Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Tressury Internal Revenue Service

> The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

A	For the 2002 calendar year, or tax year beginning		, 2002, ar	nd ending	, 20		
В	Check if	applicable		_	D Employer Identification number		
Ē		29 IB TD 22-1632037 200312 BOYS CLUB & GIRLS CLUB OF LODI INC		1 -	1		
	Name o			Ŕ	E Telephone number		
	initial re	tum 460 PASSAIC AVE		s .	(923) 473-7410		
Ē	Final re	LODI NJ 07644-1595 P-1 P113		_	F Accounting method: Cash X A	ocrual	
	Amendo	ed return			Other (specify)		
	Applicat	on pending • Section 501(c)(3) organizations and 4947(a)(1) nonexempt	pt charitable		applicable to section 527 organization		
		trusts must attach a completed Schedule A (Form 990 or	990-EZ)		roup return for affiliates? Yes		
<u>G</u>	Web si	te: >		1	nter number of affiliates		
<u>J</u>	Organı	zation type (check only one) ► 🗵 501(c) (3) < (insert no) 🗌 4947(a)(1) or 🔲 527		ttach a list. See instructions)	No	
K		here > if the organization's gross receipts are normally not more than			parate return filed by an n covered by a group ruting?	□ No	
		ation need not file a return with the IRS, but if the organization received a Form hail, it should file a return without financial data. Some states require a comple		f Enter 4-dig			
_					if the organization is not rec	aured	
L	Gross	receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶			Sch B (Form 990, 990-EZ, or 990-		
E	art I	Revenue, Expenses, and Changes in Net Assets or	Fund Bala	ances (See pa	ige 17 of the instructions)		
	1	Contributions, gifts, grants, and similar amounts received					
	а	Direct public support	1a	156 796			
		Indirect public support	1b	19 34			
	- 1	Government contributions (grants)	1c	86 200			
		Total (add lines 1a through 1c) (cash \$nonca	sh \$		1d 262	346	
	2	Program service revenue including government fees and contra		art VII. (ine 93)	2		
	3	Membership dues and assessments		a	3 32	262	
	4	Interest on savings and temporary cash investments				319	
	5	Dividends and interest from securities			5		
	6a	Gross rents	6a				
	Ь	Less rental expenses	6b				
	1	Net rental income or (loss) (subtract line 6b from line 6a)			6c		
	 	Other investment income (describe)	7		
	8a	(A) Securities		(B) Other			
	5	than inventory	8a				
		Less cost or other basis and sales expenses	8b				
		Gain or (loss) (attach schedule) 8197	8c	5/00			
	- 5	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d (13 2	92	
	ٔ و	Special events and activities (attach schedule)					
	a	Gross revenue (not including \$ of					
40		contributions reported on line 1a)	9a				
SCANNED	Ь	Less direct expenses other than fundraising expenses	9b				
Ď		Net income or (loss) from special events (subtract line 9b from	om line 9a)		9c		
Z		Gross sales of inventory, less returns and allowances	[10a]				
Z	Ь	Less cost of goods sold	10b				
111	c	Gross profit or (loss) from sales of inventory (attach schedule) (subt	tract line 10t	o from line 10a)	10c		
	11				11 1070 9	5.3	
<u>_</u>	12	Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 105 and	HED		12 /353 5	83	
	13	Program services (from line 44, column (B))		SC	13 683	162	
JUL 0 3 D3		Management and general (from line 44, column (C) UN 2	5 2003	PR-080	14 256	344	
3 03	15	Fundraising (from line 44, column (D))			15 438	755	
ದ ನಿ	16	Barrier and the affiliation of Head and Idah	_ :	-	16		
	17	Total expenses (add lines 16 and 44, column (A)) OGDE	17) () ===================================	- <u></u>	17 1378 :	260	
-	18	Excess or (deficit) for the year (subtract line 17 from line 12)	 _		18 (24 ((77م	
į	18	Net assets or fund balances at beginning of year (from line		ı (A))		795	
•	20	Other changes in net assets or fund balances (attach explain		. "	20		
2	20 21	Net assets or fund balances at end of year (combine lines 18, 1			21 823	318	

