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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Form **99** 

OMB No. 1545-0047

Depa Interr	rtment o al Reve	of the Treasury nue Service Go to www.irs.gov/Form990 for instructions a	nd the latest	information.		Inspection
			and ending			
	heck if	C Name of organization		D Employer ident	ificatio	on number
а	pplicabl	"   Boys and Girls Clubs of Greater Hous	ton			
	Addre chang	<sup>ss</sup> Inc.				
	Name chang			76-0270	942	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui	te E Telephone num	oer	
	Final return	815 Crosby St		(713) 8	68-	3426
	termir ated			<b>G</b> Gross receipts \$		14,131,128.
	Amen	$\frac{ded}{de}$ Houston TV 77010		H(a) Is this a group	returr	1
	Applic tion	F Name and address of principal officer: Revill R. Haccely		for subordinat	es?	Yes X No
	pendii	<sup>ng</sup> same as C above		H(b) Are all subordinate		
ΙT	ax-ex	empt status: 🚺 501(c)(3) 🔲 501(c) ( ) (insert no.) 🗌 4947(a	(1) or 📃 5	If "No," attach	a list.	See instructions
J۷	Vebsi	te: www.bgcgh.org		H(c) Group exempt	tion nu	Imber
ΚF	orm of	organization: 🚺 Corporation 📄 Trust 📄 Association 📄 Other	L Ye	ar of formation: 1953	M Sta	ate of legal domicile: TX
Pa	nrt I	Summary				
	1	Briefly describe the organization's mission or most significant activities: $\underline{TO}$				
Governance		to realize their full potential as resp	onsible	<u>e, caring ci</u>	<u>tiz</u>	ens.
rna	2	Check this box if the organization discontinued its operations or discontinued its operatis operations or discontinued its o	posed of mo	re than 25% of its net a	assets.	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3	43
	4	Number of independent voting members of the governing body (Part VI, line 1	b)		4	42
8 8	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			5	316
/itie	6	Total number of volunteers (estimate if necessary)			6	920
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			a	0.
<		Net unrelated business taxable income from Form 990-T, Part I, line 11			'b	0.
				Prior Year		Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		12,613,752	•	<u>13,733,753.</u>
ňu	9	Program service revenue (Part VIII, line 2g)		0	-	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-48,587	•	29,685.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-23,021	•	-262,069.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	12,542,144		13,501,369.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		21,000	•	54,450.
		Benefits paid to or for members (Part IX, column (A), line 4)		0	-	0.
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	0)	6,804,752		7,717,908.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		22,000	•	33,800.
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 1,055	453.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,514,652		5,695,969.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,362,404		<u>13,502,127.</u>
		Revenue less expenses. Subtract line 18 from line 12		1,179,740	•	-758.
or				Beginning of Current Yea	r	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		19,273,139		18,753,268.
dBs	21	Total liabilities (Part X, line 26)		1,483,542		1,008,311.
		Net assets or fund balances. Subtract line 21 from line 20		17,789,597	•	17,744,957.
	art II	Signature Block				
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying sche	dules and state	ments, and to the best of	my kno	wledge and belief, it is
true,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information	<u>of which prep</u> ar	er has any knowledge.		
		Electronically Filed				

Sign	Signature of officer		Da	ite
Here	Kevin R. Hattery, Presider	nt & CEO		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	Barbara Murphy	Barbara Murphy	11/14/2	23 self-employed P01386215
Preparer	Firm's name Blazek & Vetterli	ng	Fir	m's EIN 76-0269860
Use Only	Firm's address 2900 Weslayan, Su	ite 200		
	Houston, TX 77027		Ph	none no.713-439-5739
May the I	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
				202

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	Boys and Girls Clubs of Greater Houston
Form	990 (2022) Inc. 76-0270942 Page 2
Pa	t III Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
1	The Boys and Girls Clubs of Greater Houston's mission is to inspire
	and enable all youth, especially those who need us most, to realize
	their full potential as productive, responsible and caring citizens.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
•	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$3,606,397. including grants of \$) (Revenue \$)
	See Schedule O
4b	(2 + 2) (2 +
40	(Code:)(Expenses \$2,227,481. including grants of \$) (Revenue \$) Academic success programs reinforce and enhance the skills and
	knowledge members learn in school. The overall goal is to help club
	members improve their academic performance, graduate on time, and
	access a post-secondary pathway. Core programs aligned to science and
	technology, math, literacy, and arts offered at the club include Summer
	Brain Gain, Be Great Graduate, Diplomas to Degrees, Money Matters,
	Power Hour, DIY STEM, NASA Astro Camp, BookNook, Math Express and Skill Tech. Our summer learning program utilizes field trips and fun,
	high-yield learning activities that help members apply what they learn
	in the classroom in an interactive and enriching manner and aligns with
	Texas Essential Knowledge and Skills. Academic enrichment is also
	offered during summer programs to minimize summer learning loss.
4c	(Code:) (Expenses \$1,909,269. including grants of \$54,450. ) (Revenue \$)
	See Schedule O
<u>4</u> 4	Other program services (Describe on Schedule O.)
Ψu	(Expenses \$ 2,863,904. including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 10,607,051.
	Form <b>990</b> (2022)

 Boys and Girls Clubs of Greater Houston

 Form 990 (2022)
 Inc.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	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,		v	
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		x
А	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	11c		<u></u>
u		11d		х
	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
e f		TIE		
'	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
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,			<u> </u>
2	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		Х

Form	<u>1990 (2022)</u> Inc. 76-0270	942	Р	age <b>4</b>
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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 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 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? If			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00		x
00	"Yes," complete Schedule L, Part IV	28c	Х	<u> </u>
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	л	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
24	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
01	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	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	х	
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	х	
Pa	rt 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	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 26	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

le organization comply with backup withhold rules for reportable payments to vendors and reportable gal (gambling) winnings to prize winners?

1c

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
f	filed for the calendar year ending with or within the year covered by this return 2a 316			
	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b I	f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
f	inancial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b I	f "Yes," enter the name of the foreign country			
5	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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
<b>c</b> I	f "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
<b>6a</b> [	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
bΙ	f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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	
	f "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		77
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
-	f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
		8		
	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	0		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	nitiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 9	Section 501(c)(12) organizations. Enter:			
a (	Gross income from members or shareholders			
	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		
bΙ	f "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13 9	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	s 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.			
	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			X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		х
	excess parachute payment(s) during the year? f "Yes," see the instructions and file Form 4720, Schedule N.	13		
	s the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	f "Yes," complete Form 4720, Schedule O.	10		
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	f "Yes," complete Form 6069.			

Form 990 (2022)

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Form	990 (2022) Inc.		76-0270		Р	age <b>6</b>
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	respon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See ir	structions.			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	43			
	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	42			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other	]		
	officer, director, trustee, or key employee?		-	2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point c	ne 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, sto					
	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
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 read					
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue (	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by inc	lependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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 arrangem	ent wi	th 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	e its pa	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	zation	'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	d 990-	T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict o	f interest policy, and	d finano	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 boo	ks and	records			
	Kevin Hattery - (713) 868-3426					
	815 Crosby St, Houston, TX 77019				000	
232006	12-13-22			Form	9 <b>90</b>	(2022)

Form 990 (2		Inc.					76-0
Part VII	Compensation	of Officers,	Directors,	Trustees,	Key Employees,	Highest C	Compensated
	Employees, and	d Independe	ent Contra	ctors			

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

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

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not cl		ition		ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	dad	irecto	r/trus I	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	suadi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	tional		n ploye	t com	~	1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			organizations
(1) Kevin Hattery	40.00	_	_	-						
President & CEO	0.10	Х		х				282,289.	0.	23,102.
(2) Susy Smith	40.00									
VP Development	0.00				Х			194,072.	0.	19,173.
(3) Jonathan Sturgis	40.00									
VP Finance	0.10			Х				167,600.	0.	25,364.
(4) Zenae Campbell	40.00									
VP Program Services, Club Operations	0.00					X		148,510.	0.	23,359.
(5) Jelita Bridgeforth	40.00									
VP Human Resources	0.00					X		140,719.	0.	5,965.
(6) Shannon Woodruff	40.00									
Senior Director of Development	0.00					X		120,938.	0.	13,426.
(7) Ted Sukey	40.00									
Director of Finance	0.00					X		111,047.	0.	5,479.
(8) Will Leven	1.00									
Chair	0.10	Х		Х				0.	0.	0.
(9) Pedro Caruso	1.00									
Vice Chair	0.00	Х		Х				0.	0.	0.
(10) Sarah Morgan	1.00									
Secretary	0.00	Х		Х				0.	0.	0.
(11) Carl Luna	1.00									
Treasurer	0.00	Х		Х				0.	0.	0.
(12) Ali Ansari	0.50									
Director	0.00	Х						0.	0.	0.
(13) Brant Baird	0.50									
Director	0.00	Х						0.	0.	0.
(14) Gerald Bodzy	0.50									
Director	0.10	Х						0.	0.	0.
(15) Chris Canetti	0.50									
Director	0.00	Х						0.	0.	0.
(16) Kenny Coleman	0.50									
Director	0.00	Х						0.	0.	0.
(17) Bill Goetz	0.50							_		
Director	0.00	Х						0.	0.	<u> </u>

Inc.

