Form 990

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

OMB No. 1545-0047 16

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	or the	2016 calendar year, or tax year beginning JUL 1, 2016 and	ending J	UN 30, 2017							
В	Chack If	C Name of organization		D Employer Identifi	cation number						
٥	ppicabl	BOYS & GIRLS CLUB OF GREATER		, ,							
Г	المعرو	W .mampron TMG									
۲	"Name			04-2	464259						
-	_lonarg		Daniel Inches								
╘		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe							
L_]Fenal			413-	562-2301						
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,277,880.						
	Amen	HESIFIEDD, MA UIUU		H(a) is this a group re							
	Applic	F Name and address of principal officer.MICHAEL D COFFEY		for subordinates	? Yes X No						
	pendi	SAME AS C ABOVE		H(b) Are all subordinates to	neturloc? Yes No						
$\overline{}$		empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1)	or 527	1 ' '	list. (see instructions)						
	Mahali	WWW.BGCWESTFIELD.ORG	<u></u>	H(c) Group exemptio	•						
		organization: X Corporation Trust Association Other	To Vane		A State of legal domicile: MA						
			L real	or formation, 1370 K	1 State of Isyal Continue, 1441						
P	art I	Summary									
	1	Briefly describe the organization's mission or most significant activities: SEE	SCHEDU	TR O							
Governance	i .										
Ĕ	2	Check this box > if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets.						
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	24						
	t	Number of independent voting members of the governing body (Part VI, line 1b)		4	24						
Activities &	1	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	• •	5	82						
캶	1	• • • • • • • • • • • • • • • • • • • •	• ••••••		442						
₹	4	Total number of volunteers (estimate if necessary)		···· ······	0.						
Ą	1	Total unrelated business revenue from Part VIII, column (C), line 12									
_	Ь	Net unrelated business taxable income from Form 990-T, line 34	<u> </u>	7ь	0.						
]	RECEIVED		Prior Year	Current Year						
•	8	Contributions and grants (Part VIII, line 1h)		326,197.	513,099.						
Revenue	9	Program service revenue (Part VIII, line 2g)		1,349,691.	1,529,489.						
Š	10	Investment income (Part VIII, column (A), lines 3, & and to) V 2.7 2017.	Ö	-26,731.	7,525.						
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	S	98,337.	104,593.						
		Total revenue - add lines 8 through 11 (must equal Part VII) column (A), line 12)	以	1,747,494.	2,154,706.						
				0.	0.						
	1	Grants and similar amounts paid (Part IX, column (A), lines (3)	—	0.	0.						
		Benefits paid to or for members (Part IX, column (A), line 4)									
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	1,093,814.	1,195,421.						
ans.	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) > 126, 9	<u>35. </u>								
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		737,130.	744,064.						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,830,944.	1,939,485.						
		Revenue less expenses. Subtract line 18 from line 12	.	-83,450.	215,221.						
25			Ro	ginning of Current Year	End of Year						
Assets or Balances	20	Total assets (Part X, line 16)	1 3	4,472,207.	4,588,370.						
Se											
Fund F	21	Total liabilities (Part X, line 26)	· ·	942,683.	778,863.						
젍	22	Net assets or fund balances. Subtract line 21 from line 20	<u></u>	3,529,524.	3,809,507.						
		Signature Block									
Undi	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	/ knowledge and belief, it is						
true,	correc	L and complete. Rectaration of prepares Lyther (Lan officer) is based on all information of wi	nich preparer	has any knowledge.							
•		Singapure of officer		(X) ///	15/12						
Słgr	1	y digitality of officer		Date							
Hen		(x) Michael Coffey President									
	•	Type or print name and title									
THOMBY CATARES											
Prep		Firm's name WHITTLESEY & HADLEY, P.C. ()		Firm's EIN	06-0903326						
USC	Use Only Firm's address 14 BOBALA RD										
	HOLYOKE, MA 01040 Phone no.413-536-3970										
Mav	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No						
5320 0	01 11-1	1-15 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2016)						

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Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Bnefly describe the organization's mission SEE SCHEDULE O		
			<u> </u>
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 1,690,515 · including grants of \$) (Revenu	ues 1,560,	766.
	SEE SCHEDULE O		,
41.			
4b	(Code) (Expenses \$) (Revenue)	ие \$)
			
		<u></u>	
4c	(Code) (Expenses \$) (Revenue	ue \$)
			
			
		 	
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$))	
4e	Total program service expenses ► 1,690,515.		

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			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			_
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		-
9	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 temporarily restricted endowments, permanent	Ť		_
-	endowments, or 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, VIII, IX, or X	- 2	×	*4
	as applicable	ï		, 3,
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	X	
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		<u>X</u>
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		X
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			x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	X	
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	- 42	-
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		i	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	ļ		.,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Ì	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,"	<u> </u>	 -	
	complete Schedule G, Part III	19		х
			990	(2016)

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Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	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
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			[
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	İ		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the]		ŀ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	any tax-exempt bonds?	24c		<u> </u>
đ	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-EZ? If "Yes," complete			[
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	'		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ŀ		!
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	l		٠,,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	×	**	*
	instructions for applicable filing thresholds, conditions, and exceptions)		£	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			.
	director, trustee, or direct or indirect owner? 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	١	[₊
	contributions? If "Yes," complete Schedule M	30	 	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	۱		_~
	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			X
	Schedule N, Part II	32	├	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00	1	х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	 	- <u>^</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		}	х
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	├─	 ^
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	255	1	1
26	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?	20	[x
2.7	If "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	27		x
26	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 —	 ^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	
	Note. All Form 990 filers are required to complete Schedule O		990	(2016

