Form	9	9	0
Departm	nent o	f the	Treasury

# **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.

Open to Public

OMB No. 1545-0047

Inter	nal Reve	enue Serv	vice			Informat	ion abo	ut Form 9	990 and	its instruc	tions i	is at www	v.irs.gov	/form	990.			nspection	on
A F	or th	e 202	1 caler	ndar yea	r, or ta	x year b	eginnin	g	1	0/01/2	021	and en	ding			0	9/30/2	022	
_			C Name	e of organiz	zation									DE	mployer i		fication nu		
Bc	heck if ap	oplicable:	KIF	PS BAY	BOYS	AND G	IRLS	CLUB.	INC.										
	Addre			Business			-							1 1	3-162	385	50		
-	-	change	•	, ber and str		.O. box if m	ail is not o	delivered to	street add	Iress)	F	Room/suit	е	-	elephone				
-	-	return	193	30 RANI											(718)8	202.	- 8600		
	Termi			or town, sta				ZIP or foreic	n postal c	ode				<u> </u>	(/10/0	555	0000		
-	Amen				•		,,		,						Gross recei	inte ¢	: ^>	1 2 2	600
_	returr Applio	n l		DNX, NY e and addr				DANTD.							Is this a gr		20	<u>,133</u> , Yes	
	pendi	ng			•	•		DANIE	~	NTERO					subordinate	es?		- 1	
-			·	) RANDA										H(b)	Are all subo			Yes	No
		empt sta		X 501(d		501(0	c) ( )	<ul> <li>(inset)</li> </ul>	ert no.)	4947(a	a)(1) or		527	-			list. (see instru	,	
				KIPSBA													number 🕨		
					oration	Trust	Ass	ociation	Other			L Yea	r of forma	tion: 1	922 <b>M</b>	Stat	te of legal d	omicile:	NY
Ρ	art I	Sur	nmary																
	1	Briefly	/ descrit	be the org	ganizatic	on's missi	on or mo	ost signific	ant activi	ties: _ TO	IME	PROVE	AND_E	NHAI	NCE_TH	IE (	QUALIT	ľ	
e		OF 1	LIFE_	FOR YC	JUNG_I	PEOPLE	BETW	EEN AC	GES 6-	18 WHO	NEE	ED US	MOST.						
& Governance																			
/eri	2	Check	this bo	x 🕨	if the c	organizati	on disco	ntinued if	ts operat	ions or dis	sposed	of more	than 25%	6 of its	net asse	ets.			
ģ	3	Numb	er of vo	ting mem	bers of	the gover	ning bod	v (Part VI	, line 1a)							3			24
٥ð	4									art VI, line 1						4			24
ies										/, line 2a)						5			271
ivit	6															6			60
Activities	-				eers (est			)			• • •			•••					0
																7a			
	a	Net ur	related	business	s taxable	e income fi	rom Forr	n 990-1, I	ine 34 .		• • •					7b		wa wa Ma	
															or Year			rent Ye	
ne	8			and grant							СОРҮ	FOR	ר	10,	224,7			,742,	
Revenue	9			ice revenu						·   DI IDI		SPECTIO	N		212,8				,641.
Sev	10			icome (Pa											603,1	.08.		<u> </u>	,866.
-	11	Other	revenue	e (Part VI	III, colum	nn (A), line	es 5, 6d,	8c, 9c, 10	)c, and 1	1e)					661,4	32.	. 1	,675,	,743.
	12	Total I	revenue	e - add lin	es 8 thro	ough 11 (r	nust equ	ual Part VI	II, colum	n (A), line ´	12)			11,	702,1	49.	. 19	,231,	,717.
	13	Grants	s and si	imilar amo	ounts pai	id (Part IX	, column	(A), lines	1-3)						90,6	500		147,	,847.
	14														1	JONI	2		NONE
s	15									A), lines 5-				6,	731,4	20.	. 7	,295,	,228.
Expenses	16a															JONI		·	NONE
bei	b	Total f	fundrais	sina exper	nses (Pa	rt IX colur	mn (D)	, ine 25) 🕨	1	<b>,</b> 824 <b>,</b> 5	57.		•			-			
ŵ	17													3	758,1	18	5	,158,	852
										ne 25)					580,1			,601,	
															122,0			,629,	
r s		Reven	iue iess	expense	S. Subira			512							of Current		-	<u>, 029</u> , d of Yea	
ance	20	T-4-1			- 10)									•					
Net Assets or Fund Balances	20			Part X, line	e 16)				• • • •		• • •		·		136,3			,924,	
∎d	21	l otal I	labilities	s (Part X,	line 26)						• • •		·		841,7		1	<u>,634</u> ,	
					ances. S	Subtract lin	ie 21 froi	m line 20.					•	25,	294,6	26.	. 29	,289,	541.
	art II		-	e Block															
Un	der per e. corre	nalties c ect. and	of perjury complete	/, I declare e. Declarati	that I ha ion of pre	ive examine parer (othei	ed this re than offi	turn, incluc cer) is base	ding acco ed on all ir	mpanying so formation o	chedule of which	es and stand stand	tements, a has anv k	and to nowled	the best dae.	of my	/ knowledge	and be	lief, it is
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Sig ⊔∽			Signatur	re of officer											Date				
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			Type or [	print name	and title														
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	parer		name	► FOR		LLP	I					-1		Firm'	s EIN 🕨		44-016		
Jse	Only		address				יאד איי	TCAS #12	00 NEW	YORK, NY	10036			Phon			212-86		10
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Form 99	KIPS BAY BOYS AND GIRLS CLUB, INC.	13-1623850 Page <b>2</b>
Part		i aye 🖬
	Check if Schedule O contains a response or note to any line in this Part III	Х
1 Brie	efly describe the organization's mission:	
T	HE MISSION OF KIPS BAY BOYS AND GIRLS CLUB IS TO IMPROVE AND ENHANCE	1
-	HE QUALITY OF LIFE FOR ALL YOUNG PEOPLE, WITH SPECIAL EMPHASIS ON	
T1	HOSE BETWEEN AGES 6-18 WHO NEED US MOST.	
prio	the organization undertake any significant program services during the year which were not lister for Form 990 or 990-EZ? Yes," describe these new services on Schedule O.	
ser	the organization cease conducting, or make significant changes in how it conducts, any vices?	
exp	scribe the organization's program service accomplishments for each of its three largest progra benses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grad total expenses, and revenue, if any, for each program service reported.	-
<b>4a</b> (Co	de:) (Expenses \$s93,928 including grants of \$) (Revenue \$	)
S	OCIAL RECREATION AND CULTURAL ARTS: ALL SERVICE SITES HAVE	
D]	EDICATED SPACE OR MOVABLE FACILITIES FOR GAME ROOMS WHERE	
PI	ROGRAMMING CALLED SOCIAL RECREATION TAKES PLACE. SOCIAL RECREATIO	
A	CTIVITIES INCLUDE POOL, PING PONG, BUMPER POOL, CHECKERS, CHESS,	
_E'	IC. PROGRAMMING IS BOTH INFORMAL, WHERE CLUB MEMBERS PARTNER UP	
	HEMSELVES FOR SPECIFIC ACTIVITIES, AND MORE FORMAL, WHERE STAFF	
01	RGANIZE TOURNAMENTS AND COMPETITIONS. THE ORGANIZATION MAINTAINS	
A	RTS PROGRAMS THAT INCLUDE CRAFTS AND VISUAL ARTS, AND VIBRANT	
	ERFORMING ARTS PROGRAMS, FEATURING DANCE INSTRUCTION IN LATIN,	
	FRICAN, HIP-HOP, BALLET, AND MODERN. DANCE AND DRAMA INSTRUCTION	
C	ULMINATE IN AN ANNUAL RECITAL.	
	de:) (Expenses \$6,644,057. including grants of \$147,847. ) (Revenue \$ E SCHEDULE O	<b>62,920.</b> )

4c (Code:	) (Expenses \$	904,977. including	grants of \$	) (Revenue \$	52,911. )
FITNESS AND	HEALTH DEPAR	IMENT: FITNESS	AND SPORTS PRO	OGRAMMING	
INCLUDE TACH	LE FOOTBALL,	FLAG FOOTBALL,	HOCKEY, ICE S	SKATING,	
ROLLER SKATI	NG, SWIMMING	INSTRUCTION, S	WIM TEAM, LIFE	EGUARD	
TRAINING, RE	BI BASEBALL,	WINTER INSTRUCT	IONAL BASEBALI	L, GIRLS	
SOFTBALL, FI	ELD HOCKEY,	FEE BALL, AND B	ASKETBALL. THE	E PALMARO	
CLUBHOUSE CO	NTAINS THE B	RONX'S ONLY ICE	RINK AND THE		
ORGANIZATION	I'S SWIMMING	POOL. YOUNGSTER	S FROM OTHER S	SITES MAKE	
VISITS TO TH	HE PALMARO CL	JBHOUSE TO USE	THE ICE RINK	AND SWIMMING	
POOL. NUTRIT	TION EDUCATION	N AND OBESIT PR	EVENTION IS BE	EING	
INCORPORATE	) INTO FITNES	S PROGRAMMING I	N AN ACTIVITY	CALLED GET	
FIT-GET LIGH	IT.				
4d Other program se	rvices (Describe on	Schedule O.) SEE S	CHEDULE O		
(Expenses \$	890,525. includin	g grants of \$	) (Revenue	<b>e\$</b> 306,810. )	
4e Total program ser	vice expenses 🕨	9,333,487.			
JSA 1E1020 1.000					Form <b>990</b> (20
2010NY V01	B 08/15/2023	11:47:40 V21-7	.15 1181458		

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
-	complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-	21	
5	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	5		Λ
4				37
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII.	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		v
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		X
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		v
40	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		Х
16		10		37
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			3.7
40	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
	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	

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Form 990 (2021)