Form 990 (2022)

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Part VII Section A. Officers, Directors, Trust	ees, Key Emp	ploye	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			•	C)			(D)	(E)	(F)
Name and title	Average	(do			itior	۱ than c	ne	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week (list anv			uau	reciu	or/trus <sup>.</sup>	lee)	- from	from related	other
	hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or d	tee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		/ee	mpen		1099-NEC)	1000 NEO	and related
	below	Individual trustee or director	nstitutional trustee	er	Key employee	Highest compensated employee	er	,		organizations
	line)	Indiv	Instit	Officer	Key e	High empl	Former			
(18) Giselle Rodriguez Greenwood	0.50									
Director	0.00	Х						0.	0.	0.
(19) Laura Gump	0.50									
Director	0.00	Х						0.	0.	0.
(20) Michael Holthouse	0.50									
Director	0.00	Х						0.	0.	0.
(21) Ben Johanneman	0.50									
Director	0.00	х						0.	0.	0.
(22) Isaac Johnson	0.50								0	
Director	0.00	Х						0.	0.	0.
(23) Mark Johnson	0.50	77						0	0	0
Director	0.10	Х						0.	0.	0.
(24) Greg Keller Director	0.00	x						0.	0.	0.
(25) Juan Kemp	0.00	Δ						0.	0.	0.
Director	0.00	х						0.	0.	0.
(26) Carolyn Moore Khourie	0.50	Λ						0.	0.	0.
Director	0.00	x						0.	0.	0.
1b Subtotal								1,165,175.	0.	115,868.
c Total from continuation sheets to Part VI							-	0.	0.	0.
d Total (add lines 1b and 1c)								1,165,175.	0.	115,868.
2 Total number of individuals (including but no										
compensation from the organization						,		· · · · · · · · · · · · · · · · · · ·		7
										Yes No
3 Did the organization list any former officer,	director, truste	ee, k	ay e	mpl	oye	e, or	hig	hest compensated empl	oyee on	
line 1a? If "Yes," complete Schedule J for su										3 X
4 For any individual listed on line 1a, is the su										
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	dule	Jf	or such individual		4 X
5 Did any person listed on line 1a receive or a										
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ich į	oers	on .				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest con	-	-								tion from
the organization. Report compensation for t	he calendar ye	ear e	ndin	ig w	ith c	or wi	thin		ear.	
(A) Name and business	addraaa							<b>(B)</b> Description of se		(C) Compensation
	audress							Description of s		ompensation
Noble Building Services	mina M	v		20	c			Quetodial Co.		275 704
25003 Pitkin Rd #A600, Sp Kilgore Industries	ring, T	<u> </u>	11.	20	0		-	Custodial Ser	rvices	275,704.
10050 Houston Oaks Dr, Ho	uaton	mv		70	61			Facility mair	tonango	218,086.
CertaPro Painters	uscon,	IN	/	10	04		-ř	raciiicy maii		210,000.
30 Stanwick Pl, The Woodl	ande m	x	77	38	2		ļ	Facility mair	tenance	169,504.
								Lacrecy mari		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

Inc.

Form 990

76-0270942

Part VII Section A. Officers, Directo (A)	(B)			(C		0		(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	heck				ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				o yee		the	organizations	compensation
	(list any	recto				em pli		organization	(W-2/1099-MISC)	from the
	hours for	e or di	tee			sated		(W-2/1099-MISC)		organization
	related organizations	'ustee	l trust		ee	n pen s				and related organizations
	below	dual tr	itiona	_	nploy	stcor	ar			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) Guy Koenig	0.50									
Director	0.00	х						0.	0.	0.
(28) Mike Kuznar	0.50									
Director	0.00	х						0.	0.	0.
(29) Steve Metzger	0.50									
Director	0.00	Х						0.	0.	0.
(30) Mile Milisavljevic	0.50									
Director	0.00	Х						0.	0.	0.
(31) Barry Palmer	0.50									
Director	0.00	Х						0.	0.	0.
(32) Chris Papouras	0.50								•	
Director	0.10	Х						0.	0.	0.
(33) Adam Peakes	0.50							•	0	0
Director	0.10	Х						0.	0.	0.
(34) Rick Perez	0.50	v						0.	0.	0.
Director (35) Nicholas Perkins	0.00	Х						0.	0.	0.
Director	0.00	x						0.	0.	0.
(36) Grady Prestage	0.50	Λ						0.	0.	0.
Director	0.00	х						0.	0.	0.
(37) Chris Reina	0.50									
Director	0.00	x						0.	0.	0.
(38) Cynthia Sanford	0.50									
Director	0.10	х						0.	0.	0.
(39) Anita Sehgal	0.50									
Director	0.00	х						0.	Ο.	0.
(40) Pranika Sinha	0.50									
Director	0.00	Х						0.	0.	0.
(41) LaRence Snowden	0.50									
Director	0.00	Х						0.	0.	0.
(42) Stephen Strake	0.50									
Director	0.00	Х						0.	0.	0.
(43) Michael Terracina	0.50							_		_
Director	0.00	х						0.	0.	0.
(44) Ken Tubman	0.50								•	<b>^</b>
Director	0.00	X						0.	0.	0.
(45) Alejandro Vanags	0.50								•	^
Director	0.00	X						0.	0.	0.
(46) Michael Vinson	0.50	v							<u>^</u>	_
Director	0.00	Ā						0.	0.	0 .

(A)       (B)       (C)       (D)       (E)       (F)         Name and title       Average hours       Position (check all that apply)       Reportable compensation from related organizations       Reportable compensation from related other compensation from related organizations       Compensation from related other compensation from related other compensation from related organizations         Name and title       Verage hours (list any hours for related organization related organization from related organization from the organization from the organization organization (W-2/1099-MISC)       Organization from the organization organization from the organization organization from the organization organization (W-2/1099-MISC)	Form 990 Inc.								iter nouscon	76-027	0942
Name and titleAverage hours per week (list any hours for related organizations below line)Position (check all that apply)Reportable compensation from the organization (W-2/1099-MISC)Reportable compensation from (W-2/1099-MISC)Estima amoun othe compensation from the organizations (W-2/1099-MISC)(47) Sean Wheeler0.50x00.0.Director0.50x00.0.(49) Michelle Young0.50000.0.			nplo	oyee			ligh	est		. ,	
hours per week (list any hours for related organizations below line)(check all that apply) evek (list any hours for related organizations below line)compensation from the organization (W-2/1099-MISC)compensation from the organizations (W-2/1099-MISC)amound othe organizations (W-2/1099-MISC)(47) Sean Wheeler Director0.50 0.000 0.000x00.0.0.100 (48) Lisa Wright Director0.50 0.000x00.0.											
per week (list any hours for related organizations below line)per week (list any hours for related organizations below line)per week (list any hours for related organizations below line)from the organization (W-2/1099-MISC)from related organization (W-2/1099-MISC)othe compens from the organization (W-2/1099-MISC)(47) Sean Wheeler0.50VVV0.0.0.100XVV0.0.0.(48) Lisa Wright0.50VV0.0.0.Director0.000XV0.0.0.(49) Michelle Young0.50VVV0.0.	Name and title	-									Estimated
week (list any hours for related organizations below line)output organizations page line)the organization (W-2/1099-MISC)organizations (W-2/1099-MISC)compens from to organization (W-2/1099-MISC)(47) Sean Wheeler Director0.50 0.000x00.00 x0.00 0.0000.00 x0.00 0.0000.00 0.000			(C	heck	k all '	that	app	ly)		-	amount of
(list any hours for related organizations below line)10000 related organizations below line)10000 related organizations organization organization organization organization organization (W-2/1099-MISC)(W-2/1099-MISC) organization <br< td=""><td></td><td>· ·</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>other</td></br<>		· ·									other
0.50         0.50         0.00 <th< td=""><td></td><td colspan="2">week</td><td>oyee</td><td></td><td></td><td></td><td>compensation</td></th<>		week		oyee				compensation			
0.50         0.50         0.00 <th< td=""><td></td><td></td><td>recto</td><td></td><td></td><td></td><td>empl</td><td></td><td></td><td>(W-2/1099-MISC)</td><td>from the</td></th<>			recto				empl			(W-2/1099-MISC)	from the
0.50         0.50         0.00 <th< td=""><td></td><td></td><td>ordi</td><td>ee</td><td></td><td></td><td>ated</td><td></td><td>(W-2/1099-MISC)</td><td></td><td>organization</td></th<>			ordi	ee			ated		(W-2/1099-MISC)		organization
0.50         0.50         0.00 <th< td=""><td></td><td></td><td>ustee</td><td>trust</td><td></td><td>e</td><td>bens</td><td></td><td></td><td></td><td></td></th<>			ustee	trust		e	bens				
0.50         0.50         0.00 <th< td=""><td></td><td></td><td>al tri</td><td>onal</td><td></td><td>ploye</td><td>Com</td><td></td><td></td><td></td><td>organizations</td></th<>			al tri	onal		ploye	Com				organizations
0.50         0.60 <th< td=""><td></td><td></td><td>divid</td><td>stitut</td><td>ficer</td><td>ey em</td><td>ghest</td><td>rmer</td><td></td><td></td><td></td></th<>			divid	stitut	ficer	ey em	ghest	rmer			
Director         0.00 X         0.00 O.           (48) Lisa Wright         0.50 Director         0.00 X         0.00 O.           (49) Michelle Young         0.50 O.         0.00 O.	(47) Soon Whoolor		-	=	9	ž	Ξ	3			
0.50         0.50         0.00 <th< td=""><td></td><td></td><td>x</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			x						0.	0.	0.
Director         0.00 X         0.00         0.00           (49) Michelle Young         0.50         0.0						-					
(49) Michelle Young 0.50			v						0	0	0.
			<b>^</b>						0.	0.	0.
			-								
	DITECTOL	0.00	Ā		-				U.	U.	0.
			-								
			_								
		+						-			
Total to Part VII, Section A, line 1c											

