PUBLIC INSPECTION COPY

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A I	or the	e 2021 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization Boys and Girls Clubs of Greater Housto	n	D Employer identifie	cation number
Г	Addre				
Е	Name chang			76-02377	32
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return/	815 Crosby St		(713) 86	8-3426
	termin ated			G Gross receipts \$	1,409,585.
	Ameno	Houston, IX 77019		H(a) Is this a group re	
	Applic tion pendir				? Yes X No
		same as C above		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ()	or 527	1	list. See instructions
		e: > www.bgcgh.org		H(c) Group exemptio	·
		organization: X Corporation	L Year	of formation: 1987 N	1 State of legal domicile: TX
F	art I	Summary	rorri do	financial (Tunnart for
é	1	Briefly describe the organization's mission or most significant activities: ${ t To}$ ${ t pi}$			
Governance					
Jerr	3	Check this box			6 Seis.
é	4	Number of independent voting members of the governing body (Part VI, line 1b)			6
		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			0
Activities &	6	Total number of volunteers (estimate if necessary)			6
Ę	7 2	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ą	l 'a	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	<u> </u>	The difficulties business taxable insome from the first source of		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		10,000.	10,000.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
e e	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		67,819.	620,165.
č	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		77,819.	630,165.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		152,500.	150,400.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
x De	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		26,259.	32,437.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		178,759.	182,837.
_		Revenue less expenses. Subtract line 18 from line 12		-100,940.	447,328.
Assets or			Ве	ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		4,883,108.	5,493,480.
Net A	-	Total liabilities (Part X, line 26)		0.	0. F 403 400
	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		4,883,108.	5,493,480.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and etatome	unter and to the heet of my	knowledge and belief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh			knowledge and belief, it is
tiuc	, 001160	Electronically Filed	iicii pi epai ei	lias any knowledge.	
Sig	n	Signature of officer		Date	
Her		Kevin R. Hattery, President & CEO			
1101	•	Type or print name and title			
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN
Paid	i	Barbara Murphy Barbara Murphy		11/1/22 if self-employ	P01386215
	parer	Firm's name ► Blazek & Vetterling	1		76-0269860
	Only	Firm's address 2900 Weslayan, Suite 200			
		Houston, TX 77027		Phone no. 71	3-439-5739
Ma	y the IF	as discuss this return with the preparer shown above? See instructions			X Yes No

Pa	Statement of Program Service								
		se or note to any line in this Part III							
1	Briefly describe the organization's mission:								
	The Foundation's purpos								
	general activities of E	oys & Girls Clubs of	Greater Houston, In	<u>c.</u>					
	Did the examination undertake any significan	t program continue duving the year which	h were not listed on the						
2	Did the organization undertake any significan			Yes X No					
		- 4.1- 0		Yes _A_No					
_	If "Yes," describe these new services on Sche			Yes X No					
3	Did the organization cease conducting, or ma		its, any program services?	Yes _A_No					
4	If "Yes," describe these changes on Schedule		react program continue to many wad by	avnonoo.					
4	Describe the organization's program service a								
	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 \$150	0,400. including grants of \$	150 400 .) (paragraft						
Ta	The Foundation collects								
	for the benefit and sup								
	Girls Clubs of Greater	_		<u> </u>					
	01110 01000 01 0100001	1104200117 11101							
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
			, , (
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
4d	Other program services (Describe on Schedul	e O.)							
		ding grants of \$) (Revenue \$)					
4e	Total program service expenses	150,400.		200					
				Form 990 (2021)					

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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	9		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	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			٠,,
_	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		37	
46	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	446		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		 ^ `
15		15		X
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10		16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		
"	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	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 ''		
.0		18		x
19	1c and 8a? If "Yes," complete Schedule G, Part II	13		
13		19		X
20a	complete Schedule G, Part III	20a		X
zua b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	J y y y y y y y y			

Form 990 (2021) Foundation
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? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	t 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	_		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	

Form 990 (2021) **Part V** Sta

			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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation 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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			.,,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			, .
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).	_		v
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		122
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
Ü		8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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?	15		X
4.0	If "Yes," see the instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
_ -	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	م		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form 990 (2021)

Foundation

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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.