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Par	<u> </u>			age o
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			I
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ı
·	(gambling) winnings to prize winners?	1c	х	ľ
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			 ,
20	filed for the calendar year ending with or within the year covered by this return 82			ł
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	I
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-20		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	}	Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	}	X
	If "Yes," enter the name of the foreign country	70		
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	٠	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		_==_
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
Va	any contributions that were not tax deductible as charitable contributions?	6a	}	X
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Ū	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ł
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	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			
	sponsoring organization have excess business holdings at any time during the year?	8		l
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		ĺ
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		i
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	}		ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ĺ
11	Section 501(c)(12) organizations. Enter			l
а	Gross income from members or shareholders 11a	,		j
b	Gross income from other sources (Do not net amounts due or paid to other sources against	}		1
	amounts due or received from them)	}		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			ł
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	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		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	
		Form	990	(2016)

WESTFIELD, INC.

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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 in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management			·			
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 24	_	,	1			
	If there are material differences in voting rights among members of the governing body, or if the governing			,			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	•		5			
b	Enter the number of voting members included in line 1a, above, who are independent 24			,			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6_		X			
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or						
	more members of the governing body?	7a		X			
ь	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		X	. i			
а	The governing body?	8a					
	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			7,7			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
40-	Diddle annound the bost level of the state o	40	Yes	No X			
	Did the organization have local chapters, branches, or affiliates?	10a					
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40L					
110	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х	 			
	 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 						
	Did the organization have a written conflict of interest policy? If *No, * go to line 13	12a	х	2			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120					
·	in Schedule O how this was done	12c	х				
13	Did the organization have a written whistleblower policy?	13	X				
14	Did the organization have a written document retention and destruction policy?	14	X	_			
15	Did the process for determining compensation of the following persons include a review and approval by independent		2.7				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	3		,			
а	The organization's CEO, Executive Director, or top management official	 15a	X				
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	-	,				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1			
	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					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ►MA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le				
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website X Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial				
	statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records:						
	WILLIAM PARKS - 413-562-2301						
	28 WEST SILVER STREET, WESTFIELD, MA 01085						

WESTFIELD, INC.

Form 990 (2016)

04-2464259

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

		orga	anıza			mpe	nsat	ated any current officer, director, or trustee.				
(A)	(B)	(C)						(D)	(E)	(F)		
Name and Title	Average	(do not check more than one			than	one	Reportable	Reportable	Estimated			
	hours per	box, unless person is both an officer and a director/trustee)				is bot or/trus	h an tee)	compensation	compensation	amount of		
	week	\vdash				Г	, 	from	from related	other		
	(list any hours for	Irect				L	l	the organization	organizations (W-2/1099-MISC)	compensation from the		
	related	9 0 0	fee			sated	l	(W-2/1099-MISC)	(VV-2/1099-WII3C)	organization		
	organizations	ruste	l trus		e Je	шреш		(** 2) 1033 (**100)		and related		
	below	dual t	rtiona	_	l old I	st co.	_			organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			-		
(1) MICHAEL D. COFFEY	1.00											
PRESIDENT		X		Х				0.	0.	0.		
(2) JEFFREY J. SARAT	1.00						İ	_	-			
VICE PRESIDENT		X		X		<u> </u>	<u> </u>	0.	0.	0.		
(3) KATRINA DZIEDZIC	1.00							_	_	_		
TREASURER		X	$ldsymbol{ld}}}}}}$	X		L_		0.	0.	0.		
(4) JAMES J. IRWIN	1.00					ŀ				_		
SECRETARY	1 00	X		X				0.	0.	0.		
(5) JEFFREY AMANTI	1.00						İ		•			
DIRECTOR	1 00	X		_		L	_	0.	0.	0.		
(6) DAVID R. BONOMI	1.00	.,							•	_		
DIRECTOR	1 00	X				<u> </u>	<u> </u>	0.	0.	0.		
(7) BARBARA H. BRAEM-JENSEN DIRECTOR	1.00	X						0.	0.	_		
(8) DANIEL S. BURACK	1.00	_		\vdash	\vdash	┢	┝	<u> </u>	0.	0.		
DIRECTOR	1.00	x				ŀ		0.	0.	0.		
(9) JOHN A. CAMEROTA	1.00		-	\vdash		\vdash	\vdash	0.				
DIRECTOR		x						0.	0.	0.		
(10) HOLLY CARROLL	1.00					T						
DIRECTOR	:	X						0.	0.	0.		
(11) TODD S. CIEPLINSKI	1.00									-		
DIRECTOR		Х						0.	0.	0.		
(12) RICHARD E. CLARK, JR.	1.00									-		
DIRECTOR		X						0.	0.	0.		
(13) SHARON CZARNECKI	1.00								_			
DIRECTOR		X						0.	0.	0.		
(14) CHRISTINE E. HUBBARD	1.00					l				_		
DIRECTOR		X	<u> </u>	L.		L		0.	0.	0.		
(15) CATHERINE L. JOCELYN	1.00	۱		1					_	_		
DIRECTOR	1 00	X	.	<u> </u>		\vdash	Ļ	0.	0.	0.		
(16) RICHARD LENFEST	1.00	x							^	_		
DIRECTOR	1.00	┡	H			\vdash	-	0.	0.	0.		
(17) TIMOTHY D. MARKEL DIRECTOR	1.00	x						0.	0.	0.		
DIRECTOR		ഥ	لـــــا					<u> </u>	U •	<u> </u>		