			<u>2022)</u> Inc							76-0270	942 Page 9
Pa	rt V		Statement of Re	ver	nue						
			Check if Schedule O	cont	ains a	response	or note to any lin	(			
								<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
ts	1 :	а	Federated campaigns			1a					
iran			Membership dues			1b	61,183.				
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events			1c	1,218,483.				
3ifts ar /		d	Related organizations			1d	158,500.				
is, ( imil		е	Government grants (contr	ibut	ions)	1e	5,016,186.				
tion sr S	1	f	All other contributions, gifts,	gran	nts, and						
ibu			similar amounts not included	abo	ve	1f	7,279,401.				
ontr od O	9		Noncash contributions included in			1g  \$	1,314,133.				
a C		h	Total. Add lines 1a-1f					13,733,753.			
	_						Business Code				
ice	2										
erv		b									
m S Ven		C									
graı Rev		d									
Program Service Revenue		e f	All other program service	rove							
_			Total. Add lines 2a-2f								
	3	9	Investment income (includ								
	-							39,455.			39,455.
	<ul><li>4 Income from investment of tax-exempt bond proce</li></ul>										
	5		Royalties								
					(i	) Real	(ii) Personal				
	6 :	а	Gross rents	6a	ı 📃	12,605.					
	I	b	Less: rental expenses	6b	,	0.					
		с	Rental income or (loss)	6c	;	12,605.					
		d	Net rental income or (loss	) <u></u>				12,605.			12,605.
	7 :	а	Gross amount from sales of		(i) S	ecurities	(ii) Other				
			assets other than inventory	7a	ч <u> </u>	11,478.	72,462.				
		b	Less: cost or other basis				00.100				
evenue			and sales expenses	7b	_	5,588.					
eve			Gain or (loss)	7c		5,890.		-9.770			_9 770
Other Re			Net gain or (loss)					-9,770.			-9,770.
Othe	0	d	including \$ 1,	-							
0			contributions reported on			- 1					
			Part IV, line 18		,		261,375.				
		b	Less: direct expenses								
			Net income or (loss) from			·····		-274,674.			-274,674.
			Gross income from gamin								
			Part IV, line 19			9a	1				
		b	Less: direct expenses			9b	,				
		с	Net income or (loss) from	gan	ning ac	tivities					
	10 :	а	Gross sales of inventory,	ess	returns	s					
			and allowances								
			Less: cost of goods sold								
	(	С	Net income or (loss) from	sale	es of inv	ventory .					
sn		_					Business Code				
Miscellaneous Revenue	11 :										
∍llar ven		b c									
isce Be			All other revenue								
Σ			Total. Add lines 11a-11d								
			Total revenue See instruction					13,501,369.	0.	0.	-232,384.

Form 990 (2022) Inc.
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).

0000	On Son(c)(S) and Son(c)(4) organizations must comp				
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	54,450.	54,450.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
5		711,600.	531,655.	99,650.	80,295.
•	trustees, and key employees	/11,000.	JJT,0JJ.		00,295.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		4 405 0.64		
7	Other salaries and wages	6,003,091.	4,485,061.	840,656.	677,374.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	148,617.	111,036.	20,812.	16,769.
9	Other employee benefits	353,314.	263,969.	49,477.	39,868.
10	Payroll taxes	501,286.	374,523.	70,199.	56,564.
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	42,890.		42,890.	
	Lobbying	,		, •_ •	
	Professional fundraising services. See Part IV, line 17	33,800.			33,800.
		55,000			
f	Investment management fees				
g		620 210	227 605	262,284.	39,279.
	column (A), amount, list line 11g expenses on Sch 0.)	639,248.	337,685.		
12	Advertising and promotion	102,453.	6,275.	86,471.	9,707.
13	Office expenses	177,602.	61,772.	89,512.	26,318.
14	Information technology	207,871.	118,677.	68,540.	20,654.
15	Royalties				
16	Occupancy	1,039,943.	989,460.	45,743.	4,740.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	143,250.	60,975.	75,091.	7,184.
20	Interest				
21	Payments to affiliates	29,560.	29,560.		
22	Depreciation, depletion, and amortization	928,521.	910,499.	18,022.	
23	Insurance	309,107.	261,046.	26,791.	21,270.
24	Other expenses. Itemize expenses not covered	,	,		,=
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
-	amount, list line 24e expenses on Schedule 0.)	1,314,018.	1,275,465.	24,618.	13,935.
a b	Program supplies	606,401.	606,401.	47,0100	±5,355•
b	Vehicles/transportation	133,946.	125,842.	5,004.	3,100.
C ,	Membership dues	21,159.	2,700.	13,863.	4,596.
d		41,133.	2,700.	±5,005•	4,530.
е 25	All other expenses	13,502,127.	10,607,051.	1,839,623.	1,055,453.
<u>25</u> 26	Joint costs. Complete this line only if the organization		, , , , , , , , , , , , , , , , , ,		_,,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	012-13-22				Form <b>990</b> (2022)

Form 990 (2022)

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		3,438,599.	1	2,961,720.	
	2	Savings and temporary cash investments			652,856.	2	510,068.
	3	Pledges and grants receivable, net			3,558,331.	3	3,535,288.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ns		5	
	6	Loans and other receivables from other disquality	fied pers	sons (as defined			
		under section 4958(f)(1)), and persons described		6			
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			116,828.	9	177,840.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	20,079,963.			
	b	Less: accumulated depreciation	10b	10,009,088.	10,300,805.	10c	
	11	Investments - publicly traded securities			1,198,290.	11	1,490,047.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			7,430.	15	7,430.
	16	Total assets. Add lines 1 through 15 (must equa			19,273,139.	16	18,753,268.
	17	Accounts payable and accrued expenses			582,265.	17	900,311.
	18	Grants payable		18	100 000		
	19	Deferred revenue		19	108,000.		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete I				21	
ies	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
Liat	00	controlled entity or family member of any of the		F		22	
	23 24	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23 24	
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pa				24	
	25	parties, and other liabilities not included on lines					
		- f O - h - sh - h - D	-		901,277.	25	0.
	26	Total liabilities. Add lines 17 through 25			1,483,542.	26	1,008,311.
	20	Organizations that follow FASB ASC 958, che	ck here	X	_,	20	
es		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			14,063,742.	27	13,993,582.
Balá	28	Net assets with donor restrictions			3,725,855.	28	3,751,375.
l pu		Organizations that do not follow FASB ASC 9					
μ		and complete lines 29 through 33.					
ъ С	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or ec				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			17,789,597.	32	17,744,957.
_	33	Total liabilities and net assets/fund balances			19,273,139.	33	18,753,268.
							Earm <b>990</b> (2022)

Form 990 (2022)

Boys	and	Girls	Clubs	of	Greater	Houston

	<u>1 990 (</u> 2022) Inc.	76-02	270942	Pag	<sub>ge</sub> 12
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	13,503		
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,502		
3	Revenue less expenses. Subtract line 2 from line 1	3			58.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17,789		
5	Net unrealized gains (losses) on investments	5	-43	3,8	82.
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	17,744	1,9	<u>57.</u>
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	0.			
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?		<b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e 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	e audit,			1
	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 Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form 990 (2022)

(Form 99	f the Treasury	Co		OMB No. 1545-0047					
Name of	the organizati	on Boys	and Girls	Clubs of Gre	eater	Houst	on		identification number
Dort	Decem	Inc.	Charity Status	/ <b>.</b>					6-0270942
Part I				(All organizations must c			ee instructior	IS.	
1       1         2       1         3       1         4       1	A church, co A school des A hospital or	nvention of chu cribed in <b>secti</b> a cooperative search organiza	urches, or associatio ion 170(b)(1)(A)(ii). ( hospital service orga	For lines 1 through 12, cl on of churches described Attach Schedule E (Form anization described in <b>se</b> njunction with a hospital	in <b>sectio</b> n 990).) <b>ection 170</b>	n 170(b)(1 (b)(1)(A)(ii	i).	)(iii). Enter	the hospital's name,
5	An organizati	on operated fo	or the benefit of a col	llege or university owned	l or operate	ed by a go	vernmental u	nit describe	ed in
6 7 X 8 9	<ul> <li>7 X 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.)</li> <li>8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> </ul>								
10	<ul> <li>university:</li> <li>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.</li> </ul>								
11 12 a b	<ul> <li>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.</li> <li>a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.</li> </ul>								
c d	its support	ed organization n-functionally	n(s) (see instructions) integrated. A supp	g organization operated ). You must complete I porting organization oper cation generally must sat	Part IV, Se ated in cor	ctions A,	<b>D, and E.</b> /ith its suppor	ted organiz	zation(s)
e 🗌	Check this	box if the orga integrated, or	anization received a v Type III non-function	nplete Part IV, Sections written determination fro nally integrated supportin	m the IRS ng organiz	that it is a ation.	Туре I, Туре	II, Type III	[]
		••	about the supporte						
	i) Name of supp organizatior	orted	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi <b>Yes</b>	nization listed ng document? <b>No</b>	(v) Amount o support (see ir	-	(vi) Amount of other support (see instructions)
				above (see instructions))					
Total									

Schedule A (Form 990) 2022
Part II Support Sch

76 - 0270942 Page 2 70(b)(1)(A)(vi)

ł	A (Form 990) 2022 IIIC •	/0-02/0942	'aç
	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 un	nder Part III. If the organizatio	'n
	fails to qualify under the tests listed below, please complete Part III.)		