Pa		Statement of functional Expenses				ns (B) (C), and (D) are re but optional for others (
		t include amounts repo b, 8b, 9b, 10b, or 16 o			(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22		and allocations (attach	-	22				
23	Specific	assistance to individuals	(attach schedule)	23				
24		paid to or for members (24	200	11 2 1		
25	-	ensation of officers, dire	ectors, etc	25	38 685	4 835	4 836	29 0/4
26		salanes and wages		26	450462	385 308	50 976	14 178
27		n plan contributions		27	65 967	17 195	.19 6416	
28		employee benefits		28	44 586		44 904	3 868
29	Payroll			29 30	74 786	17 971	21 286	5.029
30		sional fundraising fees		31	8 000	1 600	(a Y00	
31 32		nting fees mas ソイル・バノモン		32	72 829	43 6 97	6 400 21 F49	7 283
33	Supplie			33	63 664	48 918	8 380	6 366
34	Telepho			34	9 322	3 728	3 728	1 866
35	•	e and shipping , P/2/	H TIME	35	1 122	3-780-		1122
36	Occupa	,	<i>x</i> /2-4	36	13 994	9 796	2799	1399
37	-	nent rental and mainter	ance	37	67 592	33 796	27 037	6 759
38		g and publications		38				•
39	Travel	y — p = 5 v = v		39	4 498	840 h	450	
40	Confer	ences, conventions, an	d meetings	40	8744	1 771	6,973	
41	Interes		3	41	45 367	18 146	27 221	
42	Deprec	ation, depletion, etc. (a	ittach schedule)	42	44 727	31 308	13 419	
43	Other ex	penses not covered above (it)	emize) a	43a				
ь	TNYN	igance		43b	47 756	28 654	9551	9 551
C	DNG			43c	12 470	(, 235	6235	
d	F.L.N.C	d Rolling Expe	rses .	43d	378 475	20156		352 319
0				43e				
44 —	Total func completin	tional expenses (add lines 22 throig columns (B)-(D), carry these to	ugh 43) Organizations otals to lines 13—15	44	1378 260	683 162	256 344	438 754
Are a If "Yo (iii) t	any joint d es," enter he amour	Check In f you a costs from a combined ed r (i) the aggregate amount allocated to Management of Progra	ucational campaigr t of these joint cos ent and general \$	and futs \$, (ii) th , and (iv) th	ne amount allocated ne amount allocated	to Program services to Fundraising \$	Yes 🗷 No
		organization's primary			,	<u> </u>		Program Service
All o	rganization Ients ser	ons must describe their ved, publications issued and 4947(a)(1) nonexem	exempt purpose a , etc. Discuss ach	chieve	ents that are not n	neasurable (Sectio	n 501(c)(3) and (4)	Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
8	The Fox		 	 הלואנ	10 er 9 en	OVNTY	vidge çe	. 6 7 6
-			((rants	and allocations	3)	683162
b .				 -•	· · · · · · · · · · · · · · · · · · ·	-		
			(0	Grants	and allocations	\$		
c								
	-							
				Grants	and allocations	\$)	
d .								
		•		-			,	
	-	••						
_			 		and allocations	\$)	
_		ogram services (attach			and allocations	\$)	
f 1	otal of I	Program Service Expe	enses (should ear	ual line	e 44. column (B), l	Program services)	>	683162