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d H	ıghe	st (Compensated Employe	es (continued)				
(A) (B)			(C)				-	(D)	(E)	(F)			
Name and title	Average	Position (do not check more than one					ann	Reportable	Reportable		Estimated		
	hours per	box, unless person is both an officer and a director/trustee)					th an	compensation	compensatio	n	an	nount o	of
	week	 			irecto	or/trus	Tee	from	from related			other	
	(list any hours for	recto					[the	organizations			pensa	
	related	p io c	8	i	ł	sated	ł	organization (W-2/1099-MISC)	(W-2/1099-MIS	(J		om the	
	organizations	ruster	trustee		æ	nadu	j	(VV-2/1099-WIGC)			-	anızatı d relate	
	below	Individual trustee or director	tona	_	Key employee	st co.	<u> </u>				ì	ınızatıc	
	line)	ğu	Institutional t	Officer	Key er	Highest compensated employee	Form						
(18) MICHAEL A. MCCABE	1.00												
DIRECTOR		Х	_		L	<u>L</u>	L	0.		0.	<u> </u>		0.
(19) MARTIN O'CONNELL	1.00		,	,		1]		,	_	ļ		
DIRECTOR		Х				L.	<u> </u>	0.	·	0.			0.
(20) MARY R. REGAN	1.00		1		1		(_
DIRECTOR	1 00	X	↓	L.	_	╂—	┞	0.		0.			0.
(21) EMANUEL F. SARDINHA DIRECTOR	1.00	X		ł		1		0.		0.			0.
(22) KELLY SILVESTRI	1.00	<u> </u>	-		-	╁	├─	 	 	<u> </u>			<u> </u>
DIRECTOR	1.00	x		ļ	}	}		0.		0.			0.
(23) JONATHAN STOLPINSKI	1.00	<u> </u>	H		_	 	✝	 		-			
DIRECTOR	ļ	X						0.		0.			0.
(24) BO SULLIVAN	1.00					Π	Γ						
DIRECTOR	 	X	<u> </u>			<u> </u>	<u> </u>	0.	·	0.			<u>0.</u>
(25) WILLIAM R. PARKS	40.00	Į	1		1	1	1	100 007		•		- ^.	1.0
CHIEF EXECUTIVE OFFICER			├_	X	-	⊬	├-	128,007.		0.	1	5,0	19.
		ł	l										
1b Sub-total	<u> </u>		<u> </u>	.—		1	—	128,007.		0.	1	5,0	19.
c Total from continuation sheets to Part V	II. Section A						•	0.	 	0.			0.
d Total (add lines 1b and 1c)	.,						•	128,007.		0.	1	5,0	19.
2 Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportabl	e			
compensation from the organization													1
												Yes	No
3 Did the organization list any former officer.			e, ke	ey er	nplo	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s											3_		<u>X</u>
4 For any individual listed on line 1a, is the si								•	the organization			∤	X
and related organizations greater than \$15 5 Did any person listed on line 1a receive or									idual for populace		4		
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con							eiai	ted organization of indiv	idual for services		5	- 1	Х
Section B. Independent Contractors	picto o diriodar		0. 0.		<u> </u>		_		 		ـــــــــــــــــــــــــــــــــــــــ	·	
Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	ract	ors '	that received more than	\$100,000 of com	pens	ation f	rom	
the organization Report compensation for	the calendar y	ear	endi	ng v	vith	or w	/rthi	n the organization's tax	year				
(A)	1.1			_			1	(B)	. 1	_	(0		
Name and business	address	N	ONI	<u> </u>			_	Description of s	services		compe	nsation	<u> </u>
									1				
							ᅥ						
									ļ				
							_						
									Į.				
			_	_									
						_							
2 Total number of independent contractors (including but r	ot l	mrte	d to		_	ste	d above) who received n	nore than				
\$100,000 of compensation from the organ	zation 🕨	_				0_						200	
											Form		10461

WESTFIELD, INC. 04-2464259 Form 990 (2016) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Grants 1 a Federated campaigns b Membership dues 1b 18,410. Gifts, c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 494,689 similar amounts not included above 21,170 g Noncash contributions included in lines 1a-1f \$ 513,099 h Total. Add lines 1a-1f Business Code 529, 489, 1, 529, 489 PROGRAM FEES & MEMBERS 900099 Program Service Revenue f All other program service revenue ,529,489. Total. Add lines 2a-2f Investment income (including dividends, interest, and 7,525. 7,525 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 31.277. 6 a Gross rents 0. b Less rental expenses 31.277.c Rental income or (loss) 31,277 31,277 d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 18,410. of including \$ contributions reported on line 1c) See a 196,490 Part IV, line 18 ь 123,174 b Less direct expenses 73,316. 73,316 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d

2,154,706.1,560,766.

Total revenue. See instructions.

0.