Page	4

Part W         Checklist of Required Schedules (continued)         Yes         No           22         Did the organization report more than \$5,000 of grants or other assistance to or for domesic individuals on Part IX, continue Academia P. 17%; complete Schedule A.         22         X           23         Did the organization arewer Yes' to Part VII. Section A. line 3, 4, or 5, about compensation of the organization arewer Yes' to Part VII. Section A. line 3, 4, or 5, about compensation of the thorage Academic Press, complete Schedule J.         24         X	Form 9	90 (2021)		F	-age <b>4</b>
22       Did the organization report more than \$5,000 of grants or shire assistance to or for domestic individuals on PartiX, column (A), line 27 if Yes, "complete Schedule I, Parts / and III.       22       x         23       Did the organization report may fibre of Part VII. Section A. line 3, 4, or 5. about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last any proceeds of tax-exempt bonds beyond a tempory. If Yes, "complete Schedule I, HTNO," got is line 25a       24a         24a       Did the organization maintain an escrow account other than a refunding principal amount of more than to to defause any trace-sempt bonds.       24a         25a       Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Dut the organization regare in an exempt bonds beyond a tempory period exception?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Dut the organization loring the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Dut the organization areases benefit transaction with a disqualified person in a prior year, and that the tamsackin has not been reported on any of theoreganization common that the grand of may of theoreganization aver that the lengaged in a excess benefit transaction with an excess benefit transaction with and sequalified person in a prior year, and that the transaction with an excess benefit transaction with an excess the set that the organization aver that the tempore of any of these persons? If Yes, "complete Schedule L, Part II.       75b         25       Did the organization revold a grant or other assistance to any orti	Part	V Checklist of Required Schedules (continued)			
Part IX, column (A), line 27 if Yes, "complete Schedule I, Parts I and III.       22       X         21 Did the organization averse "Yes" to Part VIII. 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. The Yes, "complete Schedule A. I.       23         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. Inter was issued after December 31, 2002? If 'Yes," answer line 2.4d       24a         2 Did the organization method and yor the year. Inter was issued after December 31, 2002? If 'Yes," answer line 2.4d       24b         2 Did the organization method bady.       24b       24c         2 Did the organization methods at an 'one behalf of issue for bonds beyned a temporary period exception?       24d         2 So ection ST(Cl(A), SS1(L(A), and SS1(C)) organizations.       24d       24d         2 So ection SC1(Cl(A), SS1(L(A), and SS1(C)) organization.       25a       X.         2 Did the organization neares that it angaged in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.       25a         2 Did the organization report an any amount on Part X, line 5 or 22, for reachables from or psylable to any current or former officer, fusetor, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of the septemosity I''''es,' complete Schedule L, Part I'.       26a         2 To Was the organization report ana				Yes	No
23       Did the organization answer "Ves" to Part VII. Section A. Ine 3. 4, or 5, about compensation of the organization scurrent and former officer, directors, trustees, key employees, and highest compensation of the through 24 and complete Schedule J. No. 10, and the section of the sectin the sectin the sectin the section of the section of the section	22				
organization's current and former officers, directors, trustees, key employees, and highest compensated amployees? If "Ves," complete Schedule X. If "No." go to line 25a       2         24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, thus us issued after December 31, 2002? If "Yes," complete Schedule X. If "No." go to line 25a       24b       2         24b Did the organization maintain an escore account other than a refunding second at any time during the year?       24c       24d         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 in a prior year, and that the transaction has not been reported on any of the organization prior 500° 500° 500° 27       25a       ×         25 Did the organization action has not been reported on any or of the organization spiror Forms 500° 500° 500° 50° 70° 70° 50° 500° 50° 50° 50° 70° 50° 50° 50° 50° 50° 50° 50° 50° 50° 5			22		X
employees ?? If "Ves" complete Schedule J.       23       X         244 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than strong ?? A strong ?? The strong ?? 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       24a         c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? .       24d         d Did the organization act as an "on bohall O" issue for bonds outstanding at any time during the year? .       24d         25a Section 501(c)a), 501(c)(a), and 501(c)(2) organizations. Did the organization engage in an excess beeffit transaction with a disqualified person har ptior year, and that the transaction during the year? If "Yes" complete Schedule L, Part I.       25a         25 Did the organization avear that is engaged in an excess beeffit transaction with a disqualified person har not been reported on any of the organization? Forms 900 or 900-CE2?       25b         26 Did the organization provide a grant selection committee member. or to all systemation combines or enany complexes transaction committee member. To a 35% controlled entity (including an employee thereof) or tamily member of any of these persons? If "Yes" complete Schedule L, Part I.       26b         27 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part I).       26a         28 A accorent or formor officer, director, trustee, key employee,	23	-			
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, 2020? If Yes," answer lines 24b through 24d and complete Schedule K If Yol," to the 25a.       24a       24b         2 Did the organization maintain an escrow account other than a refunding secrow at any time during the year?       24a       24a         2 Did the organization maintain an escrow account other than a refunding secrow at any time during the year?       24d       24d         22s Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization argain in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been propried on any or the organization prior 500 or 590-257       27d         24d       25a       X         25 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 35%, controlled entity or family member of any of these parsons? If Yes," complete Schedule L, Part II       27         26 M the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part II)       27         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? If Yes," complete Schedule L, Part II       27         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Yes," complete Schedule L,					
S100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 108: 240       A         b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.       246         c Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       246         d Did the organization act as an "on behaff of" issuer for bonds outstanding at any time during the year?       246         258 Section Stol(c)(3), S01(c)(4), and S01(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior       258         261 Did the organization accurate that it engaged in an excess benefit transaction rom payables to any ourrent or force, rifector, trustes, key employee, creator or founder, substantial contributor, or 35%       256         27 Did the organization averation equivalence to any of these persons? If "Yes," complete Schedule L Part I.       26         28 Was the organization averation of any of these persons? If "Yes," complete Schedule L Part II.       26         28 Was the organization averation a party to a business transaction with one of the following parties (see the Schedule L, Part II).       27         29 Did the organization averation of any these persons? If "Yes," complete Schedule L, Part II.       28         29 A current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection combinite member, or to a 30% controlled entity (including an employee thereof) or a substantial contributor? If			23	Х	<u> </u>
through 244 and complete Schedule K. If "No," got to line 25a.       24a       x         b Did the organization invest any proceeds of bax-exempt bonds beyond a temporary period exception?       24a         c Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24c         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?       24d         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 in the year?       25a         z       b the organization avare that it engaged in an excess benefit transaction with a disqualified person in the year?       25b         25b Did the organization provide a grant or other assistance to any ourrent or forme former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof, a grant selecton committee member, or to a 35% controlled entity (including an employee thereof, a grant selecton committee member, or to a 35% controlled entity (including an employee thereof, a grant selecton committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?       27       x         24b Was the organization provide a grant or other assistance to any ourrent or former officer, trustee, key employee, creator or founder, substantial contributor?       27       x         24b Was the organization receve more than \$25,000 in non-cash contributio	24 a				
b Did the organization mixed any proceeds of tax-exempt bonds beyond a temporary particle exception?					37
c       Did the organization maintain an escrow account other than a refluiding escrow at any time during the year       24c         d       Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         25. 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 in time the year?       25a         b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in time they any of the organization's prior Forms 990 or 900-EZ?       27         d       Did the organization reported on any of the organization's prior Forms 990 or 900-EZ?       28         25. 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 (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including) an employee thereof, a grant selection committee member or any of these grantizes and pay to be basines transaction with one of the following parties (see the Schedule L)       27       X         28       Was the organization receive contributions of art / historical tressures, or qualified controlled entity (including an employee, creator or founder, substantial contributor? If "Yes" complete Schedule L, Part II.       28a       X         29       Did the organization receive more than \$25,0	h				X
to defease any tax-exempt bonds?.       24c         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization areases benefit transaction with a disqualified person during the year? (I * Yes," complete Schedule L, Part I .       24d         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 in a proryear, and that the transaction has not been reported on any of the organization's prior Form 590 or 990-E27       25b         25       Did the organization area that it engaged in an excess benefit transaction with a disqualified person in a proryear, and that the transaction non on Part X. line 5 or 22. for receivables from or payables to any current or form officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If *Yes," complete Schedule L, Part II.       26         27       Did the organization average Schedule L, Part II.       27         28       Was the organization average Schedule L, Part II.       28         29       A current or former officer, director, trustee, key employee, creator or founder, substantial contributors, and axceptons).       28         29       Did the organization average than S25,000 in non-cash contributions? If *Yes," complete Schedule L, Part II.       28         29       Did the organization selle, exchange, dispose of, or transfer more than 25% of list net assets? If any axcomplete Schedule L, Part II.       28			240		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         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-E77       //***s." complete Schedule L, Part I.       25b       ×         26 Did the organization proord 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       ×         27 Was the organization reparts to a business transaction with one of the following parties (see the Schedule L, Part IV.       26       ×         28 Was the organization applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       ×         29 Did the organization applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       ×       29 X	C		240		
25a Section 601(c)(3), 601(c)(4), end 601(c)(29) organizations. Did the organization engage 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 Form 590 or 990-E27       If Yes, "Complete Schedule L, Part I.       25b       X         26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If Yes," complete Schedule L, Part II.       22b       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 35% controlled entity or family member of any of these persons? If Yes," complete Schedule L, Part II.       22       X         28 Was the organization payables binding the shocks controlled entity or bar assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Yes," complete Schedule L, Part II.       22       X         29 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II.       22a       22b         20 th droganization receive more than 525,000 in non-cash contributions? If Yes," complete Schedule M.       22a       23         20 Did the organization receive more than 525,000 in non-cash contributions? If Yes," complete Schedule M.       33       33         21 Did the organization receiv	Ь				
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-E27       10" "Yes," complete Schedule L, Part I.       26b       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% complete Schedule L, Part II.       26b       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, or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       x         28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28a       x         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28a       x         30 Did the organization sclewe and cesse oprations? If "Yes," complete Schedule M.       29 X       30       X         31 Did the organization sclewe more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II.       30       X         32 Did the organization sclewe more than \$25,000 in non-cash contributions? If "Yes," complete Schedule			24u		
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-E27       256         16 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       ×         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 IV.       27       ×         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       ×         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28       28         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.       20       ×         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.       30       ×         31       Did the organization individual sond/or organizations.       31	200		25a		x
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27       If "Yes," complete Schedule L, Part I.       25b       ×         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 of naminy of these persons? If "Yes," complete Schedule L, Part II.       26       ×         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) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       ×         28       Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       28       ×         29       Did the organization receive contributions of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28       28       ×         20       Did the organization receive contributions of any individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.       28a       ×       28a       ×         21       Did the organization receive contributions of any individuals and/or organizations means the assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I       30       ×         32       Did the organization	b		200		
Image: The Sected of Letter of Letter Schedule Schedule Schedule Schedule Schedule Schedule Letter Schedule Schedule Schedule Letter Schedule Schedule Schedule Letter Schedule Schedule Letter Schedule Letter Schedule Letter Schedule Letter Schedule Schedule Retter	-				
26       Did the organization report any amount on Part X. line 5 or 22, for receivables from or payoles to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II.       28a       X         24       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a       X         25       Did the organization receive more individual and/or organizations described in line 28a or 28b? If "Yes," complete Schedule N. Part I       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N. Part I       30       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I.       31       X         32       Did the organization nealidvidual describer form or ga			25b		Х
or former officer, director, trustee, key employee, creator or founder, substantia contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       X         21       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, or 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 IV       27       X         28       Was the organization party to a business transaction with one of the following parties (see the Schedule L, Part IV)       28       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of,	26				
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 thered) or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions, for applicable fling thresholds, conditions, and exceptions):       27       ×         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 fling thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV					
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 II.       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):       27       X         28       Mas 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):       28       X         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?? If "yes," complete Schedule L, Part IV.       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N. Part I       30       X         31       Did the organization receive outributions of art, historical treasures, or other similar assets. or qualified conservation contributions? If "Yes," complete Schedule N. Part II.       31       X         32       Did the organization receive outributions of the reganization under Regulations sections 301.7701-2: and 301.7701-3? If "Yes," complete Schedule R. Part I, III.       33       X		controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
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         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):       27       X         a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part II.       31       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II.       33       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 510.17701-231 If "Yes," complete Schedule R, Part II.       34       X         33       Did the organization nearbal to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.	27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
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).       28       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         29       A family member of any individual described in line 28a? If 'Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29c       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N.       29c       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.       31       X         31       X       30       X       33       X         32       X       30       X       33       X         34       Was the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule R, Part II.       32 </td <td></td> <td>employee, creator or founder, substantial contributor or employee thereof, a grant selection committee</td> <td></td> <td></td> <td></td>		employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
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 filling thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a       x         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV       28b       x         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       x         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       x         31       Did the organization receive contributions of art, historical treasures, or other similar assets? If "Yes," complete Schedule N, Part I       31       x         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections \$01.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       34       x         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       34       x         34       x       35a       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R					
Part IV instructions, for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If ''Yes,'' complete Schedule L, Part IV			27		Х
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       28a       x         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       x         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "yes," complete Schedule L, Part IV.       28c       x         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       x         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       x         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"       32       x         32       X       31       X       31       32       x         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       34       x         34       Was the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, IIII       34       x         35a       Did the organization controlled entity within the meaning of section 512(b)(13)?       35a       x	28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
"Yes," complete Schedule L, Part IV       28a       ×         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       ×         280       ×       28b       ×         281       ×       28b       ×         282       ×       28b       ×         283       ×       28b       ×         284       ×       28b       ×         285       Complete Schedule L, Part IV       28c       ×         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       ×         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       ×         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       ×         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       ×         34       Was the organization neade a controlled entity within the meaning of section 512(b)(13)?       35a       ×         35a       Did the organization. Solid the organi					
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       x         c A 35% controlled entity of one or more individuals and/or organization described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.       28c       x         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29 x       28c       x         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I       30       x         31 Did the organization injuidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       x         32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       x         34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a       35a       35a       35a       35b       35a       35a       x         35a Did the organization complete Schedule R, Part I, line, ontrolled entity within the meaning of section 512(b)(13)?       35b       35a	а				
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? /ff       28c       x         29 Did the organization receive more than \$25,000 in non-cash contributions? /f "Yes," complete Schedule M       29 x         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? /f "Yes," complete Schedule M       30 x         31 Did the organization liquidate, terminate, or dissolve and cease operations? /f "Yes," complete Schedule N, Part I       30 x         32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes,"       31 x         33 Did the organization neceive contributions? /f "Yes," complete Schedule N, Part I       31 x         34 Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33 x         35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a x         35a Did the organizations. Did the organization make any transaction make any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a x         36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? /f "Yes," complete Schedule R, Part V, line 2.       36         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 parthership for federal income tax purposes? /f "Yes," comp					
"Yes," complete Schedule L, Part N       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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 purpose? If "Yes," complete Schedule R, Part V, Iine 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 in			28b		X
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       x         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       x         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       x         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       32       x         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       x         35a       Did the organization controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations 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         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 V, line 2       35a         38       X       Yes       Nome       37       X         39 <td>С</td> <td></td> <td>000</td> <td></td> <td>37</td>	С		000		37
30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       x         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       x         32       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       x         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"       32       x         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       x         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       x         35a       Did the organization.       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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? I	20			37	X
conservation contributions? If "Yes," complete Schedule M       30       x         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       x         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.       32       x         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       x         34       Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       x         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       x         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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 V, line 2.       35       37       x         36       bid the organization complete Schedule Q and provide explanations on Schedule O for Part VI, line 31       38       x         37       Note: All Form 990 filers are required to complete Schedule O.       38       x         38       Di		-	29	X	
31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	30	-	20		v
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33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       x         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       x         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       x         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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, line 2       36       x         37       Note: All Form 990 filers are required to complete Schedule O.       38       x         38       X       Yes       No       38       x         39       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.       37       X         39       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       33       X         10       the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Yes       No <td>01</td> <td></td> <td>32</td> <td></td> <td>x</td>	01		32		x
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 Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         14       Max       Max       Mone       1       Yes       No         1a       Mone       Mone       1       Yes       No       1         14       Mone       Mone       1       1       1       1       1       1       1       1       1	33				
34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       x         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       x         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2.       36       x         37       Did the organization complete Schedule R, Part V, line 2.       36       x         38       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       x         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       x         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       1a       33         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1b <t< td=""><td></td><td></td><td>33</td><td></td><td>Х</td></t<>			33		Х
or IV, and Part V, line 1.       34       X         35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b         36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       37       X         38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Yes No         1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       33       1b       NoNE         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1a       33       1c       Yes       Yes         Set 0.00 (2021)	34				
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a X         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Yes         Yes No         1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       33         b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .       1b       NONE       1c         JSA			34		Х
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35 a		35a		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       36       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       1a       33         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       33       1b       NONE         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1a       33       1c	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
<ul> <li>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</li></ul>	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>			36		Х
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	37				
19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V         1a       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       Image: Check if Schedule O contains a response or note to any line in this Part V         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       Image: Check if D NONE         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Ic         JSA       Ferm 990 (2021)			37		X
Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       33         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       NONE         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c	38				
Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       33         b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       NONE         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c			38	Х	
Yes       No         1a       33         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable         c       Did         the       organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?         JSA       Image: Same Sector Secto	Part				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       33         b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       NONE         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c		Uneck II Schedule U contains a response or note to any line in this Part V	•••		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       NONE         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c	4 -	Enter the number reported in hey 2 of Form 1000. Enter 0 if not emplicible		res	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
reportable gaming (gambling) winnings to prize winners?					
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BAY BOYS AND GIRLS CLUB, INC.
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Form 990 (2021)