Form 990 (2002) 22-1632037 Page 3 Part IV Balance Sheets (See page 24 of the instructions) Where required, attached schedules and amounts within the description (B) End of year Note (A) Beginning of year column should be for end-of-year amounts only 75 979 YRC VH 45 45 Cash—non-interest-bearing 100 127 46 103 134 46 Savings and temporary cash investments 20 346 47a 47a Accounts receivable 17 47h 47c 20 346 47b b Less allowance for doubtful accounts 48a 48a Pledges receivable 48b b Less allowance for doubtful accounts 48c 49 Grants receivable Receivables from officers, directors, trustees, and key employees 50 (attach schedule) 51a Other notes and loans receivable (attach 51a schedule) 51b 51c b Less allowance for doubtful accounts 52 52 Inventories for sale or use 52 827 16 108 53 53 Prepaid expenses and deferred charges ☐ Cost ☐ FMV 54 54 Investments—securities (attach schedule) 55a Investments-land, buildings, 55a equipment basis b Less accumulated depreciation (attach 55b 55c schedule) 56 56 Investments—other (attach schedule) 57a 1996 918 57a Land, buildings, and equipment basis b Less accumulated depreciation (attach 869 625 57c 1127 293 1168 094 schedule) 58 Other assets (describe > 1377 Total assets (add lines 45 through 58) (must equal line 74) 780 1320 912 834 36 60 43 218 60 Accounts payable and accrued expenses 61 61 Grants payable 23 812 812 62 Deferred revenue Loans from officers, directors, trustees, and key employees (attach 63 schedule) 64a 64a Tax-exempt bond liabilities (attach schedule) 403 954 64b 304 b Mortgages and other notes payable (attach schedule) Other liabilities (describe > _ 182 65 558 529 785 Total liabilities (add lines 60 through 65) 497 66 594 Organizations that follow SFAS 117, check here > and complete lines

column (A) must equal line 19, column (B) must equal line 21)

74 Total liabilities and net assets / fund balances (add lines 66 and 73)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's

847 995

67

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69

70

71

823 3K

67 through 69 and lines 73 and 74

Organizations that do not follow SFAS 117, check here > - and

Paid-in or capital surplus, or land, building, and equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances (add lines 67 through 69 or lines

Capital stock, trust principal, or current funds

Fund Balances

ö

Assets

Net

67

68

70

71 72 Unrestricted

70 through 72.

programs and accomplishments

Temporarily restricted

Permanently restricted

complete lines 70 through 74

22-1632037 Page 4

Pai	t IV-A	Financia	liation of Revenu I Statements with See page 26 of the	Revenue	per	Part	Fi			f Expense nents with			
а		_	and other support			а	Total exp			•			
b	-		statements P;	a 3	355 583	ь	audited fin Amounts ii on line 17,	nctuded o	n line	_	a		
(1)		ılızed gaıns	\$			(1)	Donated and use of	services	\$				
(2)	Donated and use of	services of facilities	\$ '			(2)	Prior year ad reported on	•					
(3)	Recoverie	es of pnor	•			(5)	Form 990	-	<u>\$</u>		- 🥢		
(4)	year gran Other (sp		<u> </u>			(3)	Losses rep line 20, For		<u>\$</u>		- 💹		
		-	\$			(4)	Other (spe	cify)					
	Add amou	unts on line	s (1) through (4) >	b					\$. ///		
С	Line a mi	nus line b	•	c 1 3	ss 583	С	Add amour Line a min		s (1) th	rough (4)► ►	b C	1 37	8 250
d		included o	·			đ	Amounts II			•			
(1)		t expenses	n me a.			(1)	Investment		11 111107 6	1.			
	not includ	led on line	\$				not included		\$				
(2)	Other (sp					(2)	Other (spe			-			
	- · -		\$						\$. ///		
_			es (1) and (2)	d			Add amou Total expe				d		
e	(line c plu	us line d)	ne 12, Form 990		583		(line c plus	line d)		<u> </u>	e		8 26
Pai		st of Office instruction	ers, Directors, Tr s)	ustees, an	id Key E	=mplo	yees (List e	each one e	even if	not compe	nsated	l, see pa	ge 26 of
		(A) Nam	e and address		(B) Title a	nd avera devoted	age hours per to position	(C) Compe (If not pale -0-	d, enter	(D) Contributi employee benefit deterred compo	t ptans &	account	pense and other ances
8 0 W		I. NAN	DINO NJ.	07684	e Kee		e Vahru	26	רגצ	_	643	-	0 -
26			ATTAChed'						-				
		-		-									
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-		<u> </u>											
		<u> </u>		-		<u> </u>	<u>_</u>						
75	organizatio	on and all re	or, trustee, or key en lated organizations, dedule—see page 2	of which more	e than \$10	gate cor 0,000 w	mpensation of the control of the con	of more that by the rela	an \$100 ted org	,000 from y anizations?	/our ▶	☐ Yes	⊠ No

