

## Michigan Return Summary

For calendar year 2019, or tax year beginning , and ending

**38-3381808**

**BOYS & GIRLS CLUB OF GREATER FLINT**

**Forms being filed:**

Initial solicitation registration  
Renewal solicitation registration **X**  
Request for exemption  
Charitable trust registration  
Charitable trust inventory  
Submitting financial accounting only  
Dissolution questionnaire

**Attorney General file number (if applicable) 28804**

## **Filing Instructions**

### **Boys & Girls Club of Greater Flint**

### **Michigan Charitable Organization Registration / Request For Exemption / Dissolution**

### **Taxable Year Ended December 31, 2019**

**Date Due:** November 30, 2020

**Remittance:** None is required.

**Mail To:** Department of Attorney General  
Charitable Trust Section  
PO Box 30214  
Lansing, MI 48909

**Signature:** The form(s) should be signed and dated as required.

CTS - 02  
 AUTHORITY 1975 PA 169  
 PENALTY: civil, criminal

State of Michigan  
 Department of Attorney General

### RENEWAL SOLICITATION FORM

Full legal name of organization <b>BOYS &amp; GIRLS CLUB OF GREATER FLINT</b>		
All other names under which you intend to solicit		
Attorney General File Number <b>28804</b>	Telephone number <b>810-249-3413</b>	Fax number <b>810-249-3439</b>
Employer Identification No. (EIN) <b>38-3381808</b>	Organization email address <b>TROBINSON@BGCLUBFLINT.ORG</b>	Organization website <b>WWW.BGCLUBFLINT.ORG</b>

All items must be answered. Provide additional sheets if necessary. If you have questions, see the instructions.

1. Organization addresses –

A. Street address of principal office. If you do not have a principal office, provide the name and address of the person having custody of the financial records.

3701 N AVERILL AVENUE FLINT MI 48506

B. Organization mailing address, if different.

C. Provide the address of all other offices in Michigan.

2. Has there been any change in the organization's purposes? .....  Yes  No  
 If yes, summarize organization's current purposes below in 50 words or less. This summary appears on our website.

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3. You **must** designate a resident agent located in Michigan authorized to receive official mail sent to your organization.

Name TAUZZARI ROBINSON

Address (Michigan street address, not PO box) 3701 N. AVERILL AVE  
FLINT MI 48506

4. Methods of solicitation. Check all that apply.

Mail     Personal contact     Special events     Other (specify) \_\_\_\_\_  
 Telephone     Radio / television     Newspaper/magazines     None (explain) \_\_\_\_\_  
 Internet     Email

5. Has there been a change in the organization's tax status with the IRS since your last filing? .....  Yes  No  
 If yes, explain and document.

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6. List all current officers and directors unless they are included on your IRS return. Mark the box to indicate whether the person is an officer, director, or both. Provide an additional sheet if necessary.

Name	Officer	Director	Name	Officer	Director

7. Is there any officer or director who cannot be reached at the organization's mailing address? Yes  No   
 If "yes," provide the names and addresses on an additional sheet.

8. Since your last registration form, has the organization or any of its officers, directors, employees or fundraisers:

A. Been enjoined or otherwise prohibited by a government agency/court from soliciting? .....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
B. Had its solicitation registration or license denied or revoked by any jurisdiction? .....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
C. Been the subject of a proceeding regarding any license, registration, or solicitation? .....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
D. Entered into a voluntary agreement of compliance with a government agency or in a case before a court or administrative agency? .....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

If any "yes" box is checked, provide a complete explanation on a separate sheet.

9. Has the organization engaged a professional fundraiser (PFR) for Michigan fundraising activity for either the financial accounting period reported in item 10 or the current period? See instructions for definition of "professional fundraiser." Yes  No   
 A consultant is not a PFR. If no, go to question 10.

If yes, in the chart below list all PFRs that your organization has engaged for Michigan fundraising activity. Provide additional sheets if necessary. Provide copies of contracts for each PFR listed if not already provided.

*Note – You are required to verify that all PFRs under contract for Michigan campaigns are currently licensed.*

**Professional Fundraisers Under Contract for Michigan Campaigns**

Name	Mailing address	Sum of all payments to / retained by PFR during year reported	Is contract in effect now (as you complete the form)?	If no, enter date contract ended
			y <input type="checkbox"/> n <input type="checkbox"/>	End date: <input type="text"/>
			y <input type="checkbox"/> n <input type="checkbox"/>	End date: <input type="text"/>
			y <input type="checkbox"/> n <input type="checkbox"/>	End date: <input type="text"/>

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10. All organizations must report on their most recently completed financial accounting period.

Check the box to indicate the type of return filed with the IRS and follow the instructions:

**Form 990 or 990-EZ** - Provide a copy of the return. Do not include Schedule B. Go to item 13 below.

**Form 990-PF** - Provide a copy of the Form 990-PF. Enter the amount the organization spent directly on its charitable program in the space below. Complete item 11 and go to 13.