800	tion A. Governing Rody and Management			Δ
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	4		
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			1
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	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?	7b	Х	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
·	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	1 0	l .	
	(This Section B requests information about policies not required by the internal nevertibe code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
		10b		1
11a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	25	
b 100		100	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	\vdash
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.	Х	1
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			37
_	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		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?	16a		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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X 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, an	d finan	cial	
	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			
	Kevin Hattery - (713) 868-3426			
	815 Crosby St, Houston, TX 77019			

Form 990 (2021) Foundation

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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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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 organize		orga	niza			npen	sate		irector, or trustee.	r
(A)	(B)	(B) (C) Position						(D)	(E)	(F)
Name and title	Average	(do				l than d	one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)			s both	an	compensation	compensation	amount of
	week	-	l an		i ecic	ii/ii us	(66)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		99/	npen		1099-NEC)	1099-1420)	and related
	below	dual t	rtiona	_	oldu	st col	15	10001120)		organizations
	line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			
(1) Kevin R. Hattery	0.10									
President & CEO	40.00			Х				0.	248,874.	20,402.
(2) Jonathan Sturgis	0.10									
VP Finance	40.00			Х				0.	158,749.	22,317.
(3) Gerald Bodzy	0.10	1						_	_	_
Chairman	0.50	Х		Х				0.	0.	0.
(4) Mark Johnson	0.10	ļ								
Trustee	1.00	Х						0.	0.	0.
(5) Will Leven	0.10	٠,,							_	
Trustee	1.00	Х						0.	0.	0.
(6) Chris Papouras Trustee	0.10	х						0.	0.	0.
(7) Adam Peakes	0.10	Α						0.	0.	U •
Trustee	0.50	Х						0.	0.	0.
(8) Cynthia Sanford	0.10	25							•	•
Trustee	0.50	х						0.	0.	0.
								-	-	-
		1								
		1								
		4								
		-								
		1								
		1	\vdash							
		1								
		1								
		1			_	_	_	ı	I .	- 000 (cood)

Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	<u>j Hi</u>	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average			Pos	itior			Reportable	Reportable	,	Es	timate	ed
	hours per					than o		compensation	compensation			ount	
	week					or/trus		from	from related			other	
	(list any	ctor						the	organization	ıs	com	pensa	tion
	hours for	r dire				b B		organization	(W-2/1099-MIS	SC/	fr	om the	е
	related	tee o	ıstee			ensat		(W-2/1099-MISC/	1099-NEC)		orga	anizati	ion
	organizations	Itrus	nal tr		oyee	d mo		1099-NEC)			and	d relate	ed
	below	Individual trustee or director	Institutional trustee	Je.	Key employee	nest o	ner				orga	ınizatio	ons
	line)	ib di	Inst	Officer	Key	Highest compensated employee	Former						
						\vdash							
						\vdash							
						⊢							
						_							
						_							
1b Subtotal								0.	407,62		4:	2,73	<u>19.</u>
c Total from continuation sheets to Part VI							\triangleright	0.		0.			0.
d Total (add lines 1b and 1c)								0.	407,63	23.	42	2,73	19.
2 Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable	Э			
compensation from the organization													0
												Yes	No
3 Did the organization list any former officer.	director, trust	ee. k	ev e	lame	ove	e. or	hia	hest compensated emp	lovee on	[
line 1a? If "Yes," complete Schedule J for s	•	-	•	•	•		_		•		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150											4	х	
5 Did any person listed on line 1a receive or a													
, ·	•				,			J			5		Х
rendered to the organization? If "Yes," com Section B. Independent Contractors	ipiete Scheaul	9 <i>J T</i>	or st	icn į	oers	on					3	I	
·							41-		100 000 of com-				
1 Complete this table for your five highest co	-	-							· · · · · · · · · · · · · · · · · · ·	Jensal	LIUII Tro	1111	
the organization. Report compensation for	the calendar ye	ear e	enair	ıg w	ith C	or wi	tnin		ear.				
(A) Name and business	address	NT/	\\TT	,				(B) Description of s	envices	_	(C omper		n
Traine and business	audiess	M	ONI	<u>. </u>			\dashv	Description of s	ei vices		ompei	isatioi	<u>'</u>
2 Total number of independent contractors (i	ncluding but n	ot lin	nited	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organi	zation 🕨				()							
									-			200	