04-2464259 Page 10

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon			(C)	
	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign			į	
	organizations, foreign governments, and foreign			}	
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	143,019.	55,006.	43,291.	44,722.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ł		1	
	persons described in section 4958(c)(3)(B)	j		j	
	Other salaries and wages	904,342.	809,047.	35,867.	59,428.
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	16,905.	14,015.	1,278.	1.612.
	Other employee benefits	41,549.	35,431.	2,650.	1,612. 3,468.
	Payroll taxes	89,606.	74,603.	6,829.	8,174.
11	Fees for services (non-employees)				0,174
	` ' ' '	İ			
	Management				
	Legal	15,000.		15,000.	
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25,			}	
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	7,550.	5,598.		1,952.
13	Office expenses	20,082.	11,016.	5,086.	3,980.
14	Information technology				
15	Royalties				
16	Occupancy	80,473.	78,059.	1,609.	805.
17	Travel	23,368.	22,769.	599.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	j		j	
19	Conferences, conventions, and meetings	20,662.	20,662.		
20	Interest	33,115.	32,039.	1,076.	
21	Payments to affiliates				
	Depreciation, depletion, and amortization	190,928.	186,155.	4,200.	573.
23	Insurance	54,000.	50,760.	3,240.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)			ł	
	amount, list line 24e expenses on Schedule 0.)			j	
а	PROGRAM EXPENSES	223,299.	223,299.		
	REPAIRS AND MAINTENANCE	49,525.	48,249.	851.	425.
_	DUES, FEES, LICENSES	22,939.	20,684.	459.	1,796.
d	EDUCATIONAL AND RECRUIT	3,123.	3,123.		-,,,,,,,
	All other expenses		3,123.		
	Total functional expenses. Add lines 1 through 24e	1,939,485.	1,690,515.	122,035.	126,935.
25 26	Joint costs. Complete this line only if the organization	2,200,400			
	reported in column (B) joint costs from a combined			}	
	, , , , , , , , , , , , , , , , , , , ,	ł		1	
	educational campaign and fundraising solicitation.	j		1	
	Check here if following SOP 98-2 (ASC 958-720)			_ ,,,,	Farm 990 (2016)

Page 11

WESTFIELD, INC.

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 Cash - non-interest-bearing 189,888. 338,043. 2 2 Savings and temporary cash investments 4,305. 9,880. 3 3 Pledges and grants receivable, net 131,262. 144,911. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 inventories for sale or use 21,351 14,906. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 6,050,908 basis Complete Part VI of Schedule D 10a 2,556,718. 3,598,128 3,494,190. b Less accumulated depreciation 10b 474,093. 541,055. 11 Investments - publicly traded securities 11 39,605. 42,960. 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 8,000. 8,000. 15 15 Other assets See Part IV, line 11 4,472,207. 4,588,370. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 98,486. 115,484. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 11,318. 16,057. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 818,981. 633,216. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of 13,898 14,106. Schedule D 942,683. 778,863. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 3,176,110 3,368,503. 27 Unrestricted net assets 27 186,414. 274,004. 28 28 Temporarily restricted net assets 167,000. 167,000. 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 3,529,524. 3,809,507. 33 33 Total net assets or fund balances 4,472,207. 4,588,370. Total liabilities and net assets/fund balances

BOYS & GIRLS CLUB OF GREATER WESTFIELD. INC.

Form	990 (£016) WESTFIELD, INC.	04-	-2464259	Pa	qe 12
Pai	rt XI Reconciliation of Net Assets				··
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,15		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,93		
3	Revenue less expenses Subtract line 2 from line 1	3			21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,52		
5	Net unrealized gains (losses) on investments	5	6	4,7	62.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor penod adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,80	9,5	07.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0 9			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis]
b	Were the organization's financial statements audited by an independent accountant?		2b	X	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis	s, ,		
	consolidated basis, or both		ŀ		
	X Separate basis Consolidated basis Both consolidated and separate basis		ł		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit	t,		
	review, or compilation of its financial statements and selection of an independent accountant?		_2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	nedule (o 🗔		-
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ıngle Aı	udit		
	Act and OMB Circular A-133?		3a	X	L_`
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured au	ıdıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х	Į

Form **990** (2016)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Name of the organization BOYS & GIRLS CLUB OF GREATER Employer identification number 04-2464259 WESTFIELD, INC. Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization listed (v) Amount of monetary (i) Name of supported (iii) Type of organization (vi) Amount of other in your governing document (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC. 04-2464259 Page 2

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) 🖊	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	987,259.	989,284.	314,308.	326,197.	513,009.	3,130,057.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	987,259.	989,284.	314,308.	326,197.	513,009.	3,130,057.
5	The portion of total contributions		*	Š'			
	by each person (other than a		,				
	governmental unit or publicly	<i>,</i> ,	, ,				
	supported organization) included	·	*	**	*		
	on line 1 that exceeds 2% of the	_		4	*	< 	
	amount shown on line 11,		2	*	*		
	column (f)			**	, *		
6	Public support. Subtract line 5 from line 4	% ×		**	5		3,130,057.
Sec	ction B. Total Support	•					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	987,259.	989,284.	314,308.	326,197.	513,009.	3,130,057.
8	Gross income from interest,	-					
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	95,358.	56,927.	14,536.	0.	7,525.	174,346.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	146,047.	124,106.	143,386.	98,337.	104,593.	616,469.
11	Total support. Add lines 7 through 10			•			3,920,872.
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a section	n 501(c)(3)	
	organization, check this box and stop	p here		·			<u> </u>
Se	ction C. Computation of Publ	ic Support Pe	rcentage			· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2016 (line 6, column (f) d	ivided by line 11, o	column (f))		14	79.83 %
	Public support percentage from 2015					15	79.41 %
16a	33 1/3% support test - 2016. If the				14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies						ightharpoons
t	33 1/3% support test - 2015. If the				line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual	lifies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances tes	t - 2016. If the org	anızatıon did not o	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstar	ices" test, check t	his box and stop h	iere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		
t	10% -facts-and-circumstances tes	t - 2015. If the org	janization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t						
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publi	cly supported org	anızatıon	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s 🕨
						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC. 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