Page **5** 

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax									
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 271									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,									
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?									
b	If "Yes," enter the name of the foreign country ►									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х						
b	If "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).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods									
	and services provided to the payor?	7a	Х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was									
	required to file Form 8282?	7c		X						
	If "Yes," indicate the number of Forms 8282 filed during the year	_								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>						
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .	7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	0								
•	sponsoring organization have excess business holdings at any time during the year?	8								
	Sponsoring organizations maintaining donor advised funds.	9a								
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30								
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII. line 12									
	Initiation fees and capital contributions included on Part VIII, line 12									
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders									
	Gross income from other sources. (Do not net amounts due or paid to other sources									
D	against amounts due or received from them.)									
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which									
	the organization is licensed to issue qualified health plans									
с	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1								
	excess parachute payment(s) during the year?	15		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any									
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

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Form 9	90 (2021) KIPS BAY BOYS AND GIRLS CLUB, INC. 13-1623	850	F	Page 6
Part	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion 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			
i u	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			
h	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
5	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
- <del>-</del> 5	Did the organization make any significant changes to its governing documents since the profit form 990 was need? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6		6		X
_	Did the organization have members or stockholders?	-		
7a		7a		Х
	one or more members of the governing body?	14		21
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		Х
•	stockholders, or persons other than the governing body?	10		21
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	8a	v	
a	The governing body?	oa 8b	X X	
b	Each committee with authority to act on behalf of the governing body?	00	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	9		v
Sacti	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O on B. Policies (This Section B requests information about policies not required by the Internal Revenue	-	1	X
Jecu	on b. Policies (This Section D requests information about policies not required by the internal Revenue	COUE	.) Yes	No
		100	100	-
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	42-	37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	4.01		
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	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			
	independent 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		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_FL, NY, TX,			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7	(sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o	f inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s 🕨		
	DANIEL QUINTERO 1930 RANDALL AVENUE BRONX, NY 10473			
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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and			
	Independent Contractors													
	Check if Schedule	e O d	contains a r	esponse or n	ote to any line	e in this	Part VII							

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

• 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.