Pai	t VI Other Information (See page 27 of the instructions)		Yes	No			
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X			
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X			
	If "Yes," attach a conformed copy of the changes						
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X			
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X			
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	_	K			
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common						
φυα	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X			
h	If "Yes," enter the name of the organization						
	and check whether it is a exempt or nonexempt						
01.	Enter direct or indirect political expenditures See line 81 instructions [81a]						
	Did the organization file Form 1120-POL for this year?	81b	,,,,,,,	X			
02 8	La Did the organization receive donated services or the use of materials, equipment, or facilities at no charge						
_	or at substantially less than fair rental value?	82a					
D	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part II or as an expense in Part II. (See instructions in Part III.).						
00-	do reterido in restricti de de en experios in restrictivos incluentes in restrictivos in restr	83a		7////// X			
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83b		x			
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	84a		X			
	Did the organization solicit any contributions or gifts that were not tax deductible?						
D	b If "Yes," did the organization include with every solicitation an express statement that such contributions						
	or gifts were not tax deductible?						
85	1 / / / / / / July 1 / / / / / / / / / / / / / / / / / /						
D	Did the organization make only in-house lobbying expenditures of \$2,000 or less?						
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization						
_	received a waiver for proxy tax owed for the prior year Dues assessments and similar amounts from members 85c						
	buds, assessments, and similar arrounds from members						
d	Geotian 102(e) lobbying and pointed experiorities						
e	regregate transcendence attourt of social topology (1)(1) data transcendence						
f	tarable afficient of topolyting and political oriportations (into our root of	85g		X			
9	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	18					
n	If section 6033(e)(1)(A) dues notices were ¹ sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax						
	year?	85h		>			
06	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12						
86	Sortoff) sign Enter a mindular ross and dapital dortal patients included on line 12						
	Gross receipts, included on line 12, for public use of club facilities 501(c)(12) orgs Enter a Gross income from members or shareholders 87a						
87	to (19/12) sign a divisor modification of situations of						
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b						
		<i>,,,,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or] .					
	partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If "Yes," complete Part IX	88	!	×			
900	·						
034	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶, section 4915 ▶, section 4955 ▶						
h	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction	T	1	~~X~			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach						
	a statement explaining each transaction	89b	!	}			
	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under						
U	sections 4912, 4955, and 4958						
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization						
90a	List the states with which a copy of this return is filed > New Jensey						
ь	Number of employees employed in the pay period that includes March 12, 2002 (See instructions.)	3 a					
91	The books are in care of > Taxoayex	()3.	.7 9	10			
	Located at > AS /NO cared ZIP + 4 >			· —			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here	-	i	▶ □			
	and enter the amount of tax-exempt interest received or accrued during the tax year						
			900	(2002)			