Sec	ction A. Public Support	elow, please com	piete rait ii j						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons 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								
c	Add lines 7a and 7b								
8	Public support. (Subtract line 7c from line 6.)			z×	^ .	,			
_	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
Ł	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on								
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
	Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>			<u> </u>	<u> </u>			
14	First five years. If the Form 990 is for	the organization	s first, second, thi	ra, tourth, or fifth t	ax year as a sectu	on 501(c)(3) organi:	zation,		
6~	check this box and stop here	ic Support De	rcontage						
_	ction C. Computation of Publ			losses (6)		[ag]			
	Public support percentage for 2016 (• • • • • • • • • • • • • • • • • • • •	-	column (T))		15	%		
	Public support percentage from 2015 ction D. Computation of Investigation					[16 [%		
						147			
17									
18	investment income percentage from 2 a 33 1/3% support tests - 2016. If the			on line 14 and lin	a 15 is more than	33 1/3% and line	17 is not		
198	more than 33 1/3%, check this box a						▶		
t	33 1/3% support tests - 2015. If the	organization did	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,			
	line 18 is not more than 33 1/3%, che						·		
20	Private foundation. If the organization	n did not check a	1 Dox on line 14, 19	ia, or 19b, check t	nis box and see in	estructions	▶		

Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC.

Part IV

Supporting Organizations

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

Section A.	All	Supporting (Organizations
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- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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?
- 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 (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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 in 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 in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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)

Г		Yes	No
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Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC. 04-2464259 Page 5 Supporting Organizations (continued) Yes No 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 in (b) and (c) below, the governing body of a supported organization? 11a b A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 1 2 Did the organization operate for the benefit of any supported organization other than the supported 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 Yes No 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) Section D. All Type III Supporting Organizations Yes No 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? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If *No,* explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) 2 By reason of the relationship described in (2), 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 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below b The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions) C 2 Activities Test Answer (a) and (b) below. Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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 2a b Did the activities described in (a) 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 2b Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. За 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

	BOID & CIRED CHOP OF GR		11	
Sche	dule A (Form 990 or 990 EZ) 2016 WESTFIELD, INC.			04-2464259 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			n Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co			,
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
	Recovenes of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5	1	
6	Portion of operating expenses paid or incurred for production or	1		
	collection of gross income or for management, conservation, or			1
	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		
	ion B - Minimum Asset Amount	<u> </u>	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		, m,	. , ,
	instructions for short tax year or assets held for part of year)	1 .	* * * * * * * * * * * * * * * * * * * *	*** **
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other		* *	* * *
	factors (explain in detail in Part VI)	1 *		1
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		_
4	Cash deemed held for exempt use Enter 1-1/2% 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 .035	6		
7	Recovenes of pnor-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	_1	v^.	×.
2	Enter 85% of line 1	2	·	*
3	Mınımum asset amount for pnor year (from Section B, line 8, Column A)	3	,	
4	Enter greater of line 2 or line 3	4	, ,	^xo
5	Income tax imposed in prior year	5	Ć 1.	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990 or 990-EZ) 2016

emergency temporary reduction (see instructions)

instructions)

Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC.

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
	on D - Distributions			Current Year
1 .	Amounts paid to supported organizations to accomplish exen	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	<u> </u>	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which th	ne organization is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii) Underdistributions	(iii) Distributable
	on E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2016	Amount for 2016
Secti				
1	Distributable amount for 2016 from Section C, line 6	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	
2	Underdistributions, if any, for years prior to 2016 (reason-	, , , , , , , , , , , , , , , , , , ,		
	able cause required- explain in Part VI) See instructions			\$× .
3	Excess distributions carryover, if any, to 2016	* \	, y	* * *
а	* * * *	·	\$ X	* * *
b	* * * *	* * *	** * *	* * * * * * * * * * * * * * * * * * * *
С	From 2013		* × ×	* ** *
d	From 2014			74
е	From 2015			**
f	Total of lines 3a through e		*	*
	Applied to underdistributions of pnor years		**	
h	Applied to 2016 distributable amount	*\$,	*	
i_	Carryover from 2011 not applied (see instructions)		^	
نــــــــــــــــــــــــــــــــــــــ	Remainder Subtract lines 3g, 3h, and 3i from 3f		, <u> </u>	
4	Distributions for 2016 from Section D,		* ,	
	line 7 \$	<u> </u>		
	Applied to underdistributions of prior years	*		
	Applied to 2016 distributable amount			· ·
_ c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if	_		,
	any Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h	w , 1	*	
	and 4b from line 1. For result greater than zero, explain in	S	′ ′ ′ 、	
	Part VI See instructions		x , , .	3
7	Excess distributions carryover to 2017. Add lines 3j		* *	, ,
	and 4c	<u> </u>	 	
8	Breakdown of line 7	 		š
a	l i	 		
b	Excess from 2013	 		
	Excess from 2014			
	Excess from 2015			+
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016 WESTFIELD, INC. 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 II, LINE 10, EXPLANATION FOR OTHER INCOME: SPECIAL EVENTS 2012 AMOUNT: \$ 119,173. 2013 AMOUNT: \$ 98,843. 2014 AMOUNT: \$ 114,893. 2015 AMOUNT: \$ 69,292. 2016 AMOUNT: \$ 73,316. PRODUCTIVE ENTERPRISES 2012 AMOUNT: \$ 26,874. 25,263. 2013 AMOUNT: 2014 AMOUNT: 28,493. 2015 AMOUNT: 29,045. 2016 AMOUNT: \$ 31,277.