Sec	tion A. Public Support											
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	8216781.	9416082.	12056267.	12613752.	13733753.	56036635.					
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	8216781.	9416082.	12056267.	12613752.	13733753.	56036635.					
	The portion of total contributions											
Ŭ	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)						2213307.					
~							53823328.					
	6 Public support. Subtract line 5 from line 4. 53823328. Section B. Total Support											
		(-) 0010	(1-) 0010	(-) 0000	(1) 0001	(-) 0000	(0) Tabal					
	ndar year (or fiscal year beginning in)	(a)2018 8216781.	(b) 2019	(c) 2020	(d)2021 12613752.	(e) 2022	(f) Total					
	Amounts from line 4	0210/01.	9410002.	12030207.	12013/32.	<u></u>	50030035.					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,	1 - 224	A A 17 A 1	10 005	17 201		140 001					
	and income from similar sources	15,324.	44,741.	19,695.	17,381.	52,060.	149,201.					
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on			9,429.			9,429.					
10	Other income. Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI.)	55,787.	21,820.	1,740.			79,347.					
11	Total support. Add lines 7 through 10						56274612.					
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	360.					
13	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third,	fourth, or fifth tax y	ear as a section 5/	01(c)(3)						
	organization, check this box and stop											
Sec	tion C. Computation of Publi	c Support Per	centage									
14	Public support percentage for 2022 (li	ine 6, column (f), d	ivided by line 11, o	column (f))		14	95.64 %					
	Public support percentage from 2021					15	<u>95.82 %</u>					
16a	16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and											
	stop here. The organization qualifies as a publicly supported organization											
b	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box											
	and stop here. The organization qualifies as a publicly supported organization											
17a	<b>7a 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,											
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization											
	meets the facts-and-circumstances te			-	-							
b	b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or											
	more, and if the organization meets th	-										
	organization meets the facts-and-circu											
18	Private foundation. If the organizatio											
	J		,				·····					

Schedule A (Form 990) 2022

Inc. Schedule A (Form 990) 2022 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support **(a)** 2018 (e) 2022 Calendar year (or fiscal year beginning in) (b) 2019 (c) 2020 (d) 2021 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge ... 6 Total. Add lines 1 through 5 ..... 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the

8	Publi	c sı	upport.	(Subtract line 7c fro	m line 6.)
Sec	tion	Β.	Total	Support	

amount on line 13 for the year **c** Add lines 7a and 7b

Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
<b>9</b> Amounts from line 6										
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources										
<b>b</b> Unrelated business taxable income										
(less section 511 taxes) from businesses										
acquired after June 30, 1975										
c Add lines 10a and 10b										
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on										
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)										
13 Total support. (Add lines 9, 10c, 11, and 12.)										
14 First 5 years. If the Form 990 is for th	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) organizat	ion,				
check this box and stop here										
Section C. Computation of Publi	c Support Pe	rcentage								
15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))						%				
Public support percentage from 2021 Schedule A, Part III, line 15										

#### 16 Public support percentage from 2021 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage

<b>U</b> E	Sion D. Computation of investment income refeettage		
17	Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	
18	Investment income percentage from 2021 Schedule A, Part III, line 17	18	
19a	33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33	3 1/3	%, and line 17 is not
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	tion	
b	33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is mo	re th	an 33 1/3%, and
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly support	rted	organization

					ie eigenn		quannee de c		pertea erga	
20	Private foundation.	If the organization	on did not chec	k a box on line	14, 19a,	or 19b,	, check this	box and see i	nstructions	

% %

Schedule A (Form 990) 2022

1

Yes

No

### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Sche	edule A (Form 990) 2022 Inc.	76-02709	42 F	age 5
_	rt IV Supporting Organizations (continued)			<u> </u>
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11:	а	
b	A family member of a person described on line 11a above?	11	5	
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	110	5	
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of o			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or directory or truttees at all times during the top year? ((III) III) and III) and IIII) and IIIII) and IIII) and IIIII) and IIII) and IIII	fficers,		
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization and the organization because the organization and the organization because the organ	norted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	_	
2	5 1 5 1			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
		_	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s). ction D. All Type III Supporting Organizations	1		
Sec				
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
-	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
Sec	supported organizations played in this regard.	3		
		tructions)		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	u uctions).		
b				
c		tity (and instruct	ional	
2	Activities Test. Answer lines 2a and 2b below.	iny (see instruct	Yes	No
ے a			163	
a	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
~	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			

- these activities but for the organization's involvement.Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

232025 12-09-22

2b

3a

	t V Type III Non-Functionally Integrated 509(a)(3) Support			<b>-</b>
	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI). See instructio
	All other Type III non-functionally integrated supporting organizations mu	ist complete a	Sections A through E.	
cti	on 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		
	on 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		
ecti	on 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		

#### 232026 12-09-22

and Girls Clubs of Greater Houston \_ \_ \_

instructions).

Schedule A (Form 990) 2022

	dule A (Form 990) 2022 Inc.			76-0270942 Page 7
Par		a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
_6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which th	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount	(1)	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
с	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
с	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
с	Excess from 2020			
	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

					and	Girl	s Clul	os of	E Gre	eater	Housto	
F li S	Supplem Part IV, Sec ine 1; Part	tion A, I IV, Secti lines 5, 6	ines 1, : on D, lii	2, 3b, 3c, nes 2 and	4b, 4c, 5 3; Part I	5a, 6, 9a, V, Sectio	9b, 9c, 11 n E, lines	a, 11b, a 1c, 2a, 2	and 11c b, 3a, a!	; Part IV, nd 3b; Pa	Section B, line art V, line 1; Pa	76-0270942 Page 8 a or 17b; Part III, line 12; ss 1 and 2; Part IV, Section C, rrt V, Section B, line 1e; Part V, itional information.
Schedul	e A, 1	Part	II,	Line	10,	Expl	anati	on f	or C	ther	Income	:
Insuran	ce pro	oceed	ls/O	ther	inco	me						
2018 Am	ount:	\$	55,	787.								
2019 Am	ount:	\$	21,	820.								
2020 Am	ount:	\$	1,7	40.								

## \*\* PUBLIC DISCLOSURE COPY

# Schedule of Contributors

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

2022

Employer identification number

76-0270942

Boys Inc.	and	Girls	Clubs	of	Greater	Houston
Organization type (check one):						

Schedule B

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

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

Schedule B (Form 990) (2022)

Schedule	B (Form 990) (2022)		Page <b>2</b>
	organization		Employer identification number
Boys Inc.	and Girls Clubs of Greater Houston		76-0270942
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al anaca is needed	/0 02/0912
	Contributors (see instructions). Use duplicate copies of Part in addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
<u> </u>	Name, audress, and Zir + 4		
<u>    1</u>		_ \$ <u>900,0</u>	00.       Person       X         Payroll       Payroll         Noncash       (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	Type of contribution
2		_ \$ <u>600,0</u>	00. (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	ns Type of contribution
3		\$ <u>592,9</u>	32.       Person       X         Operation       Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
4		- \$\$500,0	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	Type of contribution
5		- \$ <u>300,0</u>	0.0.       Person       X         Payroll       Payroll         Noncash       (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	ns Type of contribution
6		\$814,5	Person       Payroll         Payroll       Noncash         X       (Complete Part II for noncash contributions.)

Schedule	B (Form 990) (2022)		Page <b>2</b>
	organization		Employer identification number
Boys Inc.	and Girls Clubs of Greater Houston		76-0270942
Part I	Contributors (		10 02/0942
Farti	Contributors (see instructions). Use duplicate copies of Part I if addition	nai space is needed.	
(a)	(b)	(c) Total contributio	(d)
No.	Name, address, and ZIP + 4	Total contributio	ns Type of contribution
7		-	Person X Payroll
		_ \$1,501,4	
			(Complete Part II for noncash contributions.)
		-	,
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributio	ns Type of contribution
8			Person X
			Payroll
		_   \$477,0	14. Noncash (Complete Part II for
			noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
9		-	Person X
		\$ 901,2	Payroll 77. Noncash
			(Complete Part II for
		-	noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributio	
10			Person X
		-	Payroll
		_ \$296,2	
			(Complete Part II for noncash contributions.)
		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributio	ns Type of contribution
		_	Person
		•	Payroll Noncash
		_   \$	(Complete Part II for
		_	noncash contributions.)
(-)	<i>IL</i> )	(-)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		-	Person Payroll
		\$	Noncash
			(Complete Part II for
		_	noncash contributions.)