Total program services expense: \$ \_\_\_\_\_

If your organization does not file the above returns with the IRS, check the appropriate box below to explain the reason, and follow the instructions:

**Files Form 990-N.** Complete 11 and 12 below, then go to 14.

**Included in IRS group return.** Provide a copy of the group return. Complete 11 and 12 below.

**Other reason.** Explain: \_\_\_\_\_  
Complete 11 and 12 below.

11. Briefly describe your charitable accomplishments during the period. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Complete this section only if directed to in item 10 because your organization does not complete a Form 990, 990-EZ, or 990-PF. Complete all lines of the following schedules. You must enter the end date of the accounting period being reported. Enter "0" or "none" where appropriate or if you had no financial activity in the period.

Enter the end date of the financial accounting period reported below: \_\_\_\_\_

Revenue		
A	Contributions and fundraising received	
B	All other revenue	
C	Total revenue (add lines A and B)	

Expenses		
D	Charitable program services expense	
E	All remaining expenses (supporting services)	
F	Total expense (Sum of lines D and E)	

G	Revenue less expenses (subtract line F from line C)	
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Balance Sheet		
H	Total assets at end of fiscal period	
I	Liabilities at end of fiscal period	
J	Net assets (subtract line I from line H)	

**BOYS & GIRLS CLUB OF GREATER FLINT 38-3381808****13. Audited or reviewed financial statements requirement**

Complete the following schedule to determine if audited or reviewed financial statements are required. If audited or reviewed financial statements are required, but they have not been prepared, see the instructions.

	Item	Where to Find it:	Amount
A.	Contributions from IRS return	Form 990: Part VIII, line 1h; Form 990-EZ: line 1; Form 990-PF: line 1	<b>1,096,062</b>
B.	Net income from special fundraising events	Form 990: Part VIII, line 8c; Form 990-EZ: line 6d	<b>107,982</b>
C.	Net income from gaming activities	Form 990: Part VIII, line 9c	
D.	Total contributions and fundraising	Add lines A, B, and C	<b>1,204,044</b>
<hr/>			
E.	Governmental grants	Form 990: Part VIII, line 1e; Form 990-EZ: enter governmental grants included above on line A.	<b>178,000</b>
F.		Subtract line E from line D	<b>1,026,044</b>

After completing the schedule:

- If line F is \$550,000 or more, audited financial statements are required. They must be audited by an independent certified public accountant and prepared in accordance with generally accepted accounting principles.
- If line F is greater than \$300,000, but not greater than \$550,000, financial statements either reviewed or audited by a certified public accountant are required.

14. Do you have chapters in Michigan that are to be included in the solicitation registration?

Yes

No

*Tip:* If you have offices in Michigan with no separate reporting or filing requirements, answer "no."

If yes, provide the following:

- a listing of the names and addresses of all Michigan chapters to be included
- a financial report for each chapter (see instructions)
- a copy of your organization's IRS group return (if applicable)

*Note – if you have chapters but have not previously informed us of your intent to include them, see the instructions.*

15. I certify that I am an authorized representative of the organization and that to the best of my knowledge and belief the information provided, including all accompanying documents, is true, correct, and complete. False statements are prohibited by MCL 400.288(1)(u) and MCL 400.293(2)(c) and are punishable by civil and criminal penalties.

Type or print name (must be legible): TAUZZARI ROBINSON

Title: CEO

Date: \_\_\_\_\_

Check here if you would like to request an automatic 5-month extension to your expiration date (this will not be reflected in your registration document, but can be verified online on our website at [michigan.gov/charity](http://michigan.gov/charity)).

THIS IS A PUBLIC RECORD, COPIES OF WHICH ARE SENT, UPON REQUEST, TO ANY INTERESTED PERSON.

**BOYS & GIRLS CLUB OF GREATER FLINT 38-3381808****CHECKLIST:**

- Have all parts of the form been fully completed unless instructed otherwise?
- Have you provided the name and Michigan street address of a resident agent in item 3?
- Is a list of the officers and directors provided or included with the IRS return?
- Have you provided a complete IRS 990, 990-EZ, OR 990-PF?
- If you file Form 990-PF, did you complete item 11?
- If you file Form 990-N, did you complete items 11 and 12?
- If audited or reviewed financial statements are required, are they provided? If not, have you requested a conditional registration or one-time waiver? (See instructions.)
- Are the Form 990 and financial statements prepared for the same reporting period?
- Have you submitted contracts and addenda to contracts with professional fundraisers that have not been previously submitted?
- Have you typed or printed your name, date, and title in Item 15 to certify the form?
- If you are requesting a 5-month extension, have you checked the box below item 15?

Return the completed registration form by:	
Email (preferred method):	ct_email@michigan.gov
1. Put the AG File Number and legal name of the organization in the email subject line.	
2. If your email with attachments exceeds 25 MB, submit two or more emails as necessary. Reference them as 1 of 2, 2 of 2, etc. Attachments must be PDF.	
3. Do not submit encrypted files.	
4. Do not share documents via links.	
Mail:	Attorney General Charitable Trust Section PO Box 30214 Lansing, MI 48909
Overnight mail:	Attorney General-Charitable Trust Section 525 West Ottawa Williams Building - 3rd Floor Lansing, MI 48933
Fax:	(517) 241-7074