.**

Employer identification number
56-1803125

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 hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 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.)
- 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 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 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 the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - 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 organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,158,816	2,760,894	2,478,935	2,911,558	3,413,663	13,723,866
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,158,816	2,760,894	2,478,935	2,911,558	3,413,663	13,723,866
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)						765,261
6 Public support. Subtract line 5 from line 4						12,958,605

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	2,158,816	2,760,894	2,478,935	2,911,558	3,413,663	13,723,866
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	15,285	18,250	50,078	63,816	102,368	249,797
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	198,798	141,016	158,324	213,488	300,128	1,011,754
11 Total support. Add lines 7 through 10						14,985,417
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	86.47%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	90.18%
16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests — 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on 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

		Yes	No
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.)		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year. Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	

Section C – Distributable Amount		(A) Prior Year	(B) 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-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the 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

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Part VI

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

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER REVENUES	\$ 200,549
SPECIAL EVENTS	\$ 811,205

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

**BOYS AND GIRLS CLUB OF HENDERSON
COUNTY/HENDERSONVILLE, INC.**

Employer identification number

56-1803125

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck 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

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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 \$

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).

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

Schedule B (Form 990) (2023)

Name of organization

BOYS AND GIRLS CLUB OF HENDERSON

Employer identification number

56-1803125

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 contributions	(d) Type of contribution
1	CHILD NUTRITION PROGRAM INC 741 KENILWORTH AVE, STE 102 CHARLOTTE NC 28204	\$ 73,042	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	BOYS & GIRLS CLUBS - HHS/WFD NC AREA COUNCIL DESIGNATED GIFT 701 N RALEIGH BLVD RALEIGH NC 27610	\$ 171,246	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	DAVID AND TERRI LUCK 1335 CANE CREEK ROAD FLETCHER NC 28732	\$ 208,911	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	DOGWOOD HEALTH TRUST 890 HENDERSONVILLE RD ASHEVILLE NC 28803	\$ 366,618	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	LEON LEVINE FOUNDATION PO BOX 6676 ASHEVILLE NC 28816	\$ 180,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	WILLIAM R. KENAN, JR CHARITABLE TRUS PO BOX 3858 CHAPEL HILL NC 27515	\$ 200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS AND GIRLS CLUB OF HENDERSON	Employer identification number 56-1803125
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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 contributions	(d) Type of contribution
7	NC DEPT. OF PUBLIC INSTRUCTION 301 N. WILMINGTON ST. RALEIGH NC 27601	\$ 442,628	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	CAROLINE ELLIS, ESTATE OF C/O WELLS FARGO WEALTH MANAGEMENT 401 S. TRYON STREET, 2ND FLOOR CHARLOTTE NC 28202	\$ 196,759	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	ESTATE OF SUSAN U. STEWART 818 SE FOURTH STREET UNIT 403 FT. LAUDERDALE FL 33301	\$ 257,362	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	ESTATE OF MADELINE ESSIG 240 THIRD AVENUE WEST HENDERSONVILLE NC 28739	\$ 75,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

BOYS AND GIRLS CLUB OF HENDERSON COUNTY/HENDERSONVILLE, INC.

Employer identification number

56-1803125

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table.
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations?	3a(i)	
(ii) Related organizations?	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		186,321		186,321
b Buildings		5,583,627	1,333,566	4,250,061
c Leasehold improvements		644,836	418,472	226,364
d Equipment		619,739	498,022	121,717
e Other		220,338	47,541	172,797
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				4,957,260

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other COMMUNITY FDN OF HENDERSON CTY	1,457,515	MARKET
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	1,457,515	

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. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

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, line 15, col. (B))	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ASSETS HELD FOR OTHERS	5,366
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,366

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

Part XIII Supplemental Information (continued)

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

**BOYS AND GIRLS CLUB OF HENDERSON
COUNTY/HENDERSONVILLE, INC.**

Employer identification number

56-1803125

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>GOLF TOURNAMENT</u> (event type)	<u>SPECIAL EVENTS</u> (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	271,003	107,247	378,250
	2	Less: Contributions	155,514	79,795	235,309
	3	Gross income (line 1 minus line 2)	115,489	27,452	142,941
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	103,331	32,339	135,670
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				7,271

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %
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)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

13a		%
13b		%

 - a The organization's facility
 - b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$
- c If "Yes," enter name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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.