<b>(A)</b> Name and title	<b>(B)</b> Average hours per week	box,	not ch unles	Pos neck is pe	erson	e than c is both or/trust	an	(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) DANIEL QUINTERO	40.00									
EXECUTIVE DIRECTOR	NONE			Х				406,973.	NONE	59,963.
(2) NAZIRA HANDAL	40.00									
DIRECTOR OF SPECIAL EVENTS	NONE				X			193,742.	NONE	37,678.
(3) JOSEPH KORN	40.00							,		,
CONTROLLER	NONE			Х				187,509.	NONE	37,540.
(4) SINCLAIR HOLLINGSWORTH	40.00							·		
DIRECTOR OF OPERATION	NONE			Х				132,980.	NONE	30,154.
(5) JOSE L. RODRIGUEZ	40.00									
DEPUTY DIRECTOR OF OPERATIONS	NONE					X		115,684.	NONE	14,822.
(6) JAMES P. DRUCKMAN	2.00									
PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(7) NORA CREEDON	2.00									
VICE PRESIDENT/TREASURER	NONE	Х		Х				NONE	NONE	NONE
(8) CYNTHIA V.A. SCHAFFNER	2.00									
VICE PRESIDENT/SECRETARY	NONE	Х		Х				NONE	NONE	NONE
(9) ADOLFO CARRION, JR.	2.00									
VICE PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(10) CYNTHIA COUDERT	2.00									
VICE PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(11) SCOTT A. GRESS	2.00									
VICE PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(12) DEBRALEE NELSON	2.00									
VICE PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(13) CHIP BRIAN	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(14) ELISSA F. CULLMAN	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
										Form <b>990</b> (2021)

#### KIPS BAY BOYS AND GIRLS CLUB, INC.

Page	8

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unles	s pe	ition more rson	e than of is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
15) ELIZABETH DEXTER	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NO
16) JONATHAN GRAHAM	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NO
17) SUSAN ZISES GREEN	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NO
18) GREGORY A. HERSCH	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NO
19) EDWARD F. KELLY	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
20) ANNE MOTT	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
21) CHRISTOPHER PEACOCK	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
22) KATHRYN PROUNIS	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
23) H. BARRY ROBINS	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
24) DAVID SCOTT	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NC
25) WILLIAM SINGLETON	2.00									
TRUSTEE	NONE	X						NONE	NONE	NC
1b Sub-total	•				-	-	►	1,036,888.	NONE	180,15
c Total from continuation sheets to Par	t VII, Section A							NONE	NONE	NC
d Total (add lines 1b and 1c)								1,036,888.	NONE	180,15

3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such instructions of the sum of the su
_	individual
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>

#### Section B. Independent Contractors

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

	(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ►		

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3

4

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### KIPS BAY BOYS AND GIRLS CLUB, INC.

Page	8

Part VII Section A. Officers, Directors, Tru		y = 11	ipic				ng	-		
(A) Name and title	<b>(B)</b> Average hours per week (list any hours for	age Position per (do not check more th st any for officer and a director//					an ee)	(D) Reportable compensation from the	(E) Reportable compensation fron related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	
26)_ROBERT_K_SMITS IRUSTEE	<u>2.00</u> NONE	X						NONE	NON	e nc
27) LORETTA UCELLI IRUSTEE	2.00_ NONE	X						NONE	NON	e nc
28) SIDNEY WITTER IRUSTEE	2.00_ NONE	X						NONE	NON	e nc
29) COREY DAMEN JENKINS IRUSTEE	2.00_ NONE	X						NONE	NON	e nc
		-								
		-								
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A									
2 Total number of individuals (including but not reportable compensation from the organization		hose	liste	d al	bove	e) who	o re	eceived more than	\$100,000 of	
B Did the organization list any former offic employee on line 1a? If "Yes," complete Scheduler										Yes N 3
For any individual listed on line 1a, is the sorganization and related organizations grain individual	eater than	\$15	50,0	00?	lf	"Yes	,"	complete Schedu	sation from the le J for such	<b>4</b> X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	isati	on t	fron	ו any	un	related organizati		5
Section B. Independent Contractors										
Complete this table for your five highest com compensation from the organization. Report of year.										
(A) SEE SCHEDULE O Name and business add	lress							<b>(B)</b> Description of se	ervices	<b>(C)</b> Compensation
2 Total number of independent contractors (in more than \$100,000 in compensation from th	ncluding bu	ut no tion	t linr ►	niteo	d to	thos	e I	isted above) who	received	

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#### Form 990 (2021)

### KIPS BAY BOYS AND GIRLS CLUB, INC. Part VIII Statement of Revenue

Г

		Check if Schedule O	contains a respon	nse or note to an	y line in this Part V	/		
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ល្អល	1a	Federated campaigns	1a					
ant	b	Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events		2,459,125.				
	d	Related organizations						
ilai	e	Government grants (contr		5,369,926.				
ns,	f	All other contributions, gift		0,000,0201				
ř.	· ·	and similar amounts not inclu		8,913,416.				
the		Noncash contributions inc		0,910,110.				
E O	g			\$ 165,203.				
and	h			,	16,742,467.			
	h	Total. Add lines 1a-1f	<u></u>	Business Code	10,742,407.			
Ð					202 554	202 554		
Program Service Revenue	2a	CAMP FEES		611620	292,554.	292,554.		
Ser	b	PROGRAM FEES		713940	128,927.	128,927.		
e ve	c	MEMBERSHIP DUES		813410	1,160.	1,160.		
gra Re	d							
Š,	е							
₽.	f	All other program service						
	g	Total. Add lines 2a-2f			422,641.			
	3	Investment income (inc	0	,				
		other similar amounts)		. [	275,566.			275,566.
	4	Income from investment	•	·	NONE			
	5	Royalties			NONE			-
			(i) Real	(ii) Personal				
	6a	Gross rents 6a	a 104,672.					
	b	Less: rental expenses 61	<b>4</b> ,734.					
	c	Rental income or (loss) 6	<b>c</b> 99,938.	NONE				
	d	Net rental income or (loss)	<u></u>	•	99,938.			99,938.
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets						
		other than inventory 7	a 2,968,138.					
qe	b	Less: cost or other basis						
eni		and sales expenses 71	<b>b</b> 2,852,838.					
Revenue	с	Gain or (loss) 70	<b>c</b> 115,300.					
	d	Net gain or (loss)	<u></u>	►	115,300.			115,300.
Other	8a	Gross income from	fundraising					
Ô		events (not including \$	2,459,125.					
		of contributions reporte	ed on line					
		1c). See Part IV, line 18		2,583,271.				
	b	Less: direct expenses		1,044,393.				
	c	Net income or (loss) from		►	1,538,878.			1,538,878.
	9a	Gross income from	_					
		activities. See Part IV, line		NONE				
	ь	Less: direct expenses		NONE				
	c	Net income or (loss) from	· · · · · · · · · · · · · · · · · · ·	►	NONE			
	10a	Gross sales of inve						
		returns and allowances .		NONE				
	b	Less: cost of goods sold .		NONE				
	D C	Net income or (loss) from			NONE			
<i>(</i> )	-	()		Business Code				
Miscellaneous Revenue	11-	MISCELLANEOUS		900099	36,927.			36,927
nuc	11a				,/			
ella	b							
Resc	C d	All other revenue						
Ξ	d				36,927.			
	<u>е</u> 12	Total. Add lines 11a-11d Total revenue. See instruct			19,231,717.	422,641.		2,066,609.
				🚩 🗌	+ J I L J L I L I .	744,071.		2,000,009.

Part IX Statement of Functional Expenses

#### Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX ..... (B) Program service (C) Management and (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 147,847. and domestic governments. See Part IV, line 21 . . . . 147,847 2 Grants and other assistance to domestic NONE individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and NONE foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members NONE 5 Compensation of current officers, directors, trustees, and key employees 1,217,939. 920,106. 182,072. 115,761. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and NONE persons described in section 4958(c)(3)(B) 7 Other salaries and wages 5,046,149. 3,811,094. 755,016. 480,039. 289,648. 92,898. 38,051. 158,699. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits . . . . . . . . . . 163,303 75,109 64,227 23,967. 578,189. 468,406. 62,034. 47,749. 10 11 Fees for services (nonemployees): NONE a Management 39,969 39,969. 76,440 76,440. c Accounting NONE d Lobbying NONE e Professional fundraising services. See Part IV, line 17 57,155. 57,155. f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 671,240. 337,774. 8,299 325,167. (A), amount, list line 11g expenses on Schedule O.) **12** Advertising and promotion . . . . . NONE 824,009. 471,571. 47,880. 304,558. 13 Office expenses 14 Information technology NONE NONE 15 Royalties Occupancy 421,488. 358,086. 9,916. 53,486. 16 336,003. 166,619. 522. 168,862. 17 18 Payments of travel or entertainment expenses NONE for any federal, state, or local public officials 8,065. 50,769. 1,456. 60,290 Conferences, conventions, and meetings 19 21,501. 21,501 20 Interest Payments to affiliates..... NONE 21 910,326 Depreciation, depletion, and amortization 866,989 18,167. 25,170. 22 524,222. 470,788. 38,627. 14,807. Insurance 23 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a FOOD 448,762. 421,576. 3,338. 23,848. PROGRAM SUPPLIES 483,385 410,767. 3,783. 68,835. b c REGISTRATION FEES 53,990 50,351. 12. 3,627. d MISCELLANEOUS 106,967. 540. 122,565. 230,072 e All other expenses 1,824,<u>557</u>. 25 Total functional expenses. Add lines 1 through 24e 12,601,927. 9,333,487. 1,443,883. Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if

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following SOP 98-2 (ASC 958-720) .