	B (Form 990) (2022)			Page 3
	organization		Emplo	yer identification number
_	and Girls Clubs of Greater Houston			000000
Inc.			76	-0270942
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed	ł.	
(a)		(c)		
No.	(b)	FMV (or estimate	e)	(d)
from Part I	Description of noncash property given	(See instructions		Date received
Parti	Food commodities			
6				
		\$814,5	13.	12/31/22
(a)		(-)		
No.	(b)	(c) FMV (or estimate		(d)
from	Description of noncash property given	(See instructions		Date received
Part I			/	
		\$		
		*		
(a)		(-)		
No.	(b)	(c) FMV (or estimate		(d)
from	Description of noncash property given	(See instructions		Date received
Part I		(000 mon donom	·)	
		\$		
		φ		
(a)				
No.	(b)	(c) FMV (or estimate		(d)
from	Description of noncash property given	(See instructions		Date received
Part I				
		\$		
(a)		(c)		
No.	(b)	(C) FMV (or estimate	e)	(d)
from Part I	Description of noncash property given	(See instructions		Date received
		\$		
(a)		(c)		
No.	(b)	FMV (or estimate	e)	(d)
from Part I	Description of noncash property given	(See instructions		Date received
		\$		

Schedule I	B (Form 990) (2022)			Page 4					
	organization			Employer identification number					
Boys a	and Girls Clubs of Great	er Houston							
Inc.				76-0270942					
Part III				that total more than \$1,000 for the year					
	from any one contributor. Complete columns (a) t completing Part III, enter the total of exclusively religious, ch	aritable, etc., contributions of <b>\$1,000 or</b>	less for the year. (Enter this info.	once.) \$					
	Use duplicate copies of Part III if additional sp	bace is needed.							
(a) No. from				winting of how with in hold					
Part I	(b) Purpose of gift	(c) Use of gift	(a) Des	scription of how gift is held					
		(e) Transfer of gif	ť						
	Transferee's name, address, and	Relationship of transferor to transferee							
		[							
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
Farti									
	(e) Transfer of gift								
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	ansferor to transferee					
(a) No.									
from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
Part I									
		(e) Transfer of gif	it i						
		., -							
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	ansferor to transferee					
	·								
(a) No									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
Part I									
	(e) Transfer of gift								
			•						
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	ansferor to transferee					

Departn	CHEDULE D orm 990) artment of the Treasury mal Revenue Service Bart 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.							202 Open to P	
	Revenue Service	_						Inspection	
Name	e of the organization	_	and Girls Clu	os of Greater	Houston	E		r identification n	
Par	t I Organiza	Inc.	taining Donor Advise	d Funds or Other S	imilar Funds o			76-027094	<u> </u>
T ai			es" on Form 990, Part IV, lin				unts.	Complete il the	
	e ga zato			(a) Donor advise	d funds	(b) F	Funds ar	nd other accounts	
1	Total number at en	nd of vear		()		()			
			to (during year)						
			during year)						
			onors and donor advisors in v	writing that the assets he	ld in donor advised	l funds			
	are the organizatio	n's property, s	ubject to the organization's	exclusive legal control?				Yes	No
6	Did the organizatio	n inform all gra	antees, donors, and donor a	dvisors in writing that gra	ant funds can be us	sed only			
	for charitable purp	oses and not f	or the benefit of the donor o	r donor advisor, or for an	y other purpose co	onferring			
	impermissible priva							Yes	No
Par	t II Conserva	ation Easer	ments. Complete if the org	ganization answered "Yes	s" on Form 990, Pa	rt IV, line	e 7.		
1			nents held by the organization	· · · ·	7				
		•	blic use (for example, recrea	tion or education)	Preservation of a				
		f natural habita			Preservation of a	certified	l historic	structure	
_		of open space							
2	•	•	he organization held a qualif	ied conservation contribu	ution in the form of	a conser		asement on the l at the End of the T	
	day of the tax year							at the End of the f	ax teal
			sements						
	•			· · · · · · · · · · · · · · · · · · ·			-		
			nts on a certified historic stru			20	c		
d			nts included in (c) acquired a	•					
~	historic structure li							e. 41e e. 4 e	
		ation easeme	nts modified, transferred, rel	eased, extinguished, or t	erminated by the of	rganizatio	on durin	g the tax	
	year	where property	subject to conservation eas	ement is located					
			tten policy regarding the per		ion handling of				
			e conservation easements it					Yes	No
			d to monitoring, inspecting,						
			<b>3</b> , <b>1 3</b> ,	C /	Ũ			0,	
7	Amount of expense	es incurred in I	monitoring, inspecting, hand	ling of violations, and en	forcing conservatio	n easem	nents dui	ring the year	
8	Does each conserv	ation easeme	nt reported on line 2(d) abov	e satisfy the requirement	s of section 170(h)(	(4)(B)(i)			
	and section 170(h)	(4)(B)(ii)?						Yes	No
9	In Part XIII, describ	e how the org	anization reports conservation	on easements in its reven	ue and expense st	atement	and		
	balance sheet, and	l include, if app	plicable, the text of the footn	ote to the organization's	financial statemen	ts that de	escribes	the	
			nservation easements.			0		• • -	
Par			taining Collections of		asures, or Othe	er Simi	llar As	sets.	
			on answered "Yes" on Form						
	•		rmitted under FASB ASC 95	•					
			er similar assets held for pub			herance of	of public		
			ext of the footnote to its finar					_	
	-		rmitted under FASB ASC 95						
			similar assets held for public	exhibition, education, or	research in further	rance of p	public se	ervice,	
	-	-	lating to these items:				۴		
			90, Part VIII, line 1				•		
~	(ii) Assets include								
			Id works of art, historical trea			ain, prov	lde		
	-	-	b be reported under FASB A	•			¢		
	Revenue included								
	Assets included in		Notice, see the Instructions	for Form 000				edule D (Form 99	00 0000

	_	d Girls Clu	ubs of Grea	ater Hou	ston					-
	dule D (Form 990) 2022 Inc.					76-	02	70942	2 F	Page 2
Pai	t III Organizations Maintaining C							(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the f	following that ma	ake signi <sup>.</sup>	ficant use of	f its			
	collection items (check all that apply):									
а	Public exhibition	d		hange program						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co						Part )	KIII.		
5	During the year, did the organization solicit o							1	_	_
De	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arran							Yes		No
Fai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pai		ete if the organizatio	n answered "Ye	es" on Fo	rm 990, Par	t IV, li	ne 9, or		
4-			f							
па	Is the organization an agent, trustee, custodi						_	1.		٦
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:					Amount		
	Device in a balance							Amoun		
	Beginning balance					1c				
	Additions during the year					1d				
-	Distributions during the year					1e				
f 20	Ending balance Did the organization include an amount on Fe					1f		Yes		No
	If "Yes," explain the arrangement in Part XIII.				•		. ـ	165	F	
Par		f the organization and	swered "Yes" on Fo	orm 990 Part IV	line 10		<u></u>			
		(a) Current year	(b) Prior year	(c) Two years b		Three years I	back	(e) Four	vears	s back
1a	Beginning of year balance	5,493,480.	4,883,108.			4,021,8		. ,		,273.
	Contributions	10,000.	10,000.			, ,	-	,		/
	Net investment earnings, gains, and losses	-697,152.	783,207.			675,1	13.	-	313	,586.
	Grants or scholarships	158,500.	150,400.			154,0				,000.
	Other expenditures for facilities			/ /		/				/
Ũ	and programs									
f	Administrative expenses	30,859.	32,435.	26,2	259.	24,0	54.		27	,836.
	End of year balance	4,616,969.	5,493,480.	-		4,518,9		4 .		,851.
2	Provide the estimated percentage of the curr	ent vear end balance				, ,		,		
	Board designated or guasi-endowment		%	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	Permanent endowment 94.3200	%	_/*							
	Term endowment 5.6800									
	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse		tion that are held ar	nd administered	for the					
	organization by:	Ũ						ſ	Yes	No
	(i) Unrelated organizations							3a(i)		X
	(ii) Related organizations							3a(ii)	Х	
b	If "Yes" on line 3a(ii), are the related organiza							3b	Х	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, P	art X, line	e 10.				
	Description of property	(a) Cost or of	ther (b) Cost	or other	( <b>c)</b> Accu	umulated		(d) Bool	k valu	le
		basis (investm	,	(other)	depre	ciation				
1a	Land			6,400.						.00
b	Buildings		16,45	1,148.	7,88	4,701.	1	8,560	5,4	47.
	Leasehold improvements					-	<u> </u>			
d	Equipment			4,318.		2,747.				71.
	Other			8,097.	-	1,640.				57.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	K. column (B), line 1	0c.)			10	0,070	),8	75.

Schedule D (Form 990) 2022

Boys and Girls Clubs of Greater Houston	Boys	and	Girls	Clubs	of	Greater	Houston
---	------	-----	-------	-------	----	---------	---------

Schedule D (Form 990) 2022 Inc.		76	5-0270942 Page <b>3</b>
Part VII Investments - Other Securities.	n Fauna 000 Davit IV/ line		
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
(1) Financial derivatives	(b) Dook value		d of year market value
(2) Closely held equity interests			
(2) 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" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	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	15.)		
Part X Other Liabilities.	n Form 000 Dort IV line	11a av 11f Saa Farm 000 Dart V line 25	
Complete if the organization answered "Yes" of <b>1.</b> (a) Description of liability	on Form 990, Part IV, line	The of Th. See Form 990, Part X, line 25	(b) Book value
(1) Federal income taxes			
(3)			
(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 the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	edule D (Form 990) 2022 Inc .				<u>0270942</u> F	Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial Staten	nents Wit	h Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		-		
1	Total revenue, gains, and other support per audited financial statements			1	13,592,6	<u>501.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-43,882.			
b	Donated services and use of facilities	2b	1,009,825.			
С	Recoveries of prior year grants	2c				
d			-716,211.			
е	Add lines <b>2a</b> through <b>2d</b>			2e	249,7 13,342,8	<u>732.</u>
3	Subtract line 2e from line 1			3	13,342,8	<u>369.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	158,500.			
с	Add lines <b>4a</b> and <b>4b</b>			4c	158,5	
-				5	13,501,3	260
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )			· ·		503.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ments Wi	th Expenses per F	· ·		509.
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1	ments Wi	th Expenses per F	· ·	n.	
	rt XII Reconciliation of Expenses per Audited Financial State	<b>ments Wi</b> 2a.	th Expenses per F	· ·		
Pa	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1	<b>ments Wi</b> 2a.	th Expenses per F	Retur	n.	
<b>Pa</b>	rt XII         Reconciliation of Expenses per Audited Financial State           Complete if the organization answered "Yes" on Form 990, Part IV, line 1           Total expenses and losses per audited financial statements           Amounts included on line 1 but not on Form 990, Part IX, line 25:	ments Wi 2a.	th Expenses per F	Retur	n.	
Pa 1 2	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ments Wi 2a. 2a	th Expenses per F	Retur	n.	
Pa 1 2 a	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a.           2a.           2a.           2a.           2a.           2a.           2a.           2a.           2a.           2b.	th Expenses per F	Retur	n.	
Pa 1 2 a b	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a.           2a.           2a.           2a.           2b.           2b.           2c.	th Expenses per F	Retur	n.	752.
Pa 1 2 a b	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a.           2a.           2a.           2b.           2c.           2c.           2d.	th Expenses per F 1,009,825. 1,800.	Retur	n. 14,513,7 1,011,6	525.
Pa 1 2 b c d	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a.           2a.           2b           2c           2d	th Expenses per F	etur 1	n.	525.
Pa 1 2 b c d e	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a.           2a.           2b           2c           2d	th Expenses per F	1 2e	n. 14,513,7 1,011,6	525.
Pa 1 2 a b c d e 3	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a.           2a.           2b           2c           2d	th Expenses per F	1 2e	n. 14,513,7 1,011,6	525.
Pa 1 2 d c 3 4	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a.           2a.           2b           2c           2d	th Expenses per F	1 2e	n. 14,513,7 1,011,6	525.
Pa 1 2 d c d e 3 4 a	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a.           2a.           2b           2b           2c           2d           4a           4b	th Expenses per F	1 2e	n. 14,513,7 1,011,6 13,502,1	7 <u>52.</u> 525. 127. 0.
Pa 1 2 4 6 3 4 5	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 1         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a.           2a.           2b           2c           2d           2c           2d	th Expenses per F	1 2e 3	n. 14,513,7 1,011,6	7 <u>52.</u> 525. 127. 0.