Page 9

Form 990 (2021) Foundat
Part VIII Statement of Revenue

		Check if Schedule O	contai	ins a response	or note to any lin	e in this Part VIII			
				•	•	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt		Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
40									300010113 0 12 0 14
nts		. •							
Sra Iou	b								
s, (Am	С	Fundraising events		1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations		1d					
s, (mil	е	Government grants (contr	ibutio	ns) 1e					
Sign	f	All other contributions, gifts,	grants	s, and					
P E		similar amounts not included			10,000.				
ξŏ	g				•				
Σď	_	Total. Add lines 1a-1f				10,000.			
O 10	- "	Total. Add lines 1a-11			Business Code				
	_				Business Code				
<u>ic</u>	2 a								
er <	b								
S c	С								
ev ev	d	<u> </u>							
Program Service Revenue	е								
Ŗ	f	All other program service	reven	iue					
	g	Total. Add lines 2a-2f							
	3	Investment income (includ							
		other similar amounts)	•	•	•	83,692.			83,692.
	4	Income from investment of				,			,
	5				-				
	3	Royalties	Т	(i) Real	(ii) Personal				
	_		<u> </u>	(i) i leai	(ii) i ersonai				
	6 a	Gross rents	6a						
	b		6b						
	С	Rental income or (loss)	6c						
	d	Net rental income or (loss)))				
	7 a	Gross amount from sales of		(i) Securities	(ii) Other				
		assets other than inventory	7a	1,315,893					
	b	Less: cost or other basis							
ā		and sales expenses	7b	779,420.					
en	c	Gain or (loss)	7c	536,473.					
ther Revenue		Net gain or (loss)				536,473.			536,473.
포		Gross income from fundraisi				, -			, -
ξ	0 4	including \$	-						
0				I					
		contributions reported on		· I					
		Part IV, line 18		I .					
		Less: direct expenses)				
		Net income or (loss) from			_				
	9 a	Gross income from gamin							
		Part IV, line 19							
	b	Less: direct expenses		9k					
	С	Net income or (loss) from	gamir	ng activities	<u></u>				
	10 a	Gross sales of inventory, I	ess re	eturns					
		and allowances			a				
	b	Less: cost of goods sold			b				
		Net income or (loss) from		·····	<u> </u>				
\dashv			Juico	or inventory .	Business Code				
ns	44 -				Duomicos Code				
e eo	11 a								
Miscellaneous Revenue	b								
Se Se	С								
Mis	d	All other revenue							
\perp	е	Total. Add lines 11a-11d)				
	12	Total revenue. See instruction	ns			630,165.	0.	0.	620,165.

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 (C) Management and general expenses (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 150,400. 150,400. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management Legal 2,000. 2,000. Accounting Lobbying Professional fundraising services. See Part IV, line 17 30,437. 30,437. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 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.) All other expenses 182,837. 150,400. 32,437. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2021)
Part X Balance Sheet

Pai	rt X	Balance Sneet		
		Check if Schedule O contains a response or note to any line in this Part X		
			(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing	1	
	2	Savings and temporary cash investments		78,444
	3	Pledges and grants receivable, net	3	
	4	Accounts receivable, net	4	
	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	
ş	7	Notes and loans receivable, net	7	
Assets	8	Inventories for sale or use	8	
Ë	9	Prepaid expenses and deferred charges	9	
	10a	Land, buildings, and equipment: cost or other		
		basis. Complete Part VI of Schedule D 10a		
	b	Less: accumulated depreciation	100	
	11	Investments - publicly traded securities	4,842,137. 11	5,415,036
	12	Investments - other securities. See Part IV, line 11	12	2
	13	Investments - program-related. See Part IV, line 11	13	3
	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)	4,883,108. 16	5,493,480
	17	Accounts payable and accrued expenses		,
	18	Grants payable	18	3
	19	Deferred revenue	19)
	20	Tax-exempt bond liabilities	20)
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	21	
S	22	Loans and other payables to any current or former officer, director,		
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		
<u>a</u>		controlled entity or family member of any of these persons	22	!
_	23	Secured mortgages and notes payable to unrelated third parties		3
	24	Unsecured notes and loans payable to unrelated third parties	24	<u> </u>
	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	25	
	26	Total liabilities. Add lines 17 through 25	0. 26	0
,		Organizations that follow FASB ASC 958, check here 🕨 🗓		
Ses		and complete lines 27, 28, 32, and 33.		
<u>a</u>	27	Net assets without donor restrictions		
Ba	28	Net assets with donor restrictions	4,883,108. 28	5,493,480
ב		Organizations that do not follow FASB ASC 958, check here		
Ī		and complete lines 29 through 33.		
<u>ဂ</u>	29	Capital stock or trust principal, or current funds)
se.	30	Paid-in or capital surplus, or land, building, or equipment fund		
Net Assets or Fund Balances	31	- '	31	
Š	32	Total net assets or fund balances		
_	33	Total liabilities and net assets/fund balances	4,883,108. 33	5,493,480