KIPS BAY BOYS AND GIRLS CLUB, INC.

art X			
	Check if Schedule O contains a response or note to any line in this Pa	art X	<u> L</u>
		<b>(A)</b> Beginning of year	<b>(B)</b> End of year
1	Cash - non-interest-bearing	321,937. <b>1</b>	20,800
2	Savings and temporary cash investments.	NONE 2	NON
3	Pledges and grants receivable, net	1,974,743. <b>3</b>	2,665,077
4	Accounts receivable, net	141,016. <b>4</b>	525,543
5	Loans and other receivables from any current or former officer, director,		
	trustee, key employee, creator or founder, substantial contributor, or 35%		
	controlled entity or family member of any of these persons	NONE 5	NO
6	Loans and other receivables from other disqualified persons (as defined		
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE 6	NO
7	Notes and loans receivable, net	NONE 7	NO
7 8 9	Inventories for sale or use	NONE 8	NO
9	Prepaid expenses and deferred charges	92,993. 9	91,97
10 a	Land, buildings, and equipment: cost or other		
	basis. Complete Part VI of Schedule D 10a 32,995,621.		
b	Less: accumulated depreciation <b>10b</b> 15,842,351.	17,491,697.10	c 17,153,270
11	Investments - publicly traded securities.	9,079,109. <b>1</b> 1	
12	Investments - other securities. See Part IV, line 11	NONE 12	
13	Investments - program-related. See Part IV, line 11.	NONE 13	B NO
14	Intangible assets	NONE 14	1 NC
15	Other assets. See Part IV, line 11	34,878. 18	<b>5</b> 34,87
16	Total assets. Add lines 1 through 15 (must equal line 33)	29,136,373. 16	
17	Accounts payable and accrued expenses.	1,436,106. 17	
18	Grants payable	NONE 18	
19	Deferred revenue	468,763. 19	353,00
20	Tax-exempt bond liabilities	NONE 20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE 21	
22	Loans and other payables to any current or former officer, director,		
22	trustee, key employee, creator or founder, substantial contributor, or 35%		
	controlled entity or family member of any of these persons	NONE 22	2 NO
23	Secured mortgages and notes payable to unrelated third parties	300,000. 23	
24	Unsecured notes and loans payable to unrelated third parties	1,235,626. 24	
25	Other liabilities (including federal income tax, payables to related third		
	parties, and other liabilities not included on lines 17-24). Complete Part X		
	of Schedule D	401,252. 25	1,382,21
26	Total liabilities. Add lines 17 through 25	3,841,747. 26	
	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.		
27	Net assets without donor restrictions	24,270,836. 27	28,013,22
28	Net assets with donor restrictions.	1,023,790. 28	
27 28 29 30 31 32	Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.		
29	Capital stock or trust principal, or current funds	29	9
30	Paid-in or capital surplus, or land, building, or equipment fund	30	
31	Retained earnings, endowment, accumulated income, or other funds	31	-
1		25,294,626. 32	
32	Total net assets or fund balances	/5 /94 h/h I 4	

Form 990 (2021)

τO

	,	.3-162	385	0		_	40
4						Pa	age <b>12</b>
Part							
	Check if Schedule O contains a response or note to any line in this Part XI					<u></u> 21	<u>.                                    </u>
1	Total revenue (must equal Part VIII, column (A), line 12)		1				717
2	Total expenses (must equal Part IX, column (A), line 25)		2				927
3	Revenue less expenses. Subtract line 2 from line 1		3				790
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) $\ . \ .$		4				626
5	Net unrealized gains (losses) on investments		5	_	2,6	34,	875
6	Donated services and use of facilities		6				
7	Investment expenses		7				
8	Prior period adjustments		8				
9	Other changes in net assets or fund balances (explain on Schedule O)		9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part )						
	<u>32,</u> column (B))		10	2	<u>9,2</u>	89,	541
Part							
	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 "C	ther," exp	lain c	on			
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent account	intant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year v	ere com	oiled (	or			
	reviewed on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate b	asis					
b	Were the organization's financial statements audited by an independent accountant?				2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year w						
	separate basis, consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate b	asis					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibilit		siaht	of			
Ŭ	the audit, review, or compilation of its financial statements and selection of an independent	•	•		2c	X	
	If the organization changed either its oversight process or selection process during the tax						
	Schedule O.	, your, ort					
3 -	As a result of a federal award, was the organization required to undergo an audit or audits	e set fort	h in th				
Ja	Single Audit Act and OMB Circular A-133?				3a		X
				•••			~ ~ ~

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

Form 990 (2021)

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SCHE	DULE	A
(Form	990)	

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

						Open to Public Inspection		
Nam	e of the organiz	zation					Employer identif	
KI	PS BAY BO	YS AND GIRLS	CLUB, INC.				13-1	623850
Pa				organizations must	complet	te this p	art.) See instruction	
The	organization	n is not a private for	undation because if	t is: (For lines 1 throug	gh 12, ch	eck only	one box.)	
1	A churo	ch, convention of ch	urches, or associa	tion of churches desc	ribed in <b>s</b>	ection 1	70(b)(1)(A)(i).	
2	A scho	ol described in <b>sect</b>	ion 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)		
3	A hosp	ital or a cooperative	e hospital service o	rganization described	in <b>sectio</b>	n 170(b)	)(1)(A)(iii).	
4	A medi	cal research organ	ization operated in	conjunction with a hose	spital de	scribed i	n section 170(b)(1)(A	)(iii). Enter the
	<u> </u>	ll's name, city, and s						
5	An org	anization operated	for the benefit of	a college or universi	ty ownee	d or ope	erated by a governme	ental unit described ir
		n 170(b)(1)(A)(iv).(						
6		-		rnmental unit describe				
7			-		pport fr	om a go	vernmental unit or fr	om the general public
		ed in section 170(b		-				
8		-	-	<b>b)(1)(A)(vi).</b> (Complete	-			
9			-			-	d in conjunction with a	
		-	-grant college of ac	griculture (see instruct	tions). Ei	nter the	name, city, and state o	f the college or
4.0				then 224 /2 0/ of ite	aunnart	from	ntributions montherab	in face and grace
10	receipt suppor	s from activities rela t from gross investr	ated to its exempt f ment income and u	functions, subject to c	ertain ex able inco	ceptions	ntributions, membersh s; and (2) no more tha s section 511 tax) from e Part III.)	n 331/3 % of its
11	An orga	anization organized	and operated excl	usively to test for publ	ic safety.	See sec	ction 509(a)(4).	
12				-	-			rry out the purposes of
			-					ction 509(a)(3). Check
	the bo	on lines 12a throu	gh 12d that describ	pes the type of suppor	ting orga	anization	and complete lines 1	2e, 12f, and 12g.
а					-		orted organization(s),	
						ajority of	f the directors or truste	es of the
				te Part IV, Sections A				/ 、
b			- ·				supported organizati	
		-		=	the sam	e persor	ns that control or mar	hage the supported
-			-	, Sections A and C.	stad in a	onnostio	n with and functions	lly into grated with
C				·			n with, and functiona	lly integrated with,
d				ns). You must comple			ection with its suppor	tod organization(c)
u							oution requirement an	
		-		omplete Part IV, Sect	-			a an allentiveness
е			-	-			hat it is a Type I, Type	II Type III
Ũ		-		tionally integrated sup				n, rypo m
f								
g			•	orted organization(s).				
	(i) Name of su	pported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	al							

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 1E1210 1.000

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Schedule A (Form 990) 2021

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,362,745.	8,537,393.	7,385,398.	10,224,768.	16,742,467.	50,252,771.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	7,362,745.	8,537,393.	7,385,398.	10,224,768.	16,742,467.	50,252,771.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						NONE
6	Public support. Subtract line 5 from line 4						50,252,771.
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	7,362,745.	8,537,393.	7,385,398.	10,224,768.	16,742,467.	50,252,771.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	291,664.	269,233.	259,911.	231,420.	380,238.	1,432,466.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)SEE. SURP .PAGE	1,444,928.	1,330,738.	672,429.	602,549.	1,575,805.	5,626,449.
11	Total support. Add lines 7 through 10						57,311,686.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	1,823,137.
13	First 5 years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ge			1	
14	Public support percentage for 2021 (lin				1	14	87.68 <b>%</b>
15	Public support percentage from 2020						87.28 %
16a	331/3% support test - 2021. If the org	ganization did n	ot check the box	on line 13, an	d line 14 is 33 <sup>.</sup>	1/3 % or more, ch	eck this
	box and <b>stop here.</b> The organization qu						
b	331/3% support test - 2020. If the org						
	this box and <b>stop here.</b> The organization	-		-			
17a	10%-facts-and-circumstances test - 2	-					
	10% or more, and if the organization						-
	Part VI how the organization meets			•	•		
	organization						
b	10%-facts-and-circumstances test - 2	-					
	15 is 10% or more, and if the organiz						
	in Part VI how the organization meets						
18	organization If the organization						
10	•						
							••••

Schedule A (Form 990) 2021

#### Schedule A (Form 990) 2021

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	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						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6.						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in 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	r the organizati	on's first, secor	d, third, fourth,	or fifth tax ye	ar as a sectio	on 501(c)(3)
	organization, check this box and <b>stop here</b>						►
Sec	tion C. Computation of Public Sup	-					
15	Public support percentage for 2021 (line 8	.,	•			15	%
16	Public support percentage from 2020 Sche			<u></u>		16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2021 (li	ne 10c, column (	f), divided by line	13, column (f))		17	%
18	Investment income percentage from 2020					· · · · · · · · · · · · · · · · · · ·	%
19 a	331/3% support tests - 2021. If the or	-					
	17 is not more than 331/3%, check this	-	•				
b	331/3% support tests - 2020. If the org						
	line 18 is not more than 331/3%, check		•	•			
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo		
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### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990) 2021

#### Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and
  - 11c below, the governing body of a supported organization? **b** A family member of a person described on line 11a above?
  - c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

#### Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- Did the organization operate for the benefit of any supported organization other than the supported 2 organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1

#### Section D. All Type III Supporting Organizations

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 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 2 organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).							
а	The organization satisfied the Activities Test. Complete line 2 below.							
b	The organization is the parent of each of its supported organizations. Complete line 3 below.							
с	c The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).							
•	Astivities Test Annual lines of and of helew		Yes	Ν				
2	2 Activities Test. Answer lines 2a and 2b below.							