04-2464259 Page 8

SCHEDULE D

(Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

16 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Inspection

BOYS & GIRLS CLUB OF GREATER Name of the organization

WESTFIELD TNC. **Employer identification number** 04-2464259

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
Ū	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
Ŭ	for charitable purposes and not for the benefit of the donor of	• •	•
	impermissible private benefit?	or device devices, or for any other purpose	Yes No
Par	rt II Conservation Easements. Complete if the ori	ganization answered "Yes" on Form 990.	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	· —	tried historic structure
	Preservation of open space	rieservation of a cen	tined historic structure
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a concentration comment on the last
-	day of the tax year.	ned conservation contribution in the form	Held at the End of the Tax Year
•	Total number of conservation easements		2a
а ь	Total acreage restricted by conservation easements		2b
D	· ·	ricture included in (a)	2c
ن	Number of conservation easements on a certified historic still Number of conservation easements included in (c) acquired	· <i>'</i>	
d		arter of 17700, and not on a historic struct	2d
2	listed in the National Register Number of conservation easements modified, transferred, re	logged extragraphed or terminated by th	
3	•	neased, extinguished, or terminated by the	e organization during the tax
4	Number of states where property subject to concentation of	noment in leasted	
4	Number of states where property subject to conservation ea Does the organization have a written policy regarding the pe		
5			Yes No
e	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting,	rialiding of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ding of violations, and enforcing consens	ation appearants during the year
7	Amount of expenses incurred in monitoring, inspecting, name	ding of violations, and enforcing conserva	ation easements during the year
_			0/L\/4\/D\/D
8	Does each conservation easement reported on line 2(d) about a server 170(h)(n)(n)(n)	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		YesNo
9	In Part XIII, describe how the organization reports conservat	·	
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
Da	conservation easements rt III Organizations Maintaining Collections o	f Art Historical Treasures or O	ther Similar Assets
ra	Complete if the organization answered "Yes" on Form		rtiei Siiiliai Assets.
па	If the organization elected, as permitted under SFAS 116 (At		
	historical treasures, or other similar assets held for public ex	•	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
Þ	If the organization elected, as permitted under SFAS 116 (A	· •	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1	•	► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		 \$

BOYS & GIRLS CLUB OF GREATER WESTFIELD. INC.

	dule D (Form 990) 2016 WESTFIE.							104255		ige 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical	reasures,	or Oth	er Sin	nilar Asse	ets(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of th	e following th	at are a s	significa	int use of its	collection	rtems	3
	(check all that apply).									
а	Public exhibition	d	Loan or e	change progr	ams					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how they furthe	the organizat	ion's exe	empt pu	irpose in Pa	rt XIII		
5	During the year, did the organization solicit o			-						
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comple	te if the organiza	ion answered	"Yes" or	Form	990. Part IV	line 9. or		
	reported an amount on Form 990, Par							, ., .		
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for contribut	ons or other a	ssets no	t includ	ed			
,,,	on Form 990, Part X?		mary for continuous	5/15 6/ Ga16/ a	33010110	i ii ioidd	Г	Yes		No
	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing toblo:				_	163		110
D	ir res, explain the arrangement in Fart Alli	and complete the lo	nowing table.					Amount		
	Decree wholes					-		Amount		
	Beginning balance					10				
а	Additions during the year					1				
e	Distributions during the year			-		10				
Ţ	Ending balance	· · · ·				1_	<u>† </u>	Т	Т	Τ
	Did the organization include an amount on Fo		-			•	_	_ Yes	\vdash	No
	If "Yes," explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete							1		
		(a) Current year	(b) Prior year	(c) Two yea		(d) I hr	ee years back			
1a	Beginning of year balance	513,698.	517,31		0,228.		433,503	+	374,	
b	Contributions		25,44		1,269.		2,135			250.
С	Net investment earnings, gains, and losses	70,317.	-29,06	2	4,182.		84,590	·	57 <u>,</u>	051.
đ	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses							Γ		
g	End of year balance	584,015.	513,69	B. 51	7,315.		520,228		433,	503.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, columr	(a)) held as						
а	Board designated or quasi-endowment	33.00	%							
ь	Permanent endowment ► 29.00	%	_							
С	Temporarily restricted endowment ▶ 3	8.0 0 %								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	•	ation that are held	and administ	ered for	the ora	anization			
	by							Г	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations		-					3a(ii)		X
	If "Yes" on line 3a(ii), are the related organizations	itione lietod se roquir	ed on Schodule I	22				3b	\dashv	 -
4	Describe in Part XIII the intended uses of the	•		\ :				30		
<u> </u>	rt VI Land, Buildings, and Equipm		winentiulius							
<u> </u>			Dort IV boo 11s	Saa Earm 00	0 Dod V	luna 16	`			
	Complete if the organization answere				1		$\overline{}$	(N D)		
	Description of property	(a) Cost or o		st or other	1 ''	ccumu		(d) Book	value	;
		basis (investri	Das	s (other)	l de	preciat	ION			
	Land		— _F	10 600	 _ _ _ 	205	270	7 41 -	, ,	
	Buildings		5,/	12,608.	4,	<u> 495,</u>	278.	3,417	, 3.	<u> </u>
С	Leasehold improvements	\		00 404	<u> </u>	4-7-A	016			
d	Equipment .	<u> </u>		03,481.			219.		5,2	
	Other			34,819.	L	113,	221.		L, 5	
Tota	I. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X, column (B), lin	10c)			. 🕨	3,494	1,19	90.