Form **990** (2021)

Boys and Girls Clubs of Greater Houston Foundation

76-0237732 Page **12** Form 990 (2021)

Pa	rt 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		0,1				
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,8 7,3				
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))							
5	Net unrealized gains (losses) on investments							
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	5,49	3,4	80.			
Pa	rt 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: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit						
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.
Boys and Girls Clubs of Greater Houston

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Foundation 76-0237732 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Boys & Girls Clubs 76-0270942 182,837 Greater Houston Х 182,837. 0. Total

Foundation

76-0237732 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support		_		_	_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ie organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
	organization, check this box and stop						>
Sec	ction C. Computation of Publi	c Support Per	centage			т т	
	Public support percentage for 2021 (li		•	***		14	<u>%</u>
	Public support percentage from 2020					15	<u>%</u>
16a	33 1/3% support test - 2021. If the c	-			14 is 33 1/3% or m	nore, check this box	x and
	stop here. The organization qualifies		~				
b	33 1/3% support test - 2020. If the c				I line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts				="	VI how the organiz	ation
	meets the facts-and-circumstances te	•	•			47	1004
b	10% -facts-and-circumstances test	_				•	10% or
	more, and if the organization meets the				-		▶ □
40	organization meets the facts-and-circu						
ΙŎ	Private foundation. If the organization	n dia not check a	DOX ON TIME 13, 16	a, 100, 1/a, 0r 1/b	o, cneck this box a	na see instructions	<u> </u>

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.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to r expended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV Supporting Organizations

(Complete only if you checked a box in 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

- 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.)

		Yes	No
	1	Х	
	2		Х
	3a		Х
	3b		
	0-		
	3c		
	4a		Х
	та		
	4b		
	4c		
	5a		Х
	5b		
	5c		
	6		Х
	7		Х
	8		Х
	9a		Х
	~ :		v
	9b		X
	00		Х
	9c		22
	10a		Х
	.54		
	10b		
ule	A (Forn	n 990)	2021

			• 	_ ' '	age o
Pai	t IV	Supporting Organizations (continued)			
				Yes	No
11		ne organization accepted a gift or contribution from any of the following persons?			
а	•	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			37
_		elow, the governing body of a supported organization?	11a		X
		ily member of a person described on line 11a above?	11b		X
С		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	4.4		v
202	<u>detail</u>	_{in} Part VI. 3. Type I Supporting Organizations	11c		X
360	LIOIT L	5. Type i Supporting Organizations		V	
_	D: 4 4 h			Yes	No
1		e governing body, members of the governing body, officers acting in their official capacity, or membership of one or supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1	Х	
2		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year. The organization operate for the benefit of any supported organization other than the supported	-	- 22	
_		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
		N how providing such benefit carried out the purposes of the supported organization(s) that operated, vised. or controlled the supporting organization.	2		х
Sec	tion C	C. Type II Supporting Organizations			
		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		Yes	No
1	Were :	a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion C	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	•	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	•	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	,	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	signific	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	suppo	orted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance)	struction	s).	
2	Activit	ties Test. Answer lines 2a and 2b below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	ipported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how th	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or	r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part V	$ec{H}$ the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.			
а	Did th	e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its s	supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		l

Boys and Girls Clubs of Greater Houston

Foundation 76-0237732 Page 6 Schedule A (Form 990) 2021

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgar	nizations	y
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		·	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrat	ed Type III supporting orga	inization (see

Schedule A (Form 990) 2021

instructions).