Name of the organization **BOYS AND GIRLS CLUB OF HENDERSON
COUNTY/HENDERSONVILLE, INC.**

Employer identification number
56-1803125

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

THOMAS J. FAZIO

SUSAN FAZIO

CHAIRMAN

DIRECTOR

SPOUSE

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

**A COPY OF FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS AND IS REVIEWED BY
THE EXECUTIVE COMMITTEE WHICH HAS BEEN DESIGNATED BY THE BOARD TO PROVIDE
OVERSIGHT AUTHORITY OVER FORM 990 PRIOR TO ITS FILING.**

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

**ALL MEMBERS OF THE BOARD OF DIRECTORS, THE EXECUTIVE DIRECTOR, AND OTHER
KEY EMPLOYEES ARE REQUIRED TO SUBMIT ANNUALLY ACKNOWLEDGEMENT AND
VERIFICATION THAT THERE ARE NO CONFLICTS OF INTEREST WITH THE
ORGANIZATION.**

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

**THE BOARD OF DIRECTORS HAS A POLICY TO REVIEW ALL COMPENSATION FOR
EMPLOYEES OF THE ORGANIZATION, INCLUDING THE EXECUTIVE DIRECTOR AND KEY
STAFF POSITIONS. THIS REVIEW MAY INCLUDE AT THE DISCRETION OF THE BOARD,
COMPARABILITY DATA AMONG OTHER FACTORS.**

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

**THE BOARD OF DIRECTORS POLICY FOR THE PROCESS OF DETERMINING COMPENSATION
FOR OTHER KEY EMPLOYEES IS THE SAME AS THE PROCESS FOR THE EXECUTIVE**

Name of the organization

Employer identification number

BOYS AND GIRLS CLUB OF HENDERSON

56-1803125

DIRECTOR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990, AND FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC AT THE ORGANIZATION'S BUSINESS
OFFICE DURING REGULAR BUSINESS HOURS.

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2023

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return **BOYS AND GIRLS CLUB OF HENDERSON COUNTY/HENDERSONVILLE, INC.**

Identifying number
56-1803125

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,160,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,890,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	221,834

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	1,572
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	223,406
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2023)