Part	VII Analysis of Income-Producing Activ	vities (See pa	age 31 of the i	nstructions)	
Note	: Enter gross amounts unless otherwise	Unrelated bu	Isiness income	Excluded by sect	tion 512 513, or 514	(E)
indic		(A)	(B)	(C)	(D)	Related or exempt function
93	Program service revenue	Business code	Amount	Exclusion code	Amount	income
а					····	
b					<u></u>	
С						
d						
е						i
f	Medicare/Medicaid payments			L		
g	Fees and contracts from government agencies					
94	Membership dues and assessments					32262
95	Interest on savings and temporary cash investments		[14	1 319
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate					
a.	debt-financed property					
	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income			 		
100	Gain or (loss) from sales of assets other than inventory		·	 		(13 297)
	Net income or (loss) from special events			<u> </u>		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
101	•			1		
102	Gross profit or (loss) from sales of inventory			 		
103	Other revenue a	 		 	01	1070 953
b	Speagl EVENTS	ļ		 		1070 123
C				 	 	· · · · · · · · · · · · · · · · · · ·
d				·		
			-			1001 323
104	Subtotal (add columns (B), (D), and (E)		1			1091 237
105 Note:	Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal the ar	mount on line	19 Port I			/ • / · « 5/
	VIII Relationship of Activities to the Accor			1500 D2	ge 32 of the ins	etructions)
Line						
Line ■	. المقاد المقاد المقادات				iportaintly to trie a	accomplishment
			<u> </u>			
	· · · · · · · · · · · · · · · · · · ·					·
			· · · · · · · · · · · · · · · · · · ·			
		-				
Part	IX Information Regarding Taxable Subsidi	aries and Dist	regarded Entitle	s /See page	32 of the instru	ictions)
	(A)	(B)	(C)	o (oco pago	(D)	(E)
	Name, address, and EIN of corporation, partnership, or disregarded entity own.	ercentage of ership interest	Nature of a	ctivities	Total income	End-of-year assets
	parties stip, or disregation state,	%		-		833613
		%			<u></u>	
	· 	%		-		
		96				
Dout	X Information Regarding Transfers Associa		nal Banafit Can	tracte (See no	ago 33 of the une	tnuctions \
Part						
	Did the organization, during the year, receive any funds, direc	•		-		Yes 🔀 No
	Did the organization, during the year, pay premit			personal ber	efit contract?	∐ Yes L≼ No
NO	e: If "Yes" to (b), file Form 8870 and Form 4720					
	Under penalties of perjury, I declare that I have examined					
				1		
				<u> </u>	6-20-	
			_ •.	_	ate	
		€ xe ∪	uTiVe	Dinecto	ን ሊ '	

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Chantable Trust

Supplementary Information—(See separate instructions.)

20**11**2

OMB No 1545-0047

Department of the Treesury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

lame of the organization	Employer Identification number				
Boys & Giels Club of		22 /632			
Compensation of the Five Higher (See page 1 of the instructions L			nd Trustees		
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances	
None					
A A					
Total number of other employees paid over					
Part II Compensation of the Five Highe					
(See page 2 of the instructions List (a) Name and address of each independent contractor	1	(b) Type of service (c) Compensation			
None					
· ···· ····· ··· ··· ·· ··· ··· ··· ··					
· ·· ··· · · · · · · · · · · · · · · ·					
otal number of others receiving over \$50,000 for professional services					

Schedule A (Form 990 or 990-EZ) 2002

Pa	rt III	Statements About Activities (See page 2 of the instructions)	Yes	No
1	atte or i	ing the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities (Must equal amounts on line 38, tVI-A, or line i of Part VI-B)		X
	org	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other anizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities		
2	sub with owi	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any istantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority her, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the issactions)		
8	Sal	e, exchange, or leasing of property?		X
b	Len	iding of money or other extension of credit?		X
С	Fur	nishing of goods, services, or facilities?		1
đ	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
е	Tra	nsfer of any part of its income or assets?		X
				X
3		ss the organization make grants for scholarships, fellowships, student loans, etc? (See Note below) you have a section 403(b) annuity plan for your employees?		X
	: Att	ach a statement to explain how the organization determines that individuals or organizations receiving grants from it in furtherance of its chantable programs "qualify" to receive payments		
Pa	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)		
The	orga	nization is not a private foundation because it is (Please check only ONE applicable box)		
5 6		A church, convention of churches, or association of churches Section 170(b)(1)(A)(i) A school Section 170(b)(1)(A)(ii) (Also complete Part V)		
7	_	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)		
8		A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)		
9		A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's rand state ▶		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170 (Also complete the Support Schedule in Part IV-A)		
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the gen Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	eral p	oublic
11b 12		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A) An organization that normally receives (1) more than 331/5% of its support from contributions, membership fees, receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than its support from gross investment income and unrelated business taxable income (less section 511 tax) from business by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	n 331	∕₃% of
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports or described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509 section 509(a)(3))	ganız (a)(2)	ations (See
		Provide the following information about the supported organizations (See page 5 of the instructions)		
		(a) Name(s) of supported organization(s) (b) Line numb from above		
14		An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)		

