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GOVERNMENT COPY



November 4, 2021

Girls on the Run of Buffalo, Inc. PO Box 1271 Buffalo, NY 14213

Dear Christie:

Enclosed are the original and one copy of the 2020 Exempt Organization returns, as follows...

2020 Form 990

2020 New York Form CHAR500

Form 990 must be made available for public inspection for a period of three years, beginning with the date the return is filed. The available document must be an exact copy of the return and schedules (including Schedule B), as filed with the IRS, except that the names and the addresses of the contributors may be excluded. Any organization that fails to comply with this provision is subject to a penalty of \$20 for each day that inspection is not permited, up to a maximum of \$10,000. Any organization that willfully fails to comply shall be subject to an additional penalty of \$5,000. You are also required to provide copies of the return if you receive such a request. Should you receive a request for inspection or for copies of your return, you may want to contact us for further details.

Estimated tax payments will not be necessary if your organization does not expect to have unrelated business taxable income. As a reminder, income from an unrelated trade or business (that is not substantially related to the organization's exempt purpose or function) is subject to income tax under Section 511 of the Internal Revenue Code.

To document the timely filing of your tax return(s), we suggest that you obtain and retain proof of mailing. Proof of mailing can be accomplished by sending the tax return(s) by registered or certified mail (metered by the U.S. Postal Service) or through the use of an IRS approved delivery method provided by an IRS designated private delivery service.

Any act of self-dealing, the making or retaining of excess business holdings, or jeopardizing investments, and the making of taxable expenditures may subject the foundation to penalty excise taxes of from 5% to 200% of the amount of the prohibited transaction. Please contact us for further information if you have questions concerning any of these prohibited transactions.

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files,

hemas Jonders

# TAX RETURN FILING INSTRUCTIONS

FORM 990

## FOR THE YEAR ENDING

June 30, 2021

## **Prepared For:**

Girls on the Run of Buffalo, Inc. PO Box 1271 Buffalo, NY 14213

## **Prepared By:**

Bonadio & Co., LLP 100 Corporate Parkway, Suite 200 Amherst, NY 14226

### Amount Due or Refund:

Not applicable

### Make Check Payable To:

Not applicable

## Mail Tax Return and Check (if applicable) To:

Not applicable

## Return Must be Mailed On or Before:

Not applicable

## **Special Instructions:**

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by November 15, 2021

## IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

Department of the Treasury

For calendar year 2020, or fiscal year beginning  $\underline{JUL 1}$  , 2020, and ending  $\underline{JUN 30}$  , 20 $\underline{21}$ 

Do not send to the IRS. Keep for your records.
 Go to www.irs.gov/Form8879EO for the latest information.



Internal Revenue Service

Name of exempt organization or person subject to tax

Taxpayer identification number

27-2193377

GIRLS ON THE RUN OF BUFFALO, INC.

Name and title of officer or person subject to tax

JULIA SPITZ OFFICER

(name of organization)

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, **5a**, **6a**, or **7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, **5b**, **6b**, or **7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here 🕨 🗴 b	To	tal revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	313,533.
2a	Form 990-EZ check here 🕨	b	Total revenue, if any (Form 990-EZ, line 9)	2b _	
3a	Form 1120-POL check here		b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _	
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)	5b _	
6a	Form 990-T check here	b	Total tax (Form 990-T, Part III, line 4)	6b _	
	Form 4720 check here	b	Total tax (Form 4720, Part III, line 1)	7b	
P	art II Declaration and Sig	jna	ture Authorization of Officer or Person Subject to Tax		

Under penalties of perjury, I declare that 🚺 I am an officer of the above organization or I am a person subject to tax with respect to

(EIN) \_\_\_\_\_ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

X I authorize BONADIO & CO.,	LLP	to enter my PIN	14052
	ERO firm name		Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax	Date 🕨
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	16575014226
	Do not enter all zeros
I certify that the above pameric entry is my PIN, which is my signature on the 2020 electro	nically filed return indicated above. I confirm
that I am submitting this return in accordance with the requirements of Pub. 4163, Mode	rnized e-File (MeF) Information for Authorized
IRS e-file Providers for Business Returns.	11/4/21
ERO's signature Nemos Jonders	Date ►
EDO At At Datain This Form Cos	Instructions
EROMust Retain This Form - See	
Do Not Submit This Form to the IRS Unless	Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2020)