56-1803125

Federal Asset Report

FYE: 12/31/2023

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
52	2082 CENTER ROLL GYM DIVIDER	8/30/01	11,165			11,165	39 MMS/L	6,119	287
53	RETAINING WALL-LANDSCAPING	6/15/01	1,731			1,731	39 MMS/L	956	44
121	OUTDOOR A/C UNIT	5/04/15	2,600			2,600	15 HY S/L	1,300	173
122	BUS - 2012 THOMAS SAF-T-LINER C2	12/15/15	81,000			81,000	5 MQ200DB	81,000	0
123	MOSAIC PATIO & BENCHES	5/13/15	9,500			9,500	15 HY 150DB	5,293	561
124	ROOM 8 FLOORING	4/08/15	7,602			7,602	15 HY S/L	3,801	507
			<u>113,598</u>			<u>113,598</u>		<u>98,469</u>	<u>1,572</u>
Other Depreciation:									
2	BUILDING ART ANNEX	12/01/99	145,761			145,761	35 MO S/L	96,133	4,164
3	PHONE & COMPUTER NTKW	9/15/00	8,834			8,834	5 MO S/L	8,834	0
6	ARTS ANNEX/MULTICULTURAL	1/16/00	10,832			10,832	35 MO S/L	7,092	310
22	PERCUSSION INSTRUMENTS	1/25/00	4,174			4,174	5 MO S/L	4,174	0
23	GUITARS	6/15/00	4,554			4,554	5 MO S/L	4,554	0
29	LEASEHOLD IMPROVEMENT	8/01/95	340,310			340,310	39 MO S/L	238,872	8,726
30	LEASEHOLD IMPROVEMENT	1/01/96	2,300			2,300	39 MO S/L	1,592	59
31	LEASEHOLD IMPROVEMENT	1/24/96	113,241			113,241	35 MO S/L	87,087	3,235
32	LEASEHOLD IMPROVEMENT	4/30/98	4,783			4,783	35 MO S/L	3,339	137
41	OVERHEAD PROJECTOR	8/07/01	350			350	7 MO S/L	350	0
42	DRUMMING EQUIPMENT	8/30/01	3,288			3,288	7 MO S/L	3,288	0
44	CARPET BOWLING TABLE	2/28/01	1,320			1,320	7 MO S/L	1,320	0
51	TABLES	8/30/01	377			377	7 MO S/L	377	0
54	CHAIRS-LOBBY (10)	1/01/01	2,066			2,066	7 MO S/L	2,066	0
55	BUILDING	12/01/02	158,910			158,910	39 MO S/L	81,832	4,075
59	TEEN CENTER BUILDING	11/01/04	270,657			270,657	39 MO S/L	126,075	6,940
60	COMPUTER LAB	10/01/04	10,214			10,214	39 MO S/L	4,779	262
61	TEEN CENTER LANDSCAPING	11/01/04	1,160			1,160	5 MO S/L	1,160	0
62	FURNITURE-TEEN CENTER	11/01/04	2,497			2,497	7 MO S/L	2,497	0
63	LOCKERS-TEEN CENTER	11/01/04	2,188			2,188	7 MO S/L	2,188	0
64	8 BENCHES-TEEN CENTER	11/01/04	2,582			2,582	7 MO S/L	2,582	0
66	CHAIRS-COMPUTER LAB	10/01/04	700			700	7 MO S/L	700	0
67	CHAIR & 2 FILING CABINETS-TEEN CE	11/01/04	279			279	7 MO S/L	279	0
69	REFRIGERATOR-TEEN CENTER	11/01/04	713			713	7 MO S/L	713	0
70	BOOK SHELVES-TEEN CENTER	11/01/04	1,500			1,500	7 MO S/L	1,500	0
71	70X70 PROJECTION SCREEN-TEEN CE	11/01/04	135			135	7 MO S/L	135	0
73	TELEPHONE SYSTEM	10/21/04	7,148			7,148	7 MO S/L	7,148	0
75	'05 FORD ECONOLINE E350 VAN	9/10/04	31,034			31,034	5 MO S/L	31,034	0
76	'02 FORD CLUB VAN	7/18/02	33,069			33,069	5 MO S/L	33,069	0
77	2004 THOMAS BUS	4/12/05	43,750			43,750	5 MO S/L	43,750	0
78	GAMEROOM RENOVATION	9/21/05	10,421			10,421	39 MO S/L	4,609	267
80	FOLDING TABLES	5/05/05	559			559	5 MO S/L	559	0
81	FREEZER	11/28/05	641			641	5 MO S/L	641	0
83	(3) 8' TABLES	6/01/06	2,335			2,335	5 MO S/L	2,335	0
89	SAF-T-LINER C2 310TS '08 BUS	5/21/08	65,000			65,000	5 MO S/L	65,000	0
90	2008 FORD E350 VAN	7/10/08	30,072			30,072	5 MO S/L	30,072	0
93	BUILDING	6/19/09	1,638,773			1,638,773	39 MO S/L	567,268	42,019
94	MAIN OFFICE HVAC REPLACEMENT	4/15/10	4,250			4,250	15 MO S/L	3,612	284
95	COMPUTER FOR FRONT DESK/ADMIN	9/05/10	973			973	5 MO S/L	973	0
96	HVAC HEAT PUMP, WATER HEATER &	11/22/10	6,606			6,606	15 MO S/L	5,321	441
97	MEMBER TRACKING SYSTEM	4/01/10	3,000			3,000	5 MO S/L	3,000	0
98	TWO WHITE REFRIGERATORS	12/05/10	1,276			1,276	5 MO S/L	1,276	0
99	BUILD WALL & COUNTERS-MIDDLE S	2/03/10	5,300			5,300	15 MO S/L	4,564	353
100	CHAIRS AND TABLE DOLLIES	5/25/10	4,943			4,943	7 MO S/L	4,943	0
101	30 60" ROUND TABLES	6/05/10	2,789			2,789	7 MO S/L	2,789	0
102	SOUND SYSTEM FOR SPECIAL EVENT	6/08/10	4,376			4,376	5 MO S/L	4,376	0
103	CARPETING/ ENTRANCE TILES IN MA	4/29/10	1,096			1,096	5 MO S/L	1,096	0
104	DELL COMPUTER-MIDDLE SCH CTR	1/01/11	930			930	5 MO S/L	930	0
105	CAMERA-OUTDOORS/SECURITY SYS	4/01/11	915			915	5 MO S/L	915	0
106	LAPTOP COMPUTER-SCOTTIE	12/01/11	1,280			1,280	5 MO S/L	1,280	0
107	IMAC & OFFICE- ENTERPRISE PROGR	3/05/11	2,119			2,119	5 MO S/L	2,119	0
108	DELL COMPUTER-K-5 PRG DIRECTOR	5/01/11	689			689	5 MO S/L	689	0
109	DELL COMPUTER-ATHLETIC OFFICE	5/01/11	689			689	5 MO S/L	689	0
110	HP SERVER (DONATED-HI PERFORMA	8/01/12	3,500			3,500	5 MO S/L	3,500	0
111	20 PC's for Tech Lab	7/29/13	12,324			12,324	5 MO S/L	12,324	0
112	DVR SECURITY SYSTEM-TEEN CENTE	8/13/13	3,048			3,048	15 MO S/L	1,914	203
113	COMPUTER FOR PROJECT COORDINA	3/05/13	690			690	5 MO S/L	690	0
114	OUTDOOR SIGNS	3/05/13	512			512	15 MO S/L	336	34