	rt IV-A Support Schedule (Complete on b. You may use the worksheet in the instruction					accounting.
Cale	ndar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts, grants, and contributions received (Do	101 548	1122 642	147 (33	165 050	646 333
16	not include unusual grants See line 28) Membership fees received	195 508	432 547 24 521	3124)	195 050	100 937
17	Gross receipts from admissions, merchandise	28 2 7 1	<u>~ 1 Jal</u>	31 & 1/	24 720	100 -19 1
••	sold or services performed, or furnishing of facilities in any activity that is related to the organization's chantable, etc., purpose	1/02 677	912 671	1.83 295	1030 536	3729 179
18	Gross income from interest, dividends,	1700.077		605 - 13	7490 354	3/2 1/3
10	amounts received from payments on securities to to section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired					
	by the organization after June 30, 1975	3 152	5 796	2 442	x 422	13 845
19	Net income from unrelated business activities not included in line 18		<u> </u>			
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income Attach a schedule Do not					
	include gain or (loss) from sale of capital assets				l	
23	Total of lines 15 through 22	1329 586	1375 535	860 606		
24	Line 23 minus line 17	226 609	462 864	177 331	270 172	
25_	Enter 1% of fine 23	13 296	13 755	8 606	12 5/0 26a	
c d	• •	me of and amount ization) whose tota with your return E line 24, column (e)	t contributed by a grifts for 1998 that the total of al 19	each person (otherough 2001 exce	eded the	- %
27	Organizations described on line 12: a F person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and ne sum of such an	total amounts rec nounts for each y	ceived in each yea	ar from, each "disc	m a "disqualified qualified person "
b	(2001) (2000) For any amount included in line 17 that was recesshow the name of, and amount received for each (include in the list organizations described in lines the difference between the amount received and amounts) for each year (2001) (2000)	n year, that was more s 5 through 11, as w d the larger amount	son (other than "d re than the larger rell as individuals)	of (1) the amount Do not file this is or (2), enter the s	on line 25 for the st with your return	year or (2) \$5,000 n After computing
_	Add Amounts from column (e) for lines 15		_		(1000)	•
	17 3729 179 20		21		▶ 27c ▶ 27d	4802843
d	Add Line 27a total	and fine 27b tota	·		<u> </u>	4802 843
0	Public support (line 27c total minus line 27d to	•	10	▶ 271 48		
f	Total support percentage (up 27e /gumer				► 27g	99.71256%
g	Public support percentage (line 27e (numer Investment income percentage (line 18, col-					002829.%
28	Unusual Grants: For an organization describ prepare a list for your records to show, for ea description of the nature of the grant Do not	ach year, the name	e of the contribu	tor, the date and	I amount of the o	grant, and a bnef