Pai	t V	(a)(3) Supporting Orga	nizations _{(continu}	ıed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (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	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i_	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
8	and 4c. Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020 Excess from 2021				
_	LAUGUU II UIII LUL I				

Schedule A (Form 990) 2021

Boys and Girls Clubs of Greater Houston Foundation

76-023<u>7732 Page 8</u> Schedule A (Form 990) 2021 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. Part VI (See instructions.)

132028 01-04-22 Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

Boys and Girls Clubs of Greater Houston

Foundation

Employer identification number

76-0237732

Organization type (check one):						
Filers of	:	Section:				
Form 990 or 990-EZ X 501(c)(3) (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-PF		501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or				
		one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year				
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).				

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Name of organization

Boys and Girls Clubs of Greater Houston

Foundation

76-0237732

Employer identification number

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		\$10,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization

Boys and Girls Clubs of Greater Houston

Foundation

Employer identification number

76-0237732

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		i *	i .

Name of organization Employer identification number Boys and Girls Clubs of Greater Houston Foundation 76-0237732

	Use duplicate copies of Part III if additional	snace is needed	less for the year. (Enter this info. once.) \$
lo. m t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, ar	(e) Transfer of giftend ZIP + 4	t Relationship of transferor to transferee
o. 1 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee
lo. n t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee
lo. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	

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 Inspection

Name of the organization

Boys and Girls Clubs of Greater Houston Foundation

Employer identification number 76-0237732

Par	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, Iir		s or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
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 advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
D	impermissible private benefit?		Yes No
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	`	
	Preservation of land for public use (for example, recrea	·	of a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	Held at the End of the Tax Year
	day of the tax year.		
b		on the control of the death of	
	Number of conservation easements on a certified historic str		
а	Number of conservation easements included in (c) acquired	·	I
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	e organization during the tax
4	year ▶ Number of states where property subject to conservation ea:	coment is located	
	Does the organization have a written policy regarding the per		•
3	violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
•	>	Thanks and the second of the s	ison ranen sassinishis daning and year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	▶ \$,,
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	n(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	·	
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	nents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iten	ms.
b	If the organization elected, as permitted under FASB ASC 95	88, 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 furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
			> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A	-	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

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Par	rt III Organizations Maintaining Co	ollections of Art	t, Historical Tre	asures, or Othe	r Simila	r Assets	(continue	d)
3	Using the organization's acquisition, accession	n, and other records	s, check any of the f	ollowing that make s	significant	use of its		
	collection items (check all that apply):							
а	Public exhibition	d	Loan or excl	nange program				
b	Scholarly research	е						
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpo	se in Part	XIII.	
5	During the year, did the organization solicit or							
_	to be sold to raise funds rather than to be ma						Yes	No
Par	rt IV Escrow and Custodial Arrang							
	reported an amount on Form 990, Part					-, · · · · · · · · · · ·		
	Is the organization an agent, trustee, custodia		arv for contributions	or other assets not	included			
	on Form 990, Part X?		•				Yes	No
b	If "Yes," explain the arrangement in Part XIII a							
_		a cop.o.oo .o	ormig talerer				Amount	
С	Beginning balance				1c			
ď	Additions during the year							
۰ و	Distributions during the year							
f	Ending balance				16			
	Did the organization include an amount on Fo						Yes	No
	If "Yes," explain the arrangement in Part XIII.		*					
	rt V Endowment Funds. Complete if	the organization an	swered "Yes" on Fo	rm 990 Part IV line	10		<u></u>	
	- Complete ii	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four yea	ars back
1a	Beginning of year balance	4,883,108.	4,518,910.	4,021,851.	 ` 	517,273.	· , ,	1,062.
b	Contributions	10,000.	10,000.	- / /		7	, , , , ,	
C	Net investment earnings, gains, and losses	783,207.	532,957.	675,113.	-5	313,586.	41	5,734.
d	Grants or scholarships	150,400.	152,500.	154,000.		154,000.		5,834.
	Other expenditures for facilities	130,100.	132,300.	131,000.		.51,000.		3,031.
е								
	and programs	32,437.	26,259.	24,054.		27,836.	2	3,689.
f	Administrative expenses	5,493,478.	4,883,108.	4,518,910.	1 (27,851.		7,273.
g	End of year balance				<u> </u>	721,031.	4,51	7,273.
2	Provide the estimated percentage of the curre	•nt year end balance) neid as:				
a	Board designated or quasi-endowment ► Permanent endowment ► 79.0900		_%					
b	Term endowment Term e	%						
С								
0-	The percentages on lines 2a, 2b, and 2c should be the control of t	•	Para dia da anno la alabara	al a alore in take on all familie		-4'		
Зa	Are there endowment funds not in the posses	ssion of the organiza	tion that are held an	a administered for t	ne organiz	ation	Va	s No
	by:							X
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations	to a contract of the contract of					3a(ii)	 ^
	If "Yes" on line 3a(ii), are the related organizat						3b	
4 Dai	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipme		wment funds.					
ı aı	Complete if the organization answered		Dort IV line 11e S	oo Form OOO Dort V	lino 10			
	· · · · · · · · · · · · · · · · · · ·			T T				
	Description of property	(a) Cost or of	` '	1 ' '	Accumulat		(d) Book va	alue
		basis (investr	nent) basis ((Ott let) Ge	epreciation			
	Land							
	Buildings							
	Leasehold improvements							
	Equipment							
	Other							
rotal	I. Add lines 1a through 1e. (Column (d) must ed	aual Form 990 Part	X column (R) line 10	Oc.)				0.

