Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No. 1545-0047

Open to Public Inspection

Depa Inter	rtment nal Rev	of the Treasury enue Service		Do not enter social security numbers on this form as it may be made public.  Go to www.irs.gov/Form990 for instructions and the latest information.									Open to Public Inspection		
A For the 2022 calendar year, or tax year beginning , 2022, and ending											20				
	Check if applicable:								Employer identification number						
	Ac	ddress change	Boys & Girls Clubs of Union County, Inc.								22-1641962				
	Na	ame change	1050 Jeanette Avenue								E Telephone number				
	Initial return Union, NJ 07083										908-687-7976				
	Fir	nal return/terminated								<del> </del>					
	∏ <sub>Ar</sub>	mended return												71,525.	
	HA	pplication pendin	F Name and address of principal officer: Brian Phillips H(a							H(a) Is this a gro				Yes X No	
	L.,		Same As C Above						H(b) Are all subo	ordinates	included	d?	Yes No		
$\overline{\Gamma}$	Tax-	exempt status:		X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527						If "No," atta	ich a list	. See ins	tructions.	,	
J															
K											egal domicile:	N.T			
Pa	ırt I	Summa	_	<u> </u>	<del></del>	<del>-</del>									
	1	Briefly describe the organization's mission or most significant activities: Our mission is to enable all young													
en.		people	to	reach t	heir fu	ll poten	tial as	product	ive, ca	ring, re	SDOI	nsib.	le citi	zens.	
Š			eople to reach their full potential as productive, car sing trained youth development professionals we offer												
Ę	ļ	educati	cation/career, character/leadership, health/life ski												
o.	-	Check this b	this box If the organization discontinued its operations or disposed of more the of voting members of the governing body (Part VI, line 1a)									asset	s.		
ত												3		21	
es						of the govern calendar year						4		21	
Ě						necessary)						5 6		107	
Activities & Governance						Part VIII, colu						7a		200 0.	
_						rom Form 99						7b		0.	
Revenue									· · · · · · · · · · · · · · · · · · ·	1	Year		Curre	nt Year	
	8	Contribution	s and	d grants (Pa	art VIII, line	1h)				L	99,3	376.		095,025.	
	9	Program ser	rvice	revenue (P	art VIII, line	2g)					68,1			095,231.	
	10	Investment	incom	ne (Part VII	II, column (A	A), lines 3, 4,	and 7d)				14,8			11,924.	
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								_	937,812.		871,854.		
			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)								20,2	237.	3,0	074,034.	
ý	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)											=		
	14	· •	enefits paid to or for members (Part IX, column (A), line 4)												
	15	Salaries, oth	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							1,8	65,4	129.	1,9	955,874.	
ıse	16a	Professiona	rofessional fundraising fees (Part IX, column (A), line 11e)												
Expenses	b	Total fundra	otal fundraising expenses (Part IX, column (D), line 25) 324,148.												
Ŵ	17	Other expen	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)							786,752.			849,334.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)							2,652,181.			2,805,208.			
	19	Revenue less expenses. Subtract line 18 from line 12								468,056.			268,826.		
გ გ									******	Beginning of				of Year	
Net Assets or Fund Balances	20	Total assets	Total assets (Part X, line 16)								36,8			386,967.	
AAB	21	Total liabiliti	Total liabilities (Part X, line 26)								352,417.			332,741.	
ş	22	Net assets of	or fun	d balances	. Subtract lir	ne 21 from lin	ne 20			1,3	84,4	137.	1.5	554,226.	
Pa	rt II	Signatu	ire E	Block						· · · · · · · · · · · · · · · · · · ·	•		· · · · · · · · · · · · · · · · · · ·	<u>-</u>	
Unde	r penalt	ies of perjury, I de	eclare ți	hat I have exam	nined this return,	including accompa	nying schedules	and statements, a	and to the best of	f my knowledge a	nd belief	, it is true	, correct, and		
com	piete. Di	eclaration of pre	parer (d	other than offic	cer) is pased on	all information of	which preparer	has any knowled	ge.						
		Ciamatana									ne 26	, 202	3		
Sign Here		"								Date					
пе	re		Russell Triolo CEO												
				rer's name		Drane			To-t-	<del></del>	1.	17	DTIM		
Paid Preparer Use Only					an a	Preparer's sign		an.	Date	Che	_	. [	PTIN		
				xman, (		<del></del>	oxman,	CPA	<u></u>	self	-employ	ed	P01320	500	
			,												
US	e on	Firm's add	Firm's address 105 Foxwood Terrace							Firr	Firm's EIN 20-2466693				
		<u></u>	Toms River, NJ 08755							Pho	ne no.	732-	<del>-349-76</del>		
IVIa	zne l	RS discuss t	scuss this return with the orenarer shown above? See instructions										Y Vec	No	