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

ο

#### 3b Schedule A (Form 990) 2021

2a

2b

3a

11a 11b

11c

1

2

Page 5

Yes No

Yes No

13-1623850

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Schedule A (Form 990) 2021			Page
Part V         Type III Non-Functionally Integrated 509(a)(3) Supporting Orga           1         Check here if the organization satisfied the Integral Part Test as a qualifyin	ng trust on	Nov. 20, 1970 (expla	
instructions. All other Type III non-functionally integrated supporting organ	izations r	nust complete Sectio	ns A through E. (B) Current Year
Section A - Adjusted Net Income		(A) Prior Year	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the surrent year is the experimetion's first as a per functions			

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

-	LIPS BAT BOTS AND GI			10	-1623630 Page
Part		Supporting Organizat	ions (continued)		
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex			1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organiz	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	IS	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - <i>explain in <b>Part VI</b>).</i> See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
 h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
-	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
<u>с</u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
5	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in <b>Part VI.</b></i> See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
U	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
'	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
<u>ح</u>	Excess from 2019				
	Excess from 2020				
e	Excess from 2021				Schedule A (Form 990) 202

Schedule A (Form 990) 2021

Page 8

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

SCHEDULE	A,	PART	ΙI	-	OTHER	INCOME

DESCRIPTION	2017	2018	2019	2020	2021	TOTAL
MISCELLANEOUS NET SPECIAL EVENT REVENUE	19,625. 1,425,303.	141,923. 1,188,815.	15,505. 656,924.	12,485. 590,064.	36,927. 1,538,878.	226,465. 5,399,984.
TOTALS	1,444,928.	1,330,738.	672,429.	602,549.	1,575,805.	5,626,449.

#### Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# Schedule of Contributors

OMB No. 1545-0047

# Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Employer identification number

	KIPS BAY BOYS AND GIRLS CLUB, INC.     13-1623850							
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ndation						
	527 political organization							
Form 990-PF								
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**

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.

**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).

#### Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Х N/A Person Payroll \$ 671,647. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 2 N/A Х Person Payroll 2,632,583. \$ Noncash (Complete Part II for noncash contributions.) (b) (a) (C) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 3 N/A Х Person Payroll 526,509. \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Х N/A Person Payroll 6,800,000. \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.)

JSA

Schedule B (Form 990) (2021) Name of organization

KIPS BAY BOYS AND GIRLS CLUB, INC.

Page 2

Employer identification number 13-1623850

Name of or	-	Emplo	Employer identification number		
	KIPS BAY BOYS AND GIRLS CLUB, INC.		13-1623850		
Part II	Noncash Property (see instructions). Use duplicate copies of	Part II if additional space	is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		     \$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		     \$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		     \$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		     \$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		_   \$			

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Schedule B (Form 990) (2021)

Schedule B (	Form 990) (2021)			Page <b>4</b>				
Name of or	ganization			Employer identification number				
	KIPS BAY BOYS AND GIR			13-1623850				
	<b>Exclusively</b> religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	<mark>the year from any</mark> ons completing Par e year. (Enter this in	one contributor. C t III, enter the total c formation once. Se	complete columns (a) through (e) and of <i>exclusively</i> religious, charitable, etc.,				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	Transferee's name, address, a	(e) Transf and ZIP + 4	-	hip of transferor to transferee				
(a) Na								
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	Transferee's name, address, a	(e) Transf and ZIP + 4	-	hip of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relations	hip of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relations	hip of transferor to transferee				
				Schedule B (Form 990) (2021)				

JSA

SCHEDULE D (Form 990) Department of the Treasury		Complete if t	Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.		
	nal Revenue Service	► Go to www.irs.gov	<i>Form990</i> for instructions and the latest in	formation.	Inspection
Name	e of the organization			Employer identifica	ition number
KIE	S BAY BOYS AN	ND GIRLS CLUB, INC.		13-16238	350
Pa			ised Funds or Other Similar Funds	s or Accounts.	
	Complete	e if the organization answered	"Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds and	other accounts
1	Total number at e	nd of year			
2	Aggregate value o	of contributions to (during year)			
3	Aggregate value o	of grants from (during year)			
4	Aggregate value a	it end of year			
5	Did the organizati	ion inform all donors and donor	advisors in writing that the assets he	eld in donor advised	
	funds are the orga	nization's property, subject to the	e organization's exclusive legal control?		Yes No
6	Did the organizati	on inform all grantees, donors, a	and donor advisors in writing that grar	nt funds can be used	
			fit of the donor or donor advisor, or fo		
	conferring imperm	issible private benefit?			Yes No
Pa		tion Easements.			
			"Yes" on Form 990, Part IV, line 7.		
1		=	organization (check all that apply).		
	Preservatio	n of land for public use (for example		ion of a historically im	
	Protection of	of natural habitat	Preservati	ion of a certified histo	ric structure
		n of open space			
2			eld a qualified conservation contribution		
		ast day of the tax year.			End of the Tax Year
а	Total number of c	onservation easements		. 2a	
b	Total acreage res	tricted by conservation easements	3	. 2b	
С	Number of conser	vation easements on a certified	historic structure included in (a)	. 2c	
d	Number of conser	rvation easements included in (c	e) acquired after 7/25/06, and not on a	a	
	historic structure I	isted in the National Register		. 2d	
3	Number of conse	rvation easements modified, tra	nsferred, released, extinguished, or te	erminated by the org	anization during the
	tax year 🕨				
4			rvation easement is located $\blacktriangleright$		
5	Does the organiz	ation have a written policy reg	arding the periodic monitoring, insp	ection, handling of	
	violations, and enf	orcement of the conservation ea	sements it holds?		Yes No
6	Staff and volunteer	hours devoted to monitoring, insp	ecting, handling of violations, and enforc	ing conservation easem	ents during the year
	▶				
7	Amount of expens	es incurred in monitoring, inspec	ting, handling of violations, and enforcin	g conservation easem	ents during the year
	▶\$				
8		-	2(d) above satisfy the requirements of se		
					└── Yes └── No
9		•	conservation easements in its revenue		
			of the footnote to the organization's fina	ancial statements that	describes the
Do		ounting for conservation easeme		han Cincilan Acasta	
Pa			of Art, Historical Treasures, or Ot "Yes" on Form 990, Part IV, line 8.	ther Similar Assets	
	•	v			
1a	If the organization of art, historical t service, provide in	n elected, as permitted under FA treasures, or other similar asse Part XIII the text of the footnote	SB ASC 958, not to report in its reve ts held for public exhibition, education to its financial statements that describe	enue statement and k on, or research in fu es these items.	alance sheet works Irtherance of public
b	art, historical treas		ASB ASC 958, to report in its revenu Id for public exhibition, education, or t ns:		
	•	•		► \$	
2			rt, historical treasures, or other simil		
-	•		ASB ASC 958 relating to these items:		
а				▶ s	
b	Assets included in	Form 990. Part X		► • •	

For Pa	aperwork R	eduction	Act Notice, see th	e Instructions	for Form 990.	
JSA						
1E1268	1.000					
	2010NY	V01B	08/15/2023	11:47:40	V21-7.15	1181458

Schee		S BAY BOYS ANI						623850	Page <b>2</b>
Ра	rt III Organizations Maintaini	ng Collections of	Art, Historio	al Treasure	es, or	Other Similar	Assets (d	continued	1)
3	Using the organization's acquisitio collection items (check all that appl		other records	, check any o	of the	following that	make sigr	nificant us	e of its
а	Public exhibition	,	d	Loan or exch	nange	program			
b	Scholarly research		e	Other	5				
c	Preservation for future gener	ations							
4	Provide a description of the organ		and explain	how they fu	urther	the organization	n's exemp	t purpose	in Part
•	XIII.			now moy re		and organization	re exemp	r parpeee	in r arc
5	During the year, did the organizatio	n solicit or receive o	lonations of a	urt historical t	reasur	es or other sim	ilar		
•	assets to be sold to raise funds rath							Yes	No
Pa	rt IV Escrow and Custodial A								
I U	Complete if the organiza 990, Part X, line 21.		es" on Form	990, Part IV	, line 9	9, or reported	an amour	nt on For	m
1a		ee, custodian or o	ther intermed	diary for con	tributic	ons or other as	sets not		
	included on Form 990, Part X?			-			Γ	Yes	No
b	If "Yes," explain the arrangement in	Part XIII and com	olete the follow	ving table	• • •		••••		
-				ing tablet			Amount		
с	Beginning balance				1c				
b	Additions during the year.								
e	Distributions during the year								
f	Ending balance				1f				
2a	Did the organization include an am					stodial account l	iabilitv?	Yes	No
	If "Yes," explain the arrangement in								
	rt V Endowment Funds.				bon pro			<u></u>	
- u	Complete if the organiza	tion answered "Ye	es" on Form	990. Part IV	. line	10.			
		(a) Current year	(b) Prior ye		vo years		years back	(e) Four ye	ears back
4.	Deninging of upon balance	6,754,459.	5,441,		,619,45	. ,	, 744,597.		58,499.
1a	Beginning of year balance	5,000.		065.	70,6		273,355.		10,427.
b	Contributions	5,000.	21,	005.	/0,00		273,333.	1,04	10,427.
С	Net investment earnings, gains,	2 201 164	1 510	460	220.21	16	E2 002		0 4 2 1
	and losses	-2,301,164.	1,510,	402.	329,31		52,003.		98,421.
d	Grants or scholarships				17,50		10,500.		33,750.
е	Other expenditures for facilities	22.246	0.05						
	and programs	38,946.	225,	000.	560,00	JU. 1,2	140,000.	2,92	29,000.
f	Administrative expenses			450 5				6.5	
g	End of year balance	4,419,349.	6,754,		,441,93		519,455.	6,74	14,597.
2	Provide the estimated percentage			line 1g, colum	n (a)) ł	neld as:			
a	Board designated or quasi-endowm		_%						
b		<u>256</u> %							
С	Term endowment ► 0.3329		1000/						
•	The percentages on lines 2a, 2b, a	•							
3a	Are there endowment funds not in t	ine possession of tr	ne organizatio	on that are ne	id and	administered to	or the	V	es No
	organization by:								
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations							3a(ii)	X
	If "Yes" on line 3a(ii), are the relate	0	•		₹?		• • • • •	3b	
4	Describe in Part XIII the intended u		tion's endown	nent funds.					
Ра	rt VI Land, Buildings, and Equ Complete if the organiza	tion answered "Ye					1		
	Description of property	(a) Cost or (inves	other basis (I tment)	<li>cost or other b (other)</li>	basis	(c) Accumulated depreciation	(0	l) Book valu	e
1a	Land		· · ·	/		,			
b	Buildings			29,056,1	45.	13,185,297		15,870	,848.
c	Leasehold improvements			, , -		, ,		,,,,	
d	Equipment.			3,379,9	37.	2,137,637		1.242	,300.
e	Other			<u> </u>		519,417			,122.
	I. Add lines 1a through 1e. (Column		n 990, Part X.					17,153	
		///////////////////////////////////////		·····(=/, "		,			,_,_,

Schedule D (Form 990) 2021

### Part VII Investments - Other Securities.

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

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

#### Part VIII Investments - Program Related.

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

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

#### Part IX Other Assets.

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

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

#### Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
(2) REFUNDABLE ADVANCES		1,382,218.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
		<b>N</b> 1 200 010

 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)
 1, 382, 218.