56-1803125

Federal Asset Report

FYE: 12/31/2023

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
115	SONICWALL	8/02/13	885		885	3 MO S/L	885	0
116	FLOOR MACHINE - POWR FLITE	10/05/13	1,145		1,145	5 MO S/L	1,145	0
117	ACCOUNTING OFFICE UPFIT	8/29/13	7,839		7,839	15 MO S/L	4,878	522
118	2 PCs for ED & Accounting	7/29/13	1,232		1,232	5 MO S/L	1,232	0
119	FLOOR SCRUBBER	1/17/14	2,409		2,409	5 MO S/L	2,409	0
120	RESTROOM RENOVATIONS	4/01/14	23,285		23,285	15 MO S/L	13,583	1,552
125	LAND	9/10/13	62,500		62,500	0 -- Land	0	0
126	2 BASKETBALL GOALS	12/15/16	3,736		3,736	7 MO S/L	3,247	489
127	DELL COMPUTER FOR FRONT OFFICE	2/05/16	728		728	5 MO S/L	728	0
128	AIR CONDITIONER	4/01/16	3,232		3,232	7 MO S/L	3,117	115
129	FLOOR BURNISHER	7/05/16	962		962	5 MO S/L	962	0
130	MICROPHONE EQUIPMENT	6/05/16	1,195		1,195	5 MO S/L	1,195	0
131	TEEN CENTER - PHASE I	5/01/17	669,892		669,892	39 MO S/L	97,335	17,176
132	721 WHITE SPARROW DRIVE	11/07/17	110,346		110,346	0 -- Land	0	0
133	DELL COMPUTER	1/23/17	776		776	5 MO S/L	776	0
134	DELL COMPUTER	1/23/17	776		776	5 MO S/L	776	0
135	DELL COMPUTER	1/23/17	776		776	5 MO S/L	776	0
136	DELL COMPUTER	1/23/17	776		776	5 MO S/L	776	0
141	TABLES AND STOOLS	5/01/17	2,986		2,986	7 MO S/L	2,418	426
142	BENCH SEATS - TEEN CENTER	5/01/17	1,365		1,365	7 MO S/L	1,105	195
143	PHONE SYSTEM	5/01/17	1,707		1,707	7 MO S/L	1,381	244
144	TABLES AND STOOLS	5/01/17	1,163		1,163	7 MO S/L	942	166
145	WASHER/DRYER UNIT	5/01/17	1,164		1,164	7 MO S/L	942	167
146	TELEVISION WITH MOUNT	5/01/17	508		508	7 MO S/L	411	73
149	HEAT PUMP	3/02/18	5,747		5,747	15 MO S/L	1,852	383
150	DELL COMPUTER	1/22/18	5,000		5,000	5 MO S/L	4,917	83
151	OPTIPLEX COMPUTER #1	12/11/19	1,103		1,103	5 MO S/L	680	221
152	OPTIPLEX COMPUTER #2	12/11/19	1,103		1,103	5 MO S/L	680	221
153	OPTIPLEX COMPUTER #3	12/11/19	1,103		1,103	5 MO S/L	680	221
154	DELL SERVER	12/31/19	2,692		2,692	5 MO S/L	1,615	539
155	FIREWALL	4/25/19	1,663		1,663	5 MO S/L	1,219	333
156	WATER HEATER-GYM CLOSET	5/13/19	1,245		1,245	5 MO S/L	913	249
157	LAWN MOWER	8/29/19	669		669	5 MO S/L	446	133
158	LAPTOP #1	12/27/19	826		826	5 MO S/L	496	165
159	LAPTOP #2	12/27/19	826		826	5 MO S/L	496	165
160	LAPTOP #3	12/27/19	826		826	5 MO S/L	496	165
161	AC UNITS ROOM 11	7/30/20	11,500		11,500	15 MO S/L	1,853	766
162	HVAC UNITS IN MSC	11/01/20	9,500		9,500	15 MO S/L	1,372	634
163	FENCING	2/01/20	16,750		16,750	15 MO S/L	3,257	1,117
164	PARKING LOT	2/01/20	183,515		183,515	15 MO S/L	28,782	12,234
165	NEW BUILDING	2/01/20	2,611,371		2,611,371	39 MO S/L	195,295	66,958
166	FURNITURE	2/01/20	79,966		79,966	7 MO S/L	33,319	11,424
167	FENCING FOR ELLIS HOUSE	6/08/21	7,901		7,901	15 MO S/L	834	527
168	2019 FORD TRANSIT VAN	8/25/21	35,224		35,224	5 MO S/L	9,393	7,045
169	HVAC TEEN CENTER	10/06/21	16,226		16,226	15 MO S/L	1,352	1,082
170	2020 FORD TRANSIT VAN	12/30/21	49,945		49,945	5 MO S/L	9,989	9,989
171	FACADE PROJECT	6/01/21	7,597		7,597	39 MO S/L	308	195
172	LANDSCAPING PROJECT	6/16/21	3,255		3,255	15 MO S/L	326	217
173	LEICESTER FLOORING PROJECT	6/01/21	17,903		17,903	15 MO S/L	1,890	1,193
174	HVAC SYSTEM FOR GYM	4/21/22	32,880		32,880	15 MO S/L	1,461	2,192
175	HVAC UNIT ROOM 4	5/17/22	4,752		4,752	15 MO S/L	185	317
176	2020 CHEVY EXPRESS VAN VIN #8856	7/21/22	42,117		42,117	5 MO S/L	3,510	8,423
177	KITCHEN EXPANSION	6/15/22	40,366		40,366	39 MO S/L	604	1,035
178	KITCHEN SINKS & TABLES	6/15/22	2,588		2,588	10 MO S/L	151	259
179	20 HP V-TWIN ZERO TURN MOWER	4/28/23	3,499		3,499	5 MO S/L	0	467
180	LAND GRADING CLEARING ELLIS PRC	6/06/23	13,475		13,475	0 -- Land	0	0
181	FENCE 182' 6' TALL CHAIN LINK	7/26/23	8,916		8,916	15 MO S/L	0	248
Total Other Depreciation			<u>7,141,264</u>		<u>7,141,264</u>		<u>1,975,729</u>	<u>221,834</u>
Total ACRS and Other Depreciation			<u>7,141,264</u>		<u>7,141,264</u>		<u>1,975,729</u>	<u>221,834</u>
Grand Totals			7,254,862		7,254,862		2,074,198	223,406
Less: Dispositions and Transfers			0		0		0	0
Less: Start-up/Org Expense			0		0		0	0
Net Grand Totals			<u>7,254,862</u>		<u>7,254,862</u>		<u>2,074,198</u>	<u>223,406</u>