Part VII Investments - Other Securities.			<u> </u>
Complete if the organization answered "Yes"		1	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(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) Tatal (Col. /h) must equal Form 000 Port V and /D) line 12)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)	>	
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	5111 51111 555, 1 dic 17, iii 6	110 01 1111 000 1 0111 000, 1 0117, 1110 20.	(b) Book value
(1) Federal income taxes			(a) Doon raide
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide	•		at reports the
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been pro	vided in Part XIII

Boys and Girls Clubs of Greater Houston 76-0237732 Page 4 Foundation Schedule D (Form 990) 2021 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains (losses) on investments 2a Donated services and use of facilities Recoveries of prior year grants 2c Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c Other losses Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Part V, line 4: The Foundation's endowment provides long-term financial support for Boys & Girls Clubs of Greater Houston, Inc.

Schedule D (Form 990) 2021

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

Boys and Girls Clubs of Greater Houston

2021

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) 2021

Foundation	n						76-0237732
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	
criteria used to award the grants or assis	tance?						No
2 Describe in Part IV the organization's pro	cedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Boys & Girls Clubs Grtr Hstn							
815 Crosby Street							
Houston, TX 77019	76-0270942	501(c)(3)	150,400.	0.			General support
			+				
2 Enter total number of section 501(c)(3) ar	l nd government or	l nanizations listed in th	l ne line 1 table				<u> </u>
3 Enter total number of other organizations	-	•	io iii io i tabio				

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

Page 2

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
Part I, Line 2:					
The Foundation only makes grants to	o its sup	ported org	ganization,	Boys and	
Girls Clubs of Greater Houston, Inc	c., a 501	(c)(3) pul	olic charit	у.	

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Questions Regarding Compensation

Boys and Girls Clubs of Greater Houston Foundation

Employer identification number 76-0237732

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

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

Schedule J (Form 990) 2021

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Kevin R. Hattery	(i)	0.	0.	0.	0.	0.		0.
President & CEO	(ii)	221,874.	27,000.	0.	15,120.	5,282.	269,276.	0.
(2) Jonathan Sturgis	(i)	0.	0.	0.	0.	0.		0.
VP Finance	(ii)	140,749.	18,000.	0.	10,112.	12,205.	181,066.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Part III- Additional Information
The Executive Committee of Boys and Girls Clubs of Greater Houston,
Inc. determines compensation for the President/CEO using information
and comparisons from other Boys and Girls Clubs for comparability.

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Inspection

Name of the organization

Boys and Girls Clubs of Greater Houston Foundation

Employer identification number 76-0237732

Form 990, Part VI, Section A, line 6:

The Foundation has one member, Boys and Girls Clubs of Greater Houston, Inc. (BGCGH).