 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 .

Schedu	IN A KIPS BAY BOYS AND GIRLS CLUB, INC.	13-	-1623850 Page <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	16,544,421.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments <b>2a</b> -2,634,875.		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)         2d         4,734.		
е	Add lines <b>2a</b> through <b>2d</b>	2e	-2,630,141.
3	Subtract line 2e from line 1	3	19,174,562.
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 57, 155.		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	57 <b>,</b> 155.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	19,231,717.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	urn.	
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		12,549,506.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		12,549,506.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		12,549,506.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements		12,549,506.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements		12,549,506.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements		12,549,506.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         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.)		12,549,506.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         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	1	4,734.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         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         Other losses       2c         Other (Describe in Part XIII.)       2d         Add lines 2a through 2d       4,734.	1 2e	
1 2 d c 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         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:	1 2e	4,734.
1 2 b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7b4a57, 155	1 2e	4,734.
1 2 b c d 8 3 4 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7bOther (Describe in Part XIII.)Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7bOther (Describe in Part XIII.)Other (Describe in Part XIII.)	1 2e	4,734.
1 2 d c 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7bOther (Describe in Part XIII.)	1 2e 3	4,734. 12,544,772.

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.

SEE SUPPLEMENTAL PAGE

SCHEDULE D, PART V, LINE 4

THE ENDOWMENT CONSISTS OF LONG TERM INVESTMENTS TO SUPPORT OPERATIONS,

CAPITAL ACQUISITIONS, AND SCHOLARSHIPS.

SCHEDULE D, PART XI, LINE 2D:

RENTAL EXPENSES: \$4,734

SCHEDULE D, PART XII, LINE 2D:

RENTAL EXPENSES: \$4,734

(Form 990) Complete if the org			e organization answei	ormation Regarding Fundraising or Gaming Activities organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the anization entered more than \$15,000 on Form 990-EZ, line 6a.				
Departm	ent of the Treasurv		Attach	to Form 990	) or Form 990		Open to Public	
	Revenue Service	► G	o to www.irs.gov/Form	990 for inst	ructions and	the latest information		Inspection
Name of	f the organization						Employer identification	on number
1		ND GIRLS CLUB,					13-162385	
Part		g Activities. Comp	•			Yes" on Form 99	90, Part IV, line 1	7.
		EZ filers are not re	· ·					
]		the organization rais	-		-			
a	Mail solicita		e			non-government g		
b		email solicitations	f			government grant	S	
c d	Phone solici		g		cial fundra	ising events		
2a b	Did the organiza or key employee If "Yes," list the	tion have a written or Is listed in Form 990, 10 highest paid indiv least \$5,000 by the c	Part VII) or entity viduals or entities	in connec	ction with p	professional fundra	ising services?	Yes No fundraiser is to be
	<b>(i)</b> Name and addr or entity (fu		<b>(ii)</b> Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization
				Yes	No			
1								
2								
3								
4								
•								
5								
6								
7								
8								
9								
10								
Total		which the organizat			to solicit	contributions or	has been notified	it is exempt from
	registration or lic							

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

		gross receipts greater than \$5,000	0.			
			(a) Event #1	(b) Event #2	(c) Other events	<b>(d)</b> Total events (add col. <b>(a)</b> through
			PRESIDENT'S DIN (event type)	DALLAS SHOWHOUS (event type)	3 (total number)	col. (c)
е					, , , , , , , , , , , , , , , , , , ,	
Revenue	1	Gross receipts	1,298,907.	2,105,930.	1,637,559.	5,042,396.
œ		Less: Contributions	973 <b>,</b> 856.	1,242,266.	243,003.	2,459,125.
	3	Gross income (line 1 minus line 2)	325,051.	863,664.	1,394,556.	2,583,271.
			,		, ,	
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	305,695.	248,970.	87,291.	641,956.
t Exp€	7	Food and beverages		175,481.	65,862.	241,343.
Direc	8	Entertainment		9,250.	7,500.	16,750.
	9	Other direct expenses		70,727.	73,617.	144,344.
	10	Direct expense summary. Add lin Net income summary. Subtract li	es 4 through 9 in colu	mn (d)		1,044,393.
Ра						1,538,878.
		\$15,000 on Form 990-EZ, lin	e 6a.			reported more than
Revenue			<b>(a)</b> Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes%	Yes% No	
	7	Direct expense summary. Add lin	es 2 through 5 in colu	mn (d)		
	8	Net gaming income summary. Su	ıbtract line 7 from line	1, column (d)	<b>.</b>	
9 a t	I	Enter the state(s) in which the organization licensed to con If "No," explain:		in each of these state		Yes No
10a k		Were any of the organization's gaming If "Yes," explain:	g licenses revoked, sus			Yes No

JSA 1E1282 1.000

Sched	lule G (Form 990 or 990-EZ) 2021 KIPS BAY BOYS AND GIRLS CLUB, INC. 13-1623850 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility 13a %
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the
	amount of gaming revenue retained by the third party ► \$
С	
	Name ►
	Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation ► \$
	Description of convision provided N
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	ls the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	
	or spent in the organization's own exempt activities during the tax year 🕨 💲
Par	t IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE I (Form 990)			Assistance f ndividuals in			-	OMB №. 1545-0047 എ <b>റി 1</b>
			wered "Yes" on F				2021
		-	ttach to Form 990		,		Open to Public
Department of the Treasury Internal Revenue Service	► Go	to www.irs.gov	/Form990 for the l	atest information	1.		Inspection
Name of the organization						Employer identificat	ion number
KIPS BAY BOYS AND GIRLS CLUB, I	NC.					13-1623850	
Part I General Information on Grants		e					
<ol> <li>Does the organization maintain records the selection criteria used to award the g</li> <li>Describe in Part IV the organization's properties of the selection o</li></ol>	rants or assistanc ocedures for mor	e?	of grant funds in th	e United States.			Yes No
Part II Grants and Other Assistance t Part IV, line 21, for any recipie		-					es on Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) HUNTER COLLEGE							
695 PARK AVE NEW YORK, NY 10065	13-3598671	501(C)(3)	6,900.				SCHOLARSHIP
(2) MANHATTAN COLLEGE							
4315 MANHATTAN COLLEGE PARKWAY	13-1740468	501(C)(3)	7,150.				SCHOLARSHIP
(3) STONY BROOK UNIVERSITY							
100 NICOLLS ROAD STONY BROOK, NY 11794	16-1514621	501(C)(3)	10,500.				SCHOLARSHIP
(4) CARDINAL SPELLMAN HIGH SCHOOL							
1 CARDINAL SPELLMAN PL BRONX, NY 10466	27-0671022	501(C)(3)	5,600.				SCHOLARSHIP
(5) FORDHAM PREPERATORY SCHOOL							
441 EAST FORDHAM RD BRONX, NY 10458	13-2660346	501(C)(3)	7,000.				SCHOLARSHIP
(6) HOLY CROSS SCHOOL							
1846 RANDALL AVE BRONX, NY 10473	13-2693387	501(C)(3)	7,500.				SCHOLARSHIP
(7) MONSIGNOR SCANLON HIGH SCHOOL							
915 HUTCHINSON RIVER PARKWAY	47-4932411	501(C)(3)	10,000.				SCHOLARSHIP
(8) MT. ST. MICHAEL ACADEMY							
4300 MURDOCK AVE BRONX, NY 10466	13-1740475	501(C)(3)	10,000.				SCHOLARSHIP
(9) SUNY ALBANY							
1400 ALBANY AVE ALBANY, NY 12222	16-1514621	501(C)(3)	8,200.				SCHOLARSHIP
(10)							
(11)							
(12)							
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organizations</li> </ul>	•	•					9

#### KIPS BAY BOYS AND GIRLS CLUB, INC. 13-1623850

#### 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	( <b>c)</b> Amount of cash grant	( <b>d</b> ) Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
4					
5					
3					
7					

SCHEDULE I, PART I, LINE 2

#### GRANTEES ARE VETTED AND ARE CHOSEN BASED ON NEEDS OF RECIPIENTS. GRANTEES

COME IN THE FORM OF SCHOLARSHIPS FOR YOUTH SEEKING HIGHER EDUCATION

TUITION ASSISTANCE.