Form 990	Event Income and Deduction Worksheet	2023
	Description SPECIAL EVENTS	

Name BOYS AND GIRLS CLUB OF HENDERSON	Taxpayer Identification Number 56-1803125
---	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1. <u>27,452</u>
2. Advertising income	2. _____
3. Circulation income	3. _____
4. Other income	4. _____
5. Returns and allowances	5. _____
6. Contributions received	6. <u>79,795</u>
7. Total revenue. Add lines 1 through 6	7. <u>107,247</u>
8. Cost of Goods Sold	8. <u>32,339</u>
9. Employment Expense	9. _____
10. Fees for services	10. _____
11. Indirect Expense	11. _____
12. Depreciation Expense	12. _____
13. Exempt Activity Expense	13. _____
14. Fundraising Expense	14. _____
15. Total expenses. Add lines 8 through 14	15. <u>32,339</u>
16. Net Income/Loss. Line 7 minus Line 15	16. <u>74,908</u>

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	_____
Labor	_____
Section 263A costs	_____
Other costs	<u>32,339</u>
Ending inventory	_____
Total Cost of Goods Sold	<u>32,339</u>

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
Total Exempt Activity Expense	_____

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	_____
Total Fundraising Expense	_____

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code _____	Seq # _____
<input type="checkbox"/> Part V, Debt Financing	
<input type="checkbox"/> Part VI, Controlled Org Income	
<input type="checkbox"/> Part VII, Investments for C(7)(9)(17)	
<input type="checkbox"/> Part VIII, Exploited Activities	
<input type="checkbox"/> Part IX, Advertising Income	

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

Form 990	Event Income and Deduction Worksheet	2023
Description GOLF TOURNAMENTS		

Name BOYS AND GIRLS CLUB OF HENDERSON	Taxpayer Identification Number 56-1803125
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	115,489
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	155,514
7. Total revenue. Add lines 1 through 6	7.	271,003
8. Cost of Goods Sold	8.	103,331
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	103,331
16. Net Income/Loss. Line 7 minus Line 15	16.	167,672

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	103,331
Ending inventory	
Total Cost of Goods Sold	103,331

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code	Seq #	
<input type="checkbox"/>	Part V, Debt Financing	
<input type="checkbox"/>	Part VI, Controlled Org Income	
<input type="checkbox"/>	Part VII, Investments for C(7)(9)(17)	
<input type="checkbox"/>	Part VIII, Exploited Activities	
<input type="checkbox"/>	Part IX, Advertising Income	

Form **990**

Two Year Comparison Report

2022 & 2023

For calendar year 2023, or tax year beginning _____, ending _____

Name
**BOYS AND GIRLS CLUB OF HENDERSON
COUNTY/HENDERSONVILLE, INC.**

Taxpayer Identification Number
56-1803125

		2022	2023	Differences
Revenue	1. Contributions, gifts, grants	1. 2,292,228	2,613,231	321,003
	2. Membership dues and assessments	2. 5,550		-5,550
	3. Government contributions and grants	3. 613,780	800,432	186,652
	4. Program service revenue	4.		
	5. Investment income	5. 63,816	102,368	38,552
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 7,600	7,635	35
	8. Net income or (loss) from fundraising events	8. 43,643	7,271	-36,372
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 42,667	157,187	114,520
	12. Total revenue. Add lines 1 through 11	12. 3,069,284	3,688,124	618,840
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 1,535,338	1,875,817	340,479
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 34,289	71,300	37,011
	19. Occupancy, rent, utilities, and maintenance	19. 44,319	53,266	8,947
	20. Depreciation and Depletion	20. 217,736	223,406	5,670
	21. Other expenses	21. 538,883	817,285	278,402
	22. Total expenses. Add lines 13 through 21	22. 2,370,565	3,041,074	670,509
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 698,719	647,050	-51,669
Other Information	24. Total exempt revenue	24. 3,069,284	3,688,124	618,840
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 157,726	274,461	116,735
	27. Total assets	27. 9,153,205	9,895,376	742,171
	28. Total liabilities	28. 115,346	123,895	8,549
	29. Retained earnings	29. 9,037,859	9,771,481	733,622
	30. Number of voting members of governing body	30. 20	18	
	31. Number of independent voting members of governing body	31. 18	16	
	32. Number of employees	32. 84	118	
	33. Number of volunteers	33. 182	182	