Form 990, Part VI, Section A, line 7a:

The Foundation's sole member elects the Foundation's trustees for a three year term at its annual meeting. Any action taken by the member is taken by majority vote of its board of directors. The member may remove a trustee at any time without cause.

Form 990, Part VI, Section A, line 7b:

The Foundation must accept any action by the member upon receipt of written notice of the action taken and executed by two officers of the member.

Form 990, Part VI, Section B, line 11b:

Form 990 is reviewed by the President and Finance Committee of the member. The tax return is then submitted to the Foundation Chairman for final review and approval. Upon approval, it is made available on the member website for the Foundation board of trustees and then submitted to the IRS.

Form 990, Part VI, Section B, Line 12c:

All of the Foundation's trustees are also trustees of BGCGH and as such are required to complete and sign an annual conflict of interest policy questionnaire where they list any potential conflicts of interest. The replies are reviewed by the BGCGH President and Director of Finance.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

Boys and Girls Clubs of Greater Houston Foundation

Employer identification number 76-0237732

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controllin entity

organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	1	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
Boys & Girls Clubs Greater Houston -							
76-0270942, 815 Crosby Street, Houston, TX							
77019	Youth development org.	Texas	501(c)(3)	7	N/A		X

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76-0237732

Page 2

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

1 3	, , ,	1				_		T	_		
(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)		(k)
Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	al or Per	rcentage
	(state or	entity	(related, unrelated, lexcluded from tax under	income		alloca	tions?	amount in box	partn	er? Ow	wnership
	country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	No	
									+		
									\vdash		
	(b)	(b) (c) Primary activity Legal domicile (state or foreign	(b) (c) (d)	(b) (c) (d) (e)	(b) (c) (d) (e) (f) Primary activity Legal domicile (state or foreign foreign foreign foreign foreign for the following for the following foreign for the following for the following foreign for the following for the following for the following foreign for the following for the following for the following foreign for the following for the following foreign foreign for the following foreign	(b) (c) (d) (e) (f) (g)	(b) (c) (d) (e) (f) (g) (l	(b) (c) (d) (e) (f) (g) (h) Primary activity Legal Direct controlling Predominant income Share of total Share of	(b) (c) (d) (e) (f) (g) (h) (i) Primary activity Legal Direct controlling Predominant income Share of total Share of Disconnections Code VI IBI	(b) (c) (d) (e) (f) (g) (h) (i) (j) Primary activity (Legal Direct controlling Predominant income Share of total Share of Discontinuity (Code VI IBI General	(b) (c) (d) (e) (f) (g) (h) (i) (j)

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

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

Schedule R (Form 990) 2021

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	b Gift, grant, or capital contribution to related organization(s)				1b	X		
С	c Gift, grant, or capital contribution from related organization(s)				1c		X	
d	d Loans or loan guarantees to or for related organization(s)				1d		Х	
е	e Loans or loan guarantees by related organization(s)				1e		Х	
f	f Dividends from related organization(s)				1f		X	
	g Sale of assets to related organization(s)				1g		X	
h	h Purchase of assets from related organization(s)				1h		X	
i	i Exchange of assets with related organization(s)				1i		X	
j	j Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_	
							X	
k Lease of facilities, equipment, or other assets from related organization(s)								
-1					11		_X_	
					1m	X	_X_	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10	Х		
	p Reimbursement paid to related organization(s) for expenses				1 p		_X_	
q	q Reimbursement paid by related organization(s) for expenses				1q		X	
r	r Other transfer of cash or property to related organization(s)				1r		_X_	
S	s Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who must compl	lete this lir	ne, including covered re	elationships and transaction thresholds.				
	(a) (b) Name of related organization Transactio type (a-s)		(c) Amount involved	(d) Method of determining amount invo	lved			
	1,50 (6.5)	'						
1)								
''	·							
2)								
<u>~,</u>								
3)								
<u> </u>								
4)								
,								
5)								
6)			_					
3216	163 11-17-21			Schedule F	(Forn	n 990)	2021	

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership
	-									

Boys and Girls Clubs of Greater Houston Foundation

Schedule R	(Form 990) 2021 Foundation	76-0237732 Page 5
Part VII	(Form 990) 2021 Foundation Supplemental Information	
	Provide additional information for responses to questions on Schedule R. See instructions.	