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	endowment	provides	long-term	financial	support	for	Boys	&	Girls	Clubs	
-----	-----------	----------	-----------	-----------	---------	-----	------	---	-------	-------	--

of Greater Houston, Inc.

<u> Part XI, Line 2d - Other Adju</u>stments:

Revenue from consolidated affiliate

Part XI, Line 4b - Other Adjustments:

Contribution from BGC Foundation

#### Part XII, Line 2d - Other Adjustments:

Expenses of consolidated affiliate

158,500.

-716,211.

Schedule D (Form 990) 2022 Part XIII Supplemental Infor	Boys Inc.	and	Girls	Clubs	of	Greater	Houston	76-0270942	Page 5
Part XIII   Supplemental Infor	mation	(continue	ed)						

SCHEDULE G	Suppleme	ntal Information Regarding	Func	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047	7
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the	2022	
Department of the Treasury		Attach to Form 990	or Forr	n 990	-EZ.			Open to Public	
Internal Revenue Service		o www.irs.gov/Form990 for instru				n.		Inspection	
Name of the organization	Boys an Inc.	d Girls Clubs of G	reat	ter	Houston		Employer 76-027	identification numb 7 0 9 4 2	ber
	complete this par	Complete if the organization answe t.	ered "Y	'es" or	n Form 990, Part IV, I	ine 17	7. Form 990	-EZ filers are not	
<ol> <li>Indicate whether th</li> <li>X Mail solicitat</li> <li>X Internet and</li> <li>C Phone solici</li> <li>X In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ol>	e organization rais tions email solicitations tations licitations on have a written c ed in Form 990, P ) highest paid indiv	ed funds through any of the followin e Solicita f X Solicita g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising o ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X		
(i) Name and addres or entity (fund		(ii) Activity	fundi have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount pai or retained b fundraiser ted in col. <b>(i</b> )	y) to (or retained l	by)
Cate Collaborative	- 4505		Yes	No					
Mandell, Houston, S	FX 77006	Grant-writing		x	0.		32,00	0.	0.
Total							32,00	0.	
<b>3</b> List all states in whitor licensing.	ich the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from	registration	
ТХ									

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990 Part IV line 18 or reported more than \$15,000

			(a) Event #1	EZ, lines 1 and 6b. List e (b) Event #2	(c) Other events	
			1	Sporting		(d) Total events
			Dinner	Clays	1	(add col. (a) through
1)			(event type)	(event type)	(total number)	col. <b>(c)</b> )
	1	Gross receipts	1,143,008.	221,645.	115,205.	1,479,858
	2	Less: Contributions	914,478.	188,800.	115,205.	1,218,483
	3	Gross income (line 1 minus line 2)	228,530.	32,845.		261,375
		Orah aviera				
	4	Cash prizes				
	5	Noncash prizes				
DELISE	6	Rent/facility costs	165,179.	1,000.	11,736.	177,915
<b>Direct Expenses</b>	7	Food and beverages		1,454.	1,290.	2,744
<u>ב</u> ן	8	Entertainment				
	9	Other direct expenses	298,225.	47,062.	10,103.	355,390
	10	Direct expense summary. Add lines 4 through		· · · · ·		536,049
	4.4	Net income summary. Subtract line 10 from li				
	11 rt I	<b>II Gaming.</b> Complete if the organization		990, Part IV, line 19, or r		-2/4,0/4
'a						(d) Total gaming (add
'a		<b>II Gaming.</b> Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	(d) Total gaming (add
aniavan	rt I	II Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	(d) Total gaming (add
a evenue	rt I	II Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	(d) Total gaming (add
	1 2 3	II       Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.         Gross revenue	answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	-274,674
Pa evenue	1 2 3	II       Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.         Gross revenue       Gross revenue         Cash prizes       Cash prizes         Noncash prizes       Rent/facility costs	answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	(d) Total gaming (add
aniavau	1 2 3 4 5	II       Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.         Gross revenue	answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	(d) Total gaming (add
aniavan	1 2 3 4 5 6	II       Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.         Gross revenue       Gross revenue         Cash prizes       Gross prizes         Noncash prizes       Gross         Rent/facility costs       Gross         Other direct expenses       Gross	answered "Yes" on Form (a) Bingo (a) Pingo (b) Pingo (b) Pingo (c)	990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	eported more than (c) Other gaming	(d) Total gaming (add
a evenue	1 2 3 4 5 6	II       Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.         Gross revenue       Gross revenue         Cash prizes       Gross nevenue         Noncash prizes       Gross nevenue         Noncash prizes       Gross nevenue         Other direct expenses       Volunteer labor	(a) Bingo (a) Bingo (b) Bingo (c) Bi	990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	eported more than (c) Other gaming Yes% No	(d) Total gaming (add

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

232082 10-27-22

		_	and (	Girls	Club	os of	Great	er l	Housto			
	dule G (Form 990) 2022	Inc.									0270942	<u> </u>
	Does the organization conduct gar										Yes	No No
	s the organization a grantor, bene											
	o administer charitable gaming?										Yes	No
	ndicate the percentage of gaming											
	The organization's facility											%
	An outside facility										13b	%
14 ł	Enter the name and address of the	person wh	io prepai	res the org	ganization	i's gaming	g/special ev	vents b	ooks and r	ecords:		
1	Name											
ļ	Address											
15a (	Does the organization have a conti	ract with a t	third par	ty from wl	hom the a	organizatio	on receives	s gamin	g revenue?		Yes	🗌 No
b l	f "Yes," enter the amount of gamir	ng revenue	received	l by the o	rganizatio	n \$			and th	e amount		
c	of gaming revenue retained by the	third party	\$	-					_			
cl	f "Yes," enter name and address o	of the third p	party:									
1	Name											
	Address											
16 (	Gaming manager information:											
1	Name											
(	Gaming manager compensation	\$										
[	Description of services provided											
	Director/officer	Emplo	oyee	[	Indep	pendent c	ontractor					
17	Mandatory distributions:											
	s the organization required under	state law to	o make c	haritable	distributio	ons from t	he gaming	procee	ds to			
	etain the state gaming license?							•			Yes	No No
	Enter the amount of distributions re									ent in the		
	organization's own exempt activitie	-						5				
Par		nation. P	Provide th	ne explana						id (v); and F	Part III, lines 9,	9b, 10b,
			F	·····								

Schedule G	(Form 990) Supplemental Infor	Boys Inc.	and	Girls	Clubs	of	Greater	Houston	76-0270942	Page 4
i artiv			continue	ea)						

SCHEDULE IGrants and Other Assistance to Organizations,(Form 990)Governments, and Individuals in the United States											
(Form 990)		vernments, an ete if the organizatior					2022				
Department of the Treasury Internal Revenue Service	Comp	-	Attach to Forn				Open to Public Inspection				
Name of the organization Boys and Inc.	Girls Clul	bs of Greate	er Houstor	ı			Employer identification number $76-0270942$				
Part I General Information on Grants a											
<ul> <li>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</li> <li>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</li> </ul>											
2 Describe in Part IV the organization's pro Part II Grants and Other Assistance to recipient that received more than	Domestic Organiz	ations and Domestic	Governments.	Complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any				
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> 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				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table ....

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

Boys	and	Girls	Clubs	of	Greater	Houston
Inc.						

76-0270942

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Scholarships	23	54,450.	0.		
Part IV Supplemental Information Provide the information rev	I Juirod in Port I lin	a 2: Dort III. oolumn	(b): and any other as	l Iditional information	

Part I, Line 2:

Schedule I (Form 990) 2022

For the Youth of the Year (YOY) award, youth members apply and are

evaluated by a committee comprised of staff and community volunteers. Youth

are interviewed and then chosen to be named YOY or runners up. A donor

sponsors the annual award event, which also includes money for

scholarships.