Form **990**

Tax Return History

2023

Name **BOYS AND GIRLS CLUB OF HENDERSON COUNTY/HENDERSONVILLE, INC.**

Employer Identification Number
56-1803125

	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants	2,149,342	2,758,465	2,473,924	2,906,008	3,413,663	
Membership dues	9,474	2,429	5,011	5,550		
Program service revenue						
Capital gain or loss				7,600	7,635	
Investment income	15,285	18,250	50,078	63,816	102,368	
Fundraising revenue (income/loss)	47,402	64,396	72,791	43,643	7,271	
Gaming revenue (income/loss)						
Other revenue	695			42,667	157,187	
Total revenue	2,222,198	2,843,540	2,601,804	3,069,284	3,688,124	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation	1,012,772	1,178,796	1,440,375	1,535,338	1,875,817	
Professional fees	30,323	21,093	24,992	34,289	71,300	
Occupancy costs	36,173	35,028	38,522	44,319	53,266	
Depreciation and depletion	106,668	184,990	196,199	217,736	223,406	
Other expenses	384,429	293,743	398,279	538,883	817,285	
Total expenses	1,570,365	1,713,650	2,098,367	2,370,565	3,041,074	
Excess or (Deficit)	651,833	1,129,890	503,437	698,719	647,050	
Total exempt revenue	2,222,198	2,843,540	2,601,804	3,069,284	3,688,124	
Total unrelated revenue						
Total excludable revenue	63,382	82,646	122,869	157,726	274,461	
Total Assets	7,168,638	8,135,034	8,628,327	9,153,205	9,895,376	
Total Liabilities	289,735	120,014	96,088	115,346	123,895	
Net Fund Balances	6,878,903	8,015,020	8,532,239	9,037,859	9,771,481	

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INVESTMENT INCOME	\$ 102,368				14	
TOTAL	<u>\$ 102,368</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER CONTRACT SERVICES	\$ 55,414	\$ 35,178	\$ 16,245	\$ 3,991
TOTAL	\$ 55,414	\$ 35,178	\$ 16,245	\$ 3,991

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
DUES & SUBSCRIPTIONS	\$ 41,925	\$ 39,799	\$ 1,010	\$ 1,116
SMALL EQUIPMENT	37,786	36,652	756	378
PROGRAM FIELD TRIPS	34,896	34,896		
STAFF DEVELOPMENT	25,942	25,942		
RESOURCE DEVELOPMENT	25,368		10,471	25,368
BANK SVCE CHGS & MGT FEES	20,941		153	10,470
EQUIPMENT-CAPITAL/LEASE	7,669	7,439		77
TELEPHONE	3,212	3,116	64	32
MISCELLANEOUS EXPENSE	2,196	2,130	44	22
PROGRAM EQUIPMENT	2,054	2,054		
BOARD MEETINGS & DEV	283		142	141
TOTAL	\$ 202,272	\$ 152,028	\$ 12,640	\$ 37,604

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 56-1803125
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Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
UNITED WAY DESIGNATIONS	\$ 9,876
OTHER CONTRIBUTIONS	554,933
COMMUNITY FOUNDN OF HENDERSON COUNTY	20,000
CASH CONTRIBUTION	63,000
UNITED WAY OF HENDERSON COUNTY	49,300
CASH CONTRIBUTION	5,250
BOYS AND GIRLS CLUB OF AMERICA	73,042
CASH CONTRIBUTION	6,800
TOM AND SUE FAZIO	39,600
USE OF GOLF COURSE	15,000
CHILD NUTRITION PROGRAM INC	171,246
CASH CONTRIBUTION	28,723
CITY OF HENDERSONVILLE	5,000
CASH CONTRIBUTION	3,500
HENDERSON COUNTY JCPC	25,000
CASH CONTRIBUTION	208,911
HENDERSON COUNTY	23,393
CASH CONTRIBUTION	15,000
BOYS & GIRLS CLUBS - HHS/WFD	366,618
CASH CONTRIBUTION	30,400
NORTH CAROLINA OFC OF JUV JUSTICE	
CASH CONTRIBUTION	
ALTRIA GROUP MIMO	
CASH CONTRIBUTION	
DUKE ENERGY FOUNDATION	
CASH CONTRIBUTION	
WALNUT COVE MEMBERS ASSOCIATION	
CASH CONTRIBUTION	
DAVID AND TERRI LUCK	
CASH CONTRIBUTION	
HENDERSON COUNTY BOARD OF PUBLIC EDU	
CASH CONTRIBUTION	
BANK OF AMERICA CHARITABLE FOUNDATIO	
CASH CONTRIBUTION	
DOGWOOD HEALTH TRUST	
CASH CONTRIBUTION	
HUNTER AUTOMOTIVE GROUP	
CASH CONTRIBUTION	