Private School Questionnaire (See page 7 of the instructions) Part V (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		Wilh www.
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
	· · · · · · · · · · · · · · · · · · ·			
32	Does the organization maintain the following			<i>//////.</i>
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
_	Children and marriage of a marriage of the control	33a		
a	Students' rights or privileges?	1		
b	Admissions policies?	33b		<u> </u>
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
•	Educational policies?	33e		ļ <u> </u>
f	Use of facilities?	33f		_
9	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
				<i>~~~~</i>
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
h	Has the organization's right to such aid ever been revoked or suspended?	34Ь	,,,,,	
J	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2002 Lobbying Expenditures by Electing Public Charities (See page 9 of the in: (To be completed ONLY, by an eligible organization that filed Form 5768) Check ▶ If the organization belongs to an affiliated group Check ► a **b** If you checked "a" and "limited control" provisions apply (a) Affiliated group (P) Limits on Lobbying Expenditures To be completed for ALL electing total (The term "expenditures" means amounts paid or incurred) organizations 36 38 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 38 Total lobbying expenditures (add lines 36 and 37) 39 39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) Lobbying nontaxable amount. Enter the amount from the following table-41 If the amount on line 40 is-The lobbying nontaxable amount is-Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 41 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 43 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or (a) (b) (c) (d) (e) 2002 2001 2000 1999 Total fiscal year beginning in) ▶ 45 Lobbying nontaxable amount 46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures Part VI-B **Lobbying Activity by Nonelecting Public Charities** (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions) During the year, did the organization attempt to influence national, state or local legislation, including any No **Amount** attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Total lobbying expenditures (Add lines c through h.)

	ule A (I	Form 990 or 990-EZ) Information		ansfers	To and Transacti	ons and Rel	ユ <u>ュール</u> ationships With N			ege <u>6</u>
		Exempt Or	ganizations (S	ee page	12 of the instructi	ons)				
			_		ly engage in any of thorganizations) or in sec	_	-		e ni b	ection
		•			nchantable exempt or				Yes	No
_		Cash	gg		,	,		51a(i)		
	an c	Other assets						a(ii)		
ь	Other	transactions								
	(1) S	Sales or exchange	es of assets with	a noncha	ritable exempt organiz	ation	. 1	_ b(i)		
		_			cempt organization		NA	b(ii)		
		Rental of facilities			. •		ייוןטון	b(iii)		
	٠,,	Reimbursement ai						b(iv)		
	• -	Loans or loan gua	_					b(v)		
		•		rship or f	undraising solicitations	,		b(vi)		
				•	er assets, or paid emp			С]
d	If the goods	answer to any of the state of t	he above is "Yes," services given by t	complete	the following schedule ing organization If the (d) the value of the go	Column (b) shorganization rec	erved less than fair mai	rket value in a	ue of ny	the
(n)		(b)		(c)		ţ	(d)			
Line	no	Amount involved	Name of nor	ncharttable	exempt organization	Description	of transfers, transactions,	and sharing am	angem	ents
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	descr		1(c) of the Code	(other th	I with, or related to, or an section 501(c)(3)) o			ons • Tes] No
	1	(a)		T	(b)		(c)			
		Name of organiza	etion	1	Type of organization		Description of relat	ionship		
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				1.11	<u> </u>				_	
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		<u> </u>		1						
				1		1			_	

Name of organization	Type of organization	Description of relationship

" BOYS & GIRLS CLUB OF LODI, INC 2003 BOARD OF DIRECTORS

OFFICERS

Gerald Inserra, President Kevin Miller, First Vice President John Ivacic, Second Vice President