Additional donors may also provide specific restricted funding towards

scholarship programs. A committee comprised of staff and community

Schedule I	(Form 99)		Inc.		Girls	Clubs	of	Greater	Hou	ston	76-0270942 Page 2
i arciv	oupp		mation								
volunt	eers	evaluate	appl	icat	ions,	interv	view	youth,	and	award	scholarships.

SCHEDULE J	Compensation Information	OMB No	o. 1545-00	47						
(Form 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	20	)22	)						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		to Publ							
Department of the Treasury Internal Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.		pection							
Name of the organizat		Employer identifica								
······	Inc.	76-027094								
Part I Questio	ns Regarding Compensation									
			Yes	No						
1a Check the approp	priate box(es) if the organization provided any of the following to or for a person listed on Form 9	990.								
	A, line 1a. Complete Part III to provide any relevant information regarding these items.	,								
	charter travel Housing allowance or residence for persor	naluse								
Travel for co										
	fication and gross-up payments I Health or social club dues or initiation fees									
	y spending account									
	,	.,,								
<b>b</b> If any of the boxe	s on line 1a are checked, did the organization follow a written policy regarding payment or									
•	provision of all of the expenses described above? If "No," complete Part III to explain	1b								
2 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?										
,	, , , , , , , , , , , , , , , , , , , ,									
3 Indicate which, if	any, of the following the organization used to establish the compensation of the organization's									
	irector. Check all that apply. Do not check any boxes for methods used by a related organizatio									
	sation of the CEO/Executive Director, but explain in Part III.									
X Compensati										
Independent compensation consultant IX Compensation survey or study										
Form 990 of other organizations X Approval by the board or compensation committee										
4 During the year, o	lid any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing									
	related organization:									
-	nce payment or change-of-control payment?	4a		X						
	eceive payment from a supplemental nonqualified retirement plan?			X						
	eceive payment from an equity-based compensation arrangement?	4-		X						
	lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
,, ,, ,, ,, ,, ,, ,										
Only section 50 <sup>-</sup>	(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.									
-	I on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n								
contingent on the										
•	,	5a		X						
<b>b</b> Any related organ	ization?	5b		X						
	a or 5b, describe in Part III.									
	I on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatior	n								
contingent on the										
a The organization	,	6a		X						
<b>b</b> Any related organ				X						
, ,	a or 6b, describe in Part III.									
	I on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments									
	lines 5 and 6? If "Yes," describe in Part III		Х							
	is reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the									
•				X						
Regulations secti		9								
	Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Fo	rm 990	) 2022						
				,						

Schedule J (Form 990) 2022

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

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

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

(1) Kevin Hattery       (i)         President & CEO       (ii)         (2) Susy Smith       (i)         (2) Jonathan Sturgis       (i)         (3) Jonathan Sturgis       (i)         (4) Zenae Campbell       (i)         (4) Zenae Campbell       (i)         (ii)       (i)         (iii)       (i)         (ii)       (i)         (iii)       (i)         (iii)       (i)         (ii)       (i)         (ii)       (i)         (ii)       (i)         (ii)       (i)         (ii)       (i)	(i) Base compensation 264,289. 0. 184,072. 0. 155,600. 0. 138,510. 0.	(ii) Bonus & incentive compensation 18,000. 0. 10,000. 0. 12,000. 0.	(iii) Other reportable compensation 0. 0. 0. 0. 0.	compensation <u>17,107.</u> 0. 11,946.	<u>5,995</u> . 0.	<u>305,391.</u> 0.	reported as deferred on prior Form 990
President & CEO       (i)         (2) Susy Smith       (i)         VP Development       (ii)         (3) Jonathan Sturgis       (i)         (4) Zenae Campbell       (i)         (4) Zenae Campbell       (i)         (ii)       (i)         (iii)       (i)         (i)       (i)         (ii)       (i)         (iii)       (i)         (i)       (i)         (ii)       (i)         (ii)       (i)         (ii)       (i)	0. 184,072. 0. 155,600. 0. 138,510.	0. 10,000. 0. 12,000. 0.	0. 0. 0.	0. 11,946.	0.		
President & CEO       (ii)         (2) Susy Smith       (i)         (3) Jonathan Sturgis       (i)         (4) Zenae Campbell       (i)         (5) VP Program Services, Club Operations       (ii)         (ii)       (ii)         (iii)       (i)         (iii)       (i)         (iii)       (i)         (iii)       (i)         (iii)       (i)         (ii)       (ii)         (iii)       (ii)	184,072. 0. 155,600. 0. 138,510.	10,000. 0. 12,000. 0.	0.	11,946.		Ο.	1
(2) Susy Smith       (i)         VP Development       (ii)         (3) Jonathan Sturgis       (i)         VP Finance       (ii)         (4) Zenae Campbell       (i)         VP Program Services, Club Operations       (ii)         (ii)       (ii)         (iii)       (i)         (iii)       (i)         (iii)       (ii)         (ii)       (ii)         (ii)       (ii)         (ii)       (ii)	0. 155,600. 0. 138,510.	0. 12,000. 0.	0.		7 007		0.
VP Development       (ii)         (3) Jonathan Sturgis       (i)         VP Finance       (ii)         (4) Zenae Campbell       (i)         VP Program Services, Club Operations       (ii)         (ii)       (i)         (ii)       (i)         (iii)       (i)         (iii)       (i)         (ii)       (i)         (ii)       (ii)         (ii)       (ii)	155,600. 0. 138,510.	12,000. 0.			7,227.	213,245.	0.
VP Finance         (i)           (4) Zenae Campbell         (i)           VP Program Services, Club Operations         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)	0. 138,510.	0.	0	0.	0.	0.	0.
VP Finance         (ii)           (4) Zenae Campbell         (i)           VP Program Services, Club Operations         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)	138,510.			10,887.	14,477.	192,964.	0.
VP Program Services, Club Operations         (i)           (ii)         (ii)           (iii)         (ii)           (iii)         (ii)           (ii)         (ii)           (ii)         (ii)           (ii)         (ii)			0.	0.	0.	0.	0.
(i) (ii) (ii) (i) (i) (ii) (ii)	∩	10,000.	0.	9,708.	13,651.	171,869.	0.
(ii) (i) (i) (ii) (i)	υ.	0.	0.	0.	0.	0.	0.
(i) (ii) (ii) (i)							
(ii) (i)							
(i)							
(ii)							
(i)							
(ii)							
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(i)							
(ii)							
(i)							
(ii)							
(i) (ii)							

76-0270942

Schedule J (Form 990) 2022

### Part III Supplemental Information

Inc.

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

Part I, Line 7:

Bonuses are awarded based on employee performance and achievement of

established annual goals. Eligible employees have a bonus range (either a

percentage of salary or a flat dollar amount) based on their role in the

organization. The Finance & Executive Committees oversee the final bonus

award approval.

Schedule J (Form 990) 2022

### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Part I

Name of the organization

**Types of Property** 

## **Noncash Contributions**

OMB No. 1545-0047

Comp	2022 Open to Public Inspection					
Boys a	Employer	identification number				
Inc.		7	6-0270942			
roperty						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) of determining ntribution amounts
es						
sts						

		applicable	contributions or items contributed	amounts repor Form 990, Part V		nonca	sh contribu	ution ar	nount	5
1	Art - Works of art				,					
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory	X	312,364	1,166	,508.	FMV				
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (Auction items)	X	85			Sales	proce	eds		
26	Other ( <u>Raffle items</u> )	X	2	9	,550.	FMV				
27	Other ( )									
28	Other ( )									
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions						
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement	29					
									Yes	No
30a	During the year, did the organization receive by						:			
	must hold for at least 3 years from the date of		ntribution, and whi	ch isn't required to	be used	for				
	exempt purposes for the entire holding period?	?						30a		X
b	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance p	•	-	-		ions?		31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell	noncash					
	contributions?							32a		X
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column	(a) is cheo	cked,				
	describe in Part II.									
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990	).		5	Schedule N	/I (Forn	n <b>990</b> )	2022

		Boys	and	Girls	Clubs	of	Greater	Houston		
Schedule M	(Form 990) 2022	Inc.							76-0270942	Page <b>2</b>
Part II	Supplemental is reporting in Part this part for any ac	t I, columr	1 (b), the	number of a	information contribution	requi s, the	red by Part I, line number of items	es 30b, 32b, and 33 s received, or a comb	, and whether the organiza bination of both. Also com	tion olete

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.		2022
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.		Open to Public Inspection
Name of the organization			r identification number 270942
Form 990, Pa:	rt III, Line 4a, Program Service Accomplishmer	nts:	
Healthy Life:	styles programs help members lead healthy, act	zive	
lifestyles w	nile reducing the likelihood of at-risk behavi	lors. C	ore
Programs off	ered at the clubs include Smart Moves, Smart (	Girls,	
Passport to 1	Manhood, and Triple Play Healthy Habits.		
Smart Moves j	participants are exposed to various activities	s desig	ned to
hone decision	n-making and critical-thinking skills, as well	l as le	arning
how to avoid	and/or resist alcohol, tobacco, other drugs,	and pr	emature
sexual activ	ty. Smart Girls is designed to meet the devel	lopment	al
needs of Clui	os girls by exploring their own and societal a	attitud	es and
values as the	ey build skills for eating right, staying phys	sically	fit,
getting good	healthcare, and developing positive relations	ships w	ith
peers and ad	llts. Passport to Manhood promotes and teaches	5	
responsibili	ty in club boys by engaging them in discussion	ns and	by
helping yout	n understand the importance of college, acader	nic	
preparation,	discovering strengths and interests, college	search	and
application g	process, financial aid, and college expectation	ons. Mo	ney
Matters promo	otes financial responsibility and independence	e by bu	ilding
their manager	ment skills and learning how to manage a check	king ac	count,
budget, save	and invest, start a small business, and pay f	for col	lege.
Power Hour p	rovides homework assistance, tutoring, and res	sources	that
encourage men	nbers to become self-directed learners. Skill	Tech i	s a
computer prog	gram that develops club members' proficiency w	vith of	fice
productivity	software through fun, hands-on, engaging less	sons an	d
projects.			