Federal Statements

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
LEON LEVINE FOUNDATION	
CASH CONTRIBUTION	\$ 180,000
DOMINION ENERGY CHARITABLE FOUNDATIO	
CASH CONTRIBUTION	5,000
OPTIMUM	
IPADS	
WILLIAM R. KENAN, JR CHARITABLE TRUS	
CASH CONTRIBUTION	200,000
NC DEPT. OF PUBLIC INSTRUCTION	
CASH CONTRIBUTION	442,628
WELLS FARGO	
CASH CONTRIBUTION	20,000
ST. JAMES CHARITIES FOUNDATION	
CASH CONTRIBUTION	3,000
SISTERS OF MERCY OF NC FOUNDATION	
CASH CONTRIBUTION	50,000
FIRST UNITED METHODIST CHURCH	
CASH CONTRIBUTION	5,513
CAROLINE ELLIS, ESTATE OF	
CASH CONTRIBUTION	196,759
THE POLLINATION PROJECT	
CASH CONTRIBUTION	3,500
THE WINSTON-SALEM FOUNDATION	
CASH CONTRIBUTION	25,000
ESTATE OF SUSAN U. STEWART	
CASH CONTRIBUTION	257,362
ESTATE OF MADELINE ESSIG	
CASH CONTRIBUTION	75,000
SPECIAL EVENTS	
CASH CONTRIBUTION	79,795
GOLF TOURNAMENTS	
CASH CONTRIBUTION	155,514
TOTAL	<u>\$ 3,413,663</u>

Federal Statements

Schedule A, Part II, Line 5 - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
ALTRIA GROUP, INC.	\$ 20,000	\$
ANDREW RODDICK	5,000	
ANN BRELLS	10,000	
ANN LEA FINE ART GALLERY	8,960	
ANTHONY AND LYNN WEHRLE ZANDE	10,603	
BANK OF AMERICA CHARITABLE FOUNDATI	55,000	
BEAU AND SUZANNA WADDELL	10,700	
BERNARD AND MARY POWELL FOUNDATION	30,000	
BEST BUY FOUNDATION	42,000	
BEVERLY EDGELL	5,000	
BEVERLY HANKS AND ASSOCIATES	5,500	
BILL GREENE AND LINDA LATIMER	7,000	
BLUE CROSS BLUE SHIELD OF NORTH CAR	20,000	
BOB HAGLER	5,115	
BOBBY AND CHRIS SMITH	22,000	
BRENT AND MARGARET PARENT	7,000	
BRETT AND VICTORIA SHAFFER	8,750	
BRUCE AND ANNE YOUNG	20,500	
CHAMPION COMFORT EXPERTS	7,000	
CHARLES AND FRANCOIS RIEKER	24,000	
CHARLIE AND JANET WEAR	5,000	
CHRISTINE A. SMITH	5,000	
CHRISTOPHER AND CAROL SCHENCK	5,500	
CLARK WILSON	46,632	
CR AND SARA NOEGEL	11,738	
CURTIS AND SUSAN MARKER	50,850	
DAN AND DIANEICE ELDRIDGE	11,000	
DAN AND NANCY BARBER	15,000	
DANIEL AND ROBIN NAPOLI	5,000	
DAVID AND BRENDA WEST	35,000	
DAVID AND COLLEEN WATERS	25,000	
DAVID AND LORI NICHOLAS	8,240	
DAVID AND NANCY SHAFFER	118,000	
DAVID AND TERI LUCK	400,274	100,566
DESIGNERS' CHOICE	5,320	
DOGWOOD HEALTH TRUST	725,768	426,060
DOMINION ENERGY CHARITABLE FOUNDATI	5,000	
DONNA COLEMAN	5,000	
DUKE ENERGY FOUNDATION	25,500	
EDWARD AND BETSY HIPPI	11,282	
EDWARD AND MARY ANNE MAJZLIK	5,000	
EDWARD HILL	5,102	
EGOLF FAMILY CHARITABLE FUND	5,000	
ELISA DEVERA	10,000	
ELIZABETH DARNALL	26,800	
ERIN MISHKIN AND STEPHEN SCHULTZE	5,500	
ESTATE OF CAROLINE ELLIS	412,759	113,051
ESTATE OF GLORIA EVANS	165,831	
ESTATE OF MARY GARDNER	50,000	
ESTATE OF SUSAN U. STEWART	257,362	
ESTATE OF THOMAS DARNALL, JR.	250,000	
FIRST CITIZENS BANK AND TRUST	67,500	
GARY AND BEVERLY DILLON	202,825	
GARY AND MICHELE SIBEN	6,160	