Marc Schrieks, Secretary
Gary Stramandino, Treasurer

NAME	ADDRESS	PHONE #	TERM <u>END</u>
Bonanno, Bob	441 Stonetown Road, Ringwood, NJ 07456	(973) 728-2234	'05
Chiodo, Charles	157 Farnham Avenue, Lodi, NJ 07644	(973) 546-0668	' 06
Costello, Anthony M	271 Bell Avenue, Lodi, NJ 07644	(973) 777-8333	'04
DeFalco, August	118 Church Street, Lodi, NJ 07644	(973) 779-1282	'03
Giresi, George	340 Main Street, Lodi, NJ 07644	(973) 896-0534	'04
Heck, Rose	2 Mercer Street, Lodi, NJ 07644	(973) 777-6344	'05
Inserra, Jerry	96 South Main Street, Lodi, NJ 07644	(973) 471-0813	'03
Ivacic, John	66 Valleyview Terrace, Wayne, N J 07470	(973) 694-5541	' 05
Manzetti, Jerry	15 Roosevelt Avenue, Lodi, NJ 07644	(973) 472-8147	'04
McCaskey, Bernadette	150 Kennedy Dr, Apt 4, Lodi, NJ 07644	(973) 779-2748	' 06
Mıller, Kevın P	449 Farnham Avenue, Lodi, NJ 07644	(973) 546-3555	'06
Prosapio, Nick	293 Farnham Avenue, Lodi, NJ 07644	(973) 478-0772	'04
Schrieks, Marc	31 Calvin Avenue, Lodi, NJ 07644	(201) 843-6658	'05
Sorrentino, Gerard	239 Howard Ave, Rochelle Park, N J 07662	(201) 587-1433	'03
Stramandino, Gary	261 Church Street, Lodi, NJ 07644	(973) 472-5313	'06
Wurms, Marcel	335 Passaic Ave, PO Box 440, Lodi, NJ 07644	(973) 614-0870	' 03
	LIFE MEMBER		
Nunno, C William	414 Farnham Avenue, Lodi, NJ 07644	(973) 478-1	540
	EXECUTIVE DIRECTOR		
Nardino, Michael	80 Hıllcrest Avenue, Lodi, NJ 07644	(973) 458-02	292

Form 886

(December 2000)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

	filing for an Automatic 3-Month Extension, o		
If you are	filing for an Additional (not automatic) 3-Mor	nth Extension, complete only Part II (on page 2 of this form)
	ot complete Part II unless you have already bee	en granted an automatic 3-month exten	ision on a previously filed
Form 8868.			
Part I Note: Form	Automatic 3-Month Extension of Time- 990-T corporations requesting an automatic 6-rr.	-Only submit original (no copies ne nonth extension-check this box and com	eded) plete Part I only
All other co.	rporations (including Form 990-C filers) must u tnerships, REMICs and trusts must use Form 6	se Form 7004 to request an extension (of time to file income tax
Type or print	Name of Exempt Organization Doys & Ginls Club of	F Lodi INC	Employer identification number
File by the due date for filing your return See	Number, street, and room or suite no if a PO bo		
instructions.	City, town or post office, state, and ZIP code For	r a foreign address, see instructions	
Check type	of return to be filed (file a separate application	on for each return)	
Form 99 Form 99 Form 99 Form 99	00		☐ Form 4720 ☐ Form 5227 ☐ Form 6069 ☐ Form 8870
	anization does not have an office or place of b	visiones in the United Ctates, should the	
• If this is fo	or a Group Return, enter the organization's found group, check this box ► ☐ If it is for pa	ir digit Group Exemption Number (GEN)	If this is
names and	EiNs of all members the extension will cover		
to file	est an automatic 3-month (6-month, for 990 the exempt organization return for the organization calendar year 2002 or	ation named above. The extension is for	the organization's return for:
	tax year beginning	., 20, and ending	, 20
2 If this	tax year is for less than 12 months, check reas	son 🔲 Initial return 🗍 Final return	Change in accounting period
	application is for Form 990-BL, 990-PF, 990-1 undable credits. See instructions	T, 4720, or 6069, enter the tentative ta	ax, less any
	application is for Form 990-PF or 990-T, enter a Include any prior year overpayment allowed as		x payments
c Baland with F instruc	De Due. Subtract line 3b from line 3a. Include you coupon or, if required, by using EFTPS tions	our payment with this form, or, if requil (Electronic Federal Tax Payment Sy	red, deposit rstern) See - 0 -
Under penalties it is true, correc	Signature of perjury, I declare that I have examined this form, including and complete, and that I am authorized to prepare this for	re and Verification ng accompanying schedules and statements, and om	to the best of my knowledge and belief,
Signature	Bril Q Nadar.	THE - EFECUTIVE DAGGE	OA Date > 5-8-03
For Paperwo	rk Reduction Act Notice, see Instruction	Cat. No 27916D	Form 8868 (12-2000)