Schedule O (Form 990) 2022	Page 2						
Name of the organization Boys and Girls Clubs of Greater Houston Inc.	Employer identification number $76-0270942$						
encourages physical fitness through intramural leagues, social							
recreation, and healthy eating habits by teaching the power of meal							
choices, calories, vitamins, the food pyramid, and appropriate portion							
sizes.							

Form 990, Part III, Line 4b, Program Service Accomplishments: Literacy programs provide accelerated learning opportunities to assist members with closing learning gaps.

Form 990, Part III, Line 4c, Program Service Accomplishments: Good character and citizenship programs teach members about the importance of leadership, service to the community and being global citizens. Core programs include mentoring, Keystone Program, and Youth of the Year. Keystone Club affords teens ages 14-18 an opportunity to gain valuable leadership and service experience. Members elect officers, hold meetings, and work together to implement activities in three areas: academic success, career exploration and community service. Torch Club is a chartered small group leadership and service club for members who learn to work together to implement activities in four areas: service to club and community, education, health and fitness and social recreation. Youth of the Year is a youth recognition program for club members that promotes and celebrates service to the club, community and family, academic performance, moral character, life goals, poise, and public speaking ability. Local clubs recognize members each month and select a Youth of the Year, who then participates in state competition. State winners participate in regional competitions and regional winners compete on a national level. The national Youth of the Year winner receives a scholarship and is 232212 10-28-22 Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2									
Name of the organization	Boys Inc.	and	Girls	Clubs	of	Greater	Houston	Employer identification number 76-0270942	

recognized by the President of the United States.

Form 990, Part III, Line 4d, Other Program Services:

The Life & Workforce Readiness program is an integrated framework and

approach that provides foundational skills and experiences,

foundational career education, and advanced opportunities including

work-based learning for youth in the Greater Houston region. Boys &

Girls Clubs of Greater Houston believes when every young person has

access to quality out-of-school opportunities that intentionally

support their post-secondary readiness, they are well-positioned for

Great Futures. BGCA's evidence-informed approach to workforce readiness

puts holistic skill development and career exposure at the forefront of

each club member's experience. The goal is to provide all youth, from

age six through their teen years, with the knowledge, skills, and

learning experiences they need to succeed in life and work after

graduation.

Career exploration provides members with exposure to the world of work

and pathways to careers of their choice. In their Club experience, all

members as early as six years old develop essential skills critical to

success in work and life. They also gain access to job-specific hard

skills to prepare them for employment.

Members receive opportunities to learn and demonstrate their skills in

real-world work scenarios.

Expenses \$ 1,909,269. including grants of \$ 0. Revenue \$ 0.

Family Engagement is a family-centered and strengths-based approach to

making decisions, setting goals, and achieving desired outcomes for our

club members and their families. BGCGH believes in creating and

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization Boys and Girls Clubs of Greater Houston	Employer identification number 76-0270942
sustaining strong relationships with families through enga	igement,
empowerment, and access to community partners to positivel	y impact the
well-being of the whole family. BGCGH achieves this throug	nh family
engagement, parent roundtables, and family fun fests. Fami	ly engagement
events are BGCGH events in which parents are invited as th	le audience as
well as participants. The added criteria to BGCGH events w	hich makes
these events unique is an intentional thought of including	community
partners that will add benefit to families through these c	connections.
We use this opportunity to bridge the gap of services that	are
available within a given community, which parents may not	otherwise
have. Parents receive information, ask questions, and sign	up for
various services during our family engagement events. Clu	ıbs are
required to have a minimum of two family engagement events	per year.
Family roundtables are BGCGH club meetings held with paren	ts of club
members and are facilitated by the club director. The goal	of parent
roundtables is to solicit input/feedback from parents rega	rding the
club experience. Typically, 10 -15 parents are invited to	participate
in the roundtables. The roundtable atmosphere is a "safe"	place in
which parents are invited to share positive experiences an	ld as well as
share opportunities for the club to optimize the club expe	rience for
members and parents. Clubs are required to have a minimum	of two
roundtables per year.	
Family fun fests are typically Saturday events at clubs de	signed to
provide FUN for club members and parents. Family fun fests	are similar
to traditional family engagement events as community partn	lers who can
provide benefit to families are invited. The added compone	nt making
family fun fests different from traditional family engagem	ent is a
carnival-like atmosphere focused on engagement of club sta	schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization Boys and Girls Clubs of Greater Houston	Employer identification number
Inc.	76-0270942
members, parents, and community partners. Clubs are clust	ered for
family fun fests (those within a reasonable vicinity) whi	le others have
individual family fun fests (those in rural areas not in s	reasonable
distance).	
Expenses \$ 954,635. including grants of \$ 0. Revenue	\$ 0.

Form 990, Part VI, Section A, line 1a:

The Executive Committee consists of the President/CEO, the Chairman and

Vice Chairman of the Board of Directors, the Chair of each standing

committee and such other Directors as are appointed by the Board of

Directors. There may be no more than 15 members of the Executive Committee

serving at any time and all of its members must be members of the Board of Directors.

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

Form 990 is prepared by a CPA firm from information provided by the VP Finance and is reviewed by the Finance Committee and President/CEO. The tax return is then submitted to the Executive Committee for final review and approval. Prior to being filed with the IRS, it is made available to the Board of Directors electronically.

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

All Directors, Officers and full time employees must complete and sign an annual conflict of interest policy questionnaire where they list any potential conflicts of interest. For Directors, the questionnaires are reviewed by the Board Governance Committee. For employees, questionnaires are reviewed by the Vice President of Human Resources.

Schedule O (Form 990) 202	Page 2	
Name of the organization	Boys and Girls Clubs of Greater Houston Inc.	Employer identification number $76-0270942$
Form 990, Part	VI, Section B, Line 15:	

The Executive Committee determines the President/CEO's compensation using

information and comparisons from other Boys and Girls Clubs for

comparability.

The President/CEO and Vice President of Human Resources determine key

employee compensation using information and comparisons from other Boys and Girls Clubs for comparability.

Form 990, Part VI, Section C, Line 19:

The organization makes its governing documents, conflict of interest

policy, financial statements, Forms 1023 and 990 available to the public

upon request. The annual audited financial statements and Form 990 are also

available for public inspection on the BGCGH website.

SCHEDULE R (Form 990)	<b>Related Organizations and Unrelated Partnerships</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.						
Department of the Treasury Internal Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.	Open to Public Inspection					
Name of the organization	-	oyer identification number $5-0270942$					

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

# Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
Boys & Girls Clubs Gtr Hstn Fdn - 76-0237732					Boys & Girls		
815 Crosby St	Support Boys & Girls Clubs				Clubs Greater		
Houston, TX 77019	Greater Hstn	Texas	501(c)(3)	Line 12a, I	Houston	X	
	-						
	-						

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 Inc.

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.

(a)     (b)     (c)     (d)     (e)     (f)     (g)     (h)     (i)     (i) <th>organizations treated as a pa</th> <th></th> <th>( your:</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	organizations treated as a pa		( your:									
(state or entity (state or entity excluded from tax under end-of-year allocations? 20 of Scheduled and the tax under 20 of Scheduled from tax under 20 of S	(a)	(b)		(d)	(e)	(f)	(g)	(1	h)			
country     sections 512-514)     Yes     No     K-1 (Form 1065)     Yes     No	Name, address, and EIN of related organization	Primary activity	(state or	Direct controlling entity	(related, unrelated, excluded from tax under	Share of total income	end-of-year			Code V-UBI amount in box 20 of Schedule	Genera manag partn	l or <sup>ing</sup> <u>wn</u> ?
					sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	lo
		-										
		1										
		4										

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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	tivity (c) (d) Legal domicile (state or foreign country		(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512(t contr ent	<b>i)</b> b)(13) rolled tity?
		country)						Yes	No
									<u> </u>

### Boys and Girls Clubs of Greater Houston

Schedule R (Form 990) 2022 Inc.

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	s I
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	1a		
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)			
g Sale of assets to related organization(s)			
Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)	<b>1</b> i		
Lease of facilities, equipment, or other assets to related organization(s)		_	+
Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
Sharing of paid employees with related organization(s)		X	•
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			-
Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) Boys & Girls Clubs Greater Houston Fdn	с	158,500.	Cash
<u>(2)</u>			
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
(6)			

## Boys and Girls Clubs of Greater Houston

Schedule R (Form 990) 2022 Inc.

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

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

(a)	(b)	(c)	(d)	6	"	(f)	(g)	0	ו)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501 ( org	all	Share of	Share of		opor-	Code V-UBI	General o	
of entity	i initiary doubley	(state or foreign	(related, unrelated,	501(	c)(3)	total	end-of-year	tior alloca	opor- nate tions?	amount in box 20	managin	ownership
,		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes		income		Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		
		-		165	NO			163		(************	165 144	·
												<b> </b>
												<b></b>
			1	1					1	1		1

Schedule R (Form 990) 2022

Schedule R	(Form 99	0) 2022	2		
<b>D</b> · · · ////	-				-

 Part VII
 Supplemental Information

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

Form 990/990-EZ/990-PF	Form 990-T
Exported on 11/14/2023 11:00:50	
Form 990	