Federal Statements**Schedule A, Part II, Line 5 - Excess Gifts (continued)**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
GEORGE EPSTEIN	\$ 5,000	\$
GEORGE W. BANKS	30,000	
GLASS FOUNDATION	45,000	
GRANT AND CAROL MORRISON	129,300	
GREAT BAY COUNTRY CLUB	5,000	
GREEN RIVER QUARRY	30,000	
GRETCHEN BATRA	5,000	
GREY AND SARA MCLEAN	104,301	
HALL AND SONJA WADDELL	195,000	
HARRISON JOHNSTON	5,000	
HEDRICK INDUSTRIES	10,000	
HENDERSON OIL COMPANY	5,286	
HERMANN REICHENECKER	5,010	
HILL FAMILY FOUNDATION	10,000	
HUNTER AUTOMOTIVE GROUP	158,600	
HUNTER HOMETOWN FOUNDATION	33,400	
INGLES MARKETS	10,000	
JACK AND PENNY SUMMEY	5,000	
JAMES AND CINDY RASMUSSEN	15,612	
JAMES AND CONSTANCE BELL FOUNDATION	105,500	
JAMES AND HARDY CHANDLER	10,400	
JAMES AND JO NITA IVEY	5,000	
JAMES AND JOANN YOUNGS	35,000	
JAMES H. CUMMINGS FOUNDATION	76,000	
JAMES SEABURY	10,000	
JAMES SOUERS	5,000	
JAMES STIKE	5,600	
JEFF EGOLF	5,000	
JEFF AND ELIZABETH JENNINGS	5,000	
JEROME WILLIAMS	10,300	
JIM AND GAY GOSNELL	26,000	
JOHN DUPREE	7,500	
JOHN AND ANNA HICKS	6,000	
JOHN AND CATHIE MCFADDEN	30,500	
JOHN AND SHARON MCNEELY	8,500	
JONATHAN ISHEE	5,000	
KAREN CHRISTY SIMPSON	42,600	
KAY DORE	24,000	
KEN AND LYNN ADAMS	5,300	
KENAN CHARITABLE TRUST	400,000	100,292
KENNETH AND VERNA MURPHY	41,812	
LEAH AND RICHARD MARGERISON	5,400	
LEEVEER FOUNDATION	50,000	
LEON LEVINE FOUNDATION	325,000	25,292
LIZ WHITNEY TIPPETT FOUNDATION	5,000	
LOUIS AND JUDITH SANTIAGO	44,174	
MARGARET ARNOLD	70,200	
MARK AND LINDA GURNEY	5,000	
MARY AND WILLIAM HOWES	20,000	
MCARTHUR GOLF CLUB	40,000	
MICHAEL AND TRUDIE BISCIOTTI	5,000	
MIRANDA HUNTER	41,781	
MORROW INSURANCE AGENCY	64,400	
NADINE SPEAR	8,578	

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Federal Statements

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Schedule A, Part II, Line 5 - Excess Gifts (continued)

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
NC GLAXOSMITHKLINE FOUNDATION	\$ 25,000	\$
NONA SCHMOOK	11,405	
OPTIMUM	15,000	
PARDEE MEMORIAL HOSPITAL	5,250	
PARSEC FINANCIAL MANAGEMENT, INC.	10,000	
PETER MORSE	100,000	
REABEN OIL COMPANY	73,100	
RICHARD AND SUSAN REIMELS	41,416	
ROBERT ADAMS	5,000	
ROBERT AND BARBARA BELL	60,025	
ROBERT H. AND SUSAN F. CASTELLINI F	50,000	
ROBERT TONJES	162,895	
ROBERT W. BAIRD AND CO INC.	6,666	
ROBERTA DAVERN	15,000	
SALLY AND BILL HALE	15,000	
STEPHEN AND RENEE BISCIOTTI FOUNDAT	100,000	
STEVE AND JAN JARRELL	107,389	
SUBARU OF AMERICA, INC.	140,414	
THOMAS AND LISA APODACA	20,000	
TOM AND SUE FAZIO	111,403	
TON UP CLUB HIGHLANDS, INC.	10,000	
UNITED FEDERAL CREDIT UNION	27,500	
VICTORIA AND DAVID SHAFFER	5,350	
VISTA STRATEGIES	5,000	
WALNUT COVE MEMBERS ASSOCIATION	59,000	
WAYNE AND ANN B'RELLS	15,000	
WELLS FARGO	20,000	
WILLIAM AND KAREN BABCOCK CHAR FUND	20,000	
WILLIAM AUSTIN	34,400	
WILLIAM DORE	10,000	
WILLIAM GARVEY	24,090	
WILLIAM RANKIN	20,000	
WILLIAMS FAMILY FOUNDATION	8,700	
ESTATE OF MADELINE ESSIG	75,000	
TOTAL	<u>\$ 7,084,128</u>	<u>\$ 765,261</u>

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56-1803125
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Schedule A, Part II, Line 8(e)

Description	Amount
INVESTMENT INCOME	\$ 102,368
TOTAL	\$ 102,368