	INC.		U4-2464259 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati	ion: Cost or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
<u>(E)</u>			
<u>(F)</u>			
(G)		_ _	
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		* , ,	· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV (b) Book value	, line 11c See Form 990, Part	X, line 13. ion Cost or end-of-year market value
	(b) book value	(c) ivieurod or valuati	ion cost or end-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)		<u> </u>	
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		* ^	
Part IX Other Assets.	5 000 D 1 11	E 000 B	V.1. 45
Complete if the organization answered "Yes"		, line 11d See Form 990, Part	X, line 15 (b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)		· · · · · · · · · · · · · · · · · · ·	
(5)			
(6)			
(7)			
(8)			
(9)	451		
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11e or 11f See Form 990 (b) Book value	J, Part X, line 25
1. (a) Description of liability		(b) Dook value	
(1) Federal income taxes	OTTRE	14 106	
(2) DUE TO INTERNAL MEMBER GR	OUPS	14,106.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		44.45	
Total. (Column (b) must equal Form 990, Part X, col. (B) line		14,106.	
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	FIN 48 (ASC 740). C	heck here if the text of the foo	tnote has been provided in Part XIII

Schedule D (Form 990) 2016

04-2464259 Page 4 Schedule D (Form 990) 2016 WESTFIELD, INC. Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 2,219,468. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 64,762 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recovenes of pnor year grants 2c d Other (Describe in Part XIII.) 2d 64,762. e Add lines 2a through 2d 2,154,706. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII) c Add lines 4a and 4b 4c 2,154,706. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,939,485. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a **b** Pnor year adjustments 2b c Other losses 2c d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 1,939,485. Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 939,485. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. 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 XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

2016

Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUB OF GREATER

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

WESTFIE	LD, INC.				04-2464	259
Part I Fundraising Activities. required to complete this part	Complete if the organization answ t	wered "Y	es" o	n Form 990, Part IV,	line 17 Form 990-E2	filers are not
Indicate whether the organization rais	e Solicit f Solicit g Specia or oral agreement with any individu art VII) or entity in connection with viduals or entities (fundraisers) pure	tation of tation of al fundra ial (includ profess	non-g gover ising ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	istody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		1	
			 -			
						<u> </u>
					<u></u>	
Total			>			
3 List all states in which the organization or licensing	in is registered or licensed to solic	it contrib	oution:	s or has been notified	d it is exempt from re	egistration

· · · · · · · · · · · · · · · · · · ·						
						
						

BOYS & GIRLS CLUB OF GREATER 04-2464259 Page 2 Schedule G (Form 990 or 990-EZ) 2016 WESTFIELD, INC. 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. (a) Event #1 (b) Event #2 (c) Other events (d) Total events HALF (add col (a) through \mathtt{GOLF} 5 MARATHON col (c)) (event type) (total number) (event type) 84,954. 27,373. 1 Gross receipts 102,573. 214,900. 18,410. 18,410. 2 Less Contributions 66,544 27,373 102,573. 196,490. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 31,624. 10,487. 81,063. 123,174. 9 Other direct expenses 123,174. 10 Direct expense summary Add lines 4 through 9 in column (d) 73,316. 11 Net income summary Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d)

Schedule 6	i (Form	990 or	990	-EZ)	2016
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___ Yes

No

b If "No," explain:

b if "Yes," explain

9 Enter the state(s) in which the organization conducts gaming activities

a is the organization licensed to conduct gaming activities in each of these states?

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

BOYS & GIRLS CLUB OF GREATER WESTFIELD. INC.

Sch	nedule G (Form 990 or 990-EZ) 2016 WESTFIELD, INC.	04-2464259 Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes No
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?	Yes No
13	Indicate the percentage of gaming activity conducted in	1e3 No
	a The organization's facility	13a %
	b An outside facility	13b %
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor	rds:
	Name	
	Address >	
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
ı	b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amo	ount
	of garning revenue retained by the third party > \$	
•	c If "Yes," enter name and address of the third party.	
	Name	
	Address >	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions:	
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	└─ Yes └─ No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the
P	organization's own exempt activities during the tax year \$\bigsim \$\$ Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and I	Part III. lines 9, 9h, 10h, 15h
_	15c, 16, and 17b, as applicable Also provide any additional information. See instructions	
		
_		
_		
		
_		

632083 09-12-16

Schedule G (Form 990 or 990-EZ) 2016

Schedule G	G (Form 990 or 990-EZ)	BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.	04-2464259 Page 4
Part IV	i`(Form 990 or 990-EZ) Supplemental Infor	mation (continued)	
			-
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		······	
		· · · · · · · · · · · · · · · · · · ·	
			
			
			
			

632084 04-01-16 Schedule G (Form 990 or 990-EZ)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

16 Open to Public Inspection

OMB No 1545-0047

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

BOYS & GIRLS CLUB OF GREATER Emplo

Name of the organization WESTFIELD, INC. **Employer identification number** 04-2464259