SCHEDULE J		Compen	sation Information	0	MB No. <sup>-</sup>	1545-0	047	
(Forn	n 990)	For certain Officers, Dire	ctors, Trustees, Key Employees, and Highest		എത	91		
			npensated Employees on answered "Yes" on Form 990, Part IV, line 2	23.				
Department of the Treasury		► Attach to Form 990.				o Puk		
	Revenue Service of the organization	► Go to www.irs.gov/Form9	090 for instructions and the latest information.	Employer identificatio	Insp		n	
	U	AND CIDIO CLUD INC				ſ		
Part		AND GIRLS CLUB, INC.		13-162385	0			
Faru	Question					Yes	No	
1a	Check the app	propriate box(es) if the organization pro	ovided any of the following to or for a pers	on listed on Form				
			provide any relevant information regarding					
		ss or charter travel	Housing allowance or residence for					
	Travel fo	or companions	Payments for business use of perso					
	Tax inde	emnification and gross-up payments	Health or social club dues or initiation	on fees				
	Discretio	onary spending account	Personal services (such as maid, cha	auffeur, chef)				
b	If any of the or reimburse	boxes on line 1a are checked, did th ment or provision of all of the ex	e organization follow a written policy re penses described above? If "No," com	egarding payment plete Part III to				
	explain		· · · · · · · · · · · · · · · · · · · ·		1b			
2	-		to reimbursing or allowing expenses	-				
			D/Executive Director, regarding the items					
					2			
3			on used to establish the compensation of t at apply. Do not check any boxes for metho					
			e CEO/Executive Director, but explain in Pa					
		isation committee	X Written employment contract					
		dent compensation consultant	X Compensation survey or study					
		00 of other organizations	X Approval by the board or compensa	tion committee				
4		•	Part VII, Section A, line 1a, with respect to					
4	organization of	or a related organization:	Fait vii, Section A, line Ta, with respect to					
а	•	5	ayment?		4a		Х	
b	Participate in	or receive payment from a supplement	tal nonqualified retirement plan?		4b		Х	
С	Participate in	or receive payment from an equity-bas	ed compensation arrangement?		4c		Х	
	If "Yes" to an	y of lines 4a-c, list the persons and pr	rovide the applicable amounts for each it	em in Part III.				
	•		rganizations must complete lines 5-9.					
5			on A, line 1a, did the organization pa	y or accrue any				
	-	n contingent on the revenues of:			-			
					5a		X	
a	-	rganization?			5b		X	
6			on A, line 1a, did the organization pa	w or accrue any				
5	-	i contingent on the net earnings of:	on r, me ra, die the organization pa	y of accide ally				
а	-				6a		Х	
					6b		X	
	-	e 6a or 6b, describe in Part III.						
7	For persons	listed on Form 990, Part VII, Sectio	n A, line 1a, did the organization prov	ide any nonfixed				
	payments not	described on lines 5 and 6? If "Yes," de	escribe in Part III		7		X	
8	•		paid or accrued pursuant to a contract tha	-				
		•	Regulations section 53.4958-4(a)(3)? If					
					8		X	
9			low the rebuttable presumption proced		-			
<b>-</b>					9			
FOL 5	aperwork Reduc	ction Act Notice, see the Instructions for Fo	JIII 330.	Sched	ule J (Fo	orm 99	u) 2021	

Schedule J (Form 990) 2021

Page 2

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

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

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

(B) Breakdown of W-2 ar		nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and (D) Nontaxable	(E) Total of columns	(F) Compensation		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
DANIEL QUINTERO	(i)	401,429.	NONE	5,544.	26,000.	33,963.	466,936.	
1 EXECUTIVE DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
JOSEPH KORN	(i)	186,921.	NONE	588.	11,437.	26,103.	225,049.	
2 CONTROLLER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
SINCLAIR HOLLINGSWORTH	(i)	132,571.	NONE	409.	8,306.	21,848.	163,134.	
3 DIRECTOR OF OPERATION	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
NAZIRA HANDAL	(i)	193,171.	NONE	571.	11,736.	25,942.	231,420.	
4 DIRECTOR OF SPECIAL EVENTS	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2021

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

2021 Open to Public Inspection

Name of the organization

#### KIPS BAY BOYS AND GIRLS CLUB, INC.

Employer identification number 13-1623850

Par	t I Types of Property				
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of determining noncash contribution amounts
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			1.05 0.00	
9	Securities - Publicly traded		2	165,203.	MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC,				
40	or trust interests				
12	Qualified conservation				
13					
	contribution - Historic				
14	structures				
14	contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts.				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶()				
26	Other ▶()				
27	Other ►()				
	Other ►()				
29	Number of Forms 8283 received		anization during the tax v	ear for contributions for	
20	which the organization completed I				29
		0111 0200,	r art 1, Bonoo , toknomoug		Yes No
30a	During the year, did the organizat	ion receive	by contribution any prope	rtv reported in Part I. line	s 1 through
	28, that it must hold for at least the				-
	to be used for exempt purposes for	-			-
b	If "Yes," describe the arrangement i		01		
31	Does the organization have a		tance policy that require	es the review of anv	nonstandard
	contributions?			-	
32a	Does the organization hire or use				
	contributions?	-	-		
b	If "Yes," describe in Part II.				
33	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which column (a)	) is checked,
	describe in Part II.			-	

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

KIPS BAY BOYS AND GIRLS CLUB, INC.

**Part II** Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, LINE 32B

WHEN DONATED SECURITIES ARE RECEIVED, OUR INVESTMENT MANAGEMENT

COMPANY WILL LIQUIDATE SAID FUNDS.

SCHEDULE M, PART 1, COLUMN B

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED.

Department of the Treasury

#### Supplemental Information to Form 990 or 990-EZ

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



Internal Revenue Service Inform		Information ab	out Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs	s.gov/form990.	Inspection
	Name of the organization			Employer identit	fication number
	KIPS BAY BOYS AND	GIRLS CLUB.	INC.	13-162	3850

#### FORM 990, PART VI, LINE 1A

WHILE THERE ARE NO DIFFERENCES IN VOTING RIGHTS THERE IS AN EXECUTIVE COMMITTEE THAT HANDLES EXECUTIVE COMPENSATION AND OTHER SIMILAR DECISIONS.

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

ELECTRONIC COPIES OF THE 990 ARE CIRCULATED FOR REVIEW AND APPROVAL TO THE MEMBERS OF THE AUDIT AND FINANCE COMMITTEE. UPON APPROVAL OF THE COMMITTEE, THE 990 IS CIRCULATED TO THE FULL BOARD PRIOR TO FILING.

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

TRUSTEES MUST COMPLETE ANNUAL CONFLICT OF INTEREST DECLARATION STATEMENTS IDENTIFYING ANY POTENTIAL CONFLICT OF INTEREST. ANY IDENTIFIED CONFLICTS ARE EXAMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD TO DETERMINE IF THE CONFLICT CAN BE RESOLVED, OR IF THE INDIVIDUAL INVOLVED NEEDS TO BE EXCLUDED FROM THE AREA OF THE CONFLICT.

#### FORM 990, PART VI, SECTION B, LINE 15A

ANNUALLY, THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED AND AUTHORIZED BY THE BOARD PRESIDENT. IN 2022, THE EXECUTIVE DIRECTOR'S SALARY WAS REVIEWED BY AN INDEPENDENT COMPENSATION CONSULTANT, UTILIZING AN INDEPENDENT COMPARABILITY SURVEY. ADDITIONALLY, THE SALARIES OF THE EXECUTIVE DIRECTOR AND CONTROLLER ARE REVIEWED AND AUTHORIZED ANNUALLY BY THE COMPENSATION COMMITTEE.

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

THE KIPS BAY BOYS AND GIRLS CLUB'S FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE. OTHER GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Scl	hedule O (Form 990 or 990-EZ) 2021	Page 2
Na	me of the organization	Employer identification number
K	IPS BAY BOYS AND GIRLS CLUB, INC.	13-1623850

FORM 990, PART III - PROGRAM SERVICE

# LINE 4B, PROGRAM SERVICE

.ISA

EDUCATIONAL AND CLUB SERVICES: SERVICE SITES EMPHASIZE EDUCATION PROGRAMMING INCLUDING HOMEWORK HELP, ACADEMIC TUTORING, ACADEMIC SKILL TESTING AND PROGRESS ASSESSMENT, JOURNAL AND ESSAY WRITING, PROJECT LEARNING, SAT PREP, AND PRIVATE HIGH SCHOOL ADMISSIONS PREP, COLLEGE AWARENESS AND EXPLORATION, ETC. MOST SITES INCLUDE DEDICATED COMPUTER LABS FOR COMPUTER LITERACY, LANGUAGE ARTS AND MATHEMATICS COMPUTER GAMES, VIRTUAL COLLEGE VISITS AND CAREER EXPLORATION, AND INTERNET RESEARCH ASSIGNMENTS. THE ORGANIZATION MAINTAINS A PROGRAM OF PRIVATE HIGH SCHOOL SCHOLARSHIP ASSISTANCE. CLUB SERVICES INCLUDES THE CIVIC AND LEADERSHIP ACTIVITIES THAT ARE CALLED KEYSTONE CLUB AND TORCH CLUB, AND A VERY LARGE SUMMER YOUTH EMPLOYMENT PROGRAM (SYEP) ENROLLING MORE THAN 700 TEENS EACH SUMMER. JUNIOR STAFF IS BOTH A REAL PART-TIME JOB AND A CAREFULLY SUPERVISED CAREER EXPLORATION EXPERIENCE FOR APPROXIMATELY 15 OLDER CLUB MEMBERS ANNUALLY.

Name of the organization	Employer identification number
KIPS BAY BOYS AND GIRLS CLUB, INC.	13-1623850

### FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

	==========	======		
DESCRIPTION		GRANTS	EXPENSES	REVENUE
OTHER PROGRAMS			890,525.	306,810.
	TOTALS		890,525.	306,810.

Schedule O (Form 990 or 990-EZ) 2021		Page <b>2</b>
Name of the organization	Employer ide	ntification number
KIPS BAY BOYS AND GIRLS CLUB, IN	C. 13-162	3850
FORM 990, PART VII-COMPENSATION OF THE 5 H	IGHEST PAID IND. CONTRACTORS	
	DESCRIPTION OF SERVICES	COMPENSATION
REVOLUTION FOODS		
PO BOX 742759 Los Angeles, ca 90074	FOOD SERVICES	146,319.
LOS ANGELES, CA 90074	FOOD SERVICES	140,319.
GHP MEDIA, INC.		
475 HEFFERNAN DRIVE		
WEST HAVEN, CT 06516	PUBLISHING	153,532.
RED RABBIT		
2214 FREDERICK DOUGLAS BLVD		
NEW YORK, NY 10026	FOOD SERVICES	136,768.

IT CONSULTING

PRINTING

VENTURE TECHNOLOGIES

475 HEFFERNAN DRIVE WEST HAVEN, CT 06516

WOODCLIFF LAKE, NJ 07677

50 TICE BLVD

GHP MEDIA INC

214,151.

205,017.