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE ESPECIALLY THOSE FROM
DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS
PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM
DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS
PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS. THE BOYS AND GIRLS CLUB
OF GREATER WESTFIELD WILL SERVE AS A SPOKESPERSON AND ADVOCATE FOR THE
YOUTH AND WILL PROVIDE PROGRAMS AND SERVICES BUILT ON MEMBER AND
COMMUNITY INVOLVEMENT WHICH ARE RESPONSIVE TO LOCAL NEEDS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
,
AT THE BOYS & GIRLS CLUB OF GREATER WESTFIELD (THE CLUB) THE MISSION IS
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US
MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND
CARING CITIZENS.
FOR 48 YEARS, THE CLUB HAS BEEN IN THE FOREFRONT OF YOUTH DEVELOPMENT,
WORKING WITH YOUNG PEOPLE FROM DISADVANTAGED ECONOMIC, SOCIAL AND
FAMILY CIRCUMSTANCES. IN FULFILLING OUR MISSION, WE PROVIDE A SAFE
HAVEN FOR YOUTH WHERE OUR CARING AND PROFESSIONAL MENTORING STAFF
INSPIRE YOUNG PEOPLE TO DREAM BIG AND WORK HARD TO ACHIEVE THEIR
PERSONAL GOALS.

OPERATES WITHIN THE BEST PRACTICES OF A NONPROFIT ORGANIZATION. IN DOING SO, THE CLUB EARNS ITS ROLE IN GREATER WESTFIELD AS A STABLE, COLLABORATIVE, RESPECTED AND RESPONSIVE YOUTH SERVING ORGANIZATION. IN 2016, THE CLUB WAS ABLE TO MAKE A POSITIVE IMPACT ON OVER 1,940 MEMBERS IN THE GREATER WESTFIELD AREA. OVER 770 MEMBERS PARTICIPATED IN PROGRAMS DEVELOPING PHYSICAL FITNESS AND POSITIVE USE OF LEISURE TIME. OVER 620 MEMBERS PARTICIPATED IN ARTS PROGRAMMING. 105,500 SNACKS AND MEALS WERE SERVED DURING THE SCHOOL YEAR AND 29,500 MEALS WERE SERVED AT NINE SITES DURING THE SUMMER. EVERY CLUB MEMBER WHO WAS A HIGH SCHOOL SENIOR, GRADUATED IN MAY OF 2016. THE POWDERMILL VILLAGE PUBLIC HOUSING BOYS & GIRLS CLUB UNIT PROVIDED PROGRAMS FOR 103 YOUTH MEMBERS. WITH COMMUNITY SUPPORT TO THE BEST EXTENT POSSIBLE, THE CLUB IS ABLE TO BE AN INNOVATOR IN THE DELIVERY OF PROGRAMS AND ACTIVITIES DESIGNED TO MEET THE EVER-CHANGING ACADEMIC, CULTURAL, SOCIAL AND RECREATIONAL NEEDS OF CHILDREN IN GREATER WESTFIELD. PROGRAMS ARE RUN IN FIVE CORE PROGRAM AREAS INCLUDING: SPORTS, FITNESS AND RECREATION; CHARACTER AND LEADERSHIP DEVELOPMENT; HEALTH AND LIFE SKILLS; EDUCATION AND CAREER DEVELOPMENT; AND THE ARTS. IN ADDITION TO A NEW PROGRAM GEARED TOWARDS 3 TO 5 YEAR OLDS, THE CLUB IS AVAILABLE TO SERVE ALL YOUNG PEOPLE BETWEEN THE AGES OF 5 AND 18 EVERY DAY AFTER SCHOOL AND FULL DAYS DURING THE SUMMER. NO CHILD IS TURNED AWAY DUE TO AN INABILITY TO PAY THE MEMBERSHIP FEE.

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

THE FORM 990 IS REVIEWED BY THE CLUB'S TREASURER AND EXECUTIVE DIRECTOR PRIOR TO FILING. THE FORM 990 IS MADE AVAILABLE TO ALL BOARD MEMBERS FOR REVIEW PRIOR TO FILING.

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.	Employer identification number 04-2464259
FORM 990, PART VI, SECTION B, LINE 12C:	
THE CHIEF EXECUTIVE OFFICER, FINANCE DIRECTOR, AND EXECUT	IVE COMMITTEE
MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTER	EST POLICY ON AN
ON GOING BASIS THROUGHOUT THE YEAR. THE CLUB DISCLOSES AN	Y RELATED PARTY
TRANSACTIONS IN THE ANNUAL FINANCIAL STATEMENTS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE EXECUTIVE COMMITTEE AND BOARD PRESIDENT REVIEW AND AP	PROVE OF THE CHIEF
EXECUTIVE OFFICER'S SALARY ANNUALLY. THE LEVEL OF COMPENS	ATION IS COMPARED
TO COMPARABLE ORGANIZATIONS WITHIN THE COMMUNITY AND WAGE	INFORMATION
RECEIVED FROM THE REGIONAL SERVICE DIRECTOR OF THE BOYS A	ND GIRLS CLUB OF
AMERICA.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE CLUB MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTER	REST POLICY, AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST	OF THE INTERESTED
PARTY.	
FORM 990, PAGE 12, PART XII, LINE 2C	
THERE WERE NO CHANGES TO THE ORGANIZATION'S OVERSIGHT PRO	CESS OR
SELECTION PROCESS DURING THE YEAR.	
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