023051 11-03-20

000		<b>~</b> ~	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047			
Form <b>990</b>			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		<b>2020</b>			
		••	Do not enter social security numbers on this form as it m					
Department of the Treasury Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and the la		Open to Public Inspection			
	A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021							
_	heck if		organization	D Employer identified	ation number			
	pplicab	le:	organization					
	Addre chang	GTRL	S ON THE RUN OF BUFFALO, INC.					
	Name		siness as	27-21933	77			
	Initial	·	and street (or P.O. box if mail is not delivered to street address) Room/s					
	Final	DO B	DX 1271	716-853-				
	returr termii ated		wn, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	315,192.			
	Amer		ALO, NY 14213	H(a) Is this a group re				
	returr Appli tion		d address of principal officer: JULIA SPITZ	for subordinates				
	pendi		AS C ABOVE	H(b) Are all subordinates in				
I T	ax-ex	empt status:			list. See instructions			
			GOTRBUFFALO.ORG	H(c) Group exemption				
		f organization:		Year of formation: 2010				
	rt I	Summary			- otato of logal dofficing			
	1	Briefly describ	e the organization's mission or most significant activities: THE ORGA	NIZATION PROVI	IDES A			
Ice	-		E YOUTH DEVELOPMENT PROGRAM WHICH COME					
Governance	2	Check this box						
ver	3	Number of vot		3	10			
ဗီ	4		ependent voting members of the governing body (Part VI, line 1b)		0			
Activities &	5		of individuals employed in calendar year 2020 (Part V, line 2a)		4			
/itie	6		of volunteers (estimate if necessary)		284			
ctiv	7a		business revenue from Part VIII, column (C), line 12		0.			
◄	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.			
				Prior Year	Current Year			
¢	8	Contributions	and grants (Part VIII, line 1h)	204,328.	211,008.			
ň	9	Program servio	e revenue (Part VIII, line 2g)	114,917.	91,117.			
Revenue	10	Investment inc	ome (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.			
æ	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,807.	11,408.			
	12	Total revenue	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	342,052.	313,533.			
	13	Grants and sin	nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.			
	14	Benefits paid t	o or for members (Part IX, column (A), line 4)	0.	0.			
es		Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)	215,084.	227,999.			
Expense	16a	Professional fu	ndraising fees (Part IX, column (A), line 11e)	0.	0.			
xpe	b	Total fundraisi	ng expenses (Part IX, column (D), line 25)					
Ш	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-24e)	148,467.	122,150.			
	18	Total expenses	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	363,551.	350,149.			
	19	Revenue less	expenses. Subtract line 18 from line 12	-21,499.	-36,616.			
s or Ices				Beginning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total assets (F	art X, line 16)	129,905.	108,657.			
t As	21		(Part X, line 26)	27,697.	43,065.			
			und balances. Subtract line 21 from line 20	102,208.	65,592.			
	rt II	Signature						
Unde	er pen	alties of perjury, l	declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of my	knowledge and belief, it is			

true, correct, and complete. Declaration of preparer (other than officer)	) is based on all information of which preparer has any knowledge.
---	--

Sign	Signature of officer			Date					
Here	JULIA SPITZ, OFFICER								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature formas	Date	Check	PTIN				
Paid	THOMAS LANDERS	, years for and	11/4/21	if self-employed	P00112255				
Preparer	Firm's name 🕨 BONADIO & CO., L	LP		Firm's EIN 🕨 16	-1131146				
Use Only	Firm's address 🖌 100 CORPORATE PARKWAY, SUITE 200								
AMHERST, NY 14226 Phone no. (716) 25									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions								
032001 12-2	Discoul 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)								
S	SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION								

Form	990 (2020) GIRLS ON THE RUN OF BUFFALO, INC.	27-2193377 Page 2
Par	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	Briefly describe the organization's mission:	
	GIRLS ON THE RUN OF BUFFALO, INC. COMBINES TRAINING FOR	A 5K (3.1
	MILES) RUNNING EVENT WITH HEALTHY LIVING EDUCATION, LIFE	SKILLS,
	DEVELOPMENT, MENTORING RELATIONSHIPS, AND PHYSICAL TRAIN	ING - ALL OF
	WHICH ARE ACCOMPLISHED THROUGH AN ACTIVE COLLABORATION W	
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
U	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	manaurad by avpapage
4		• •
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs, the total expenses, and
	revenue, if any, for each program service reported.	01 117
4a	(Code:) (Expenses \$ 254,576. including grants of \$) (Rever	nue\$JI,II/•_)
	DEVELOPMENT EDUCATION AND RUNNING TRAINING.	
4b	(Code:) (Expenses \$ including grants of \$) (Rever	
чы		lue \$ )
4c	(Code: ) (Expenses \$ including grants of \$ ) (Rever	nue\$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses ► 254, 576.	
		Form <b>990</b> (2020)
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	2	

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Form	990	(2020)
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 Form 990 (2020)
 GIRLS ON THE RUN OF BUFFALO, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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		<u> </u>
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	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,	_		x
~	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			x
~	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10		10		x
11	or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			- 23
	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
a		11a		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
5	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
Ŭ	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
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		X
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			
	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			
	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			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	
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032003 12-23-20

Form	990	(2020)
	330	(2020)

GIRLS ON THE RUN OF BUFFALO, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
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 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? 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			
	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		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part 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, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ ~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<b>v</b>
05 -	Part V, line 1	34		X 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	0.5%		
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?	26		x
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37		37		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	31		- 23
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O Tt V Statements Regarding Other IRS Filings and Tax Compliance Charle if Calastic Constraints and the constraints in this Dat V	1 00		L
			Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
		-		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Х Form 990 (2020)

1c

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032004 12-23-20

<u>Form 990 (2</u>							BUFFALO,		
Part V	Statements R	egarding	Othe	er IRS	Filings	s and	l Tax Complia	ince	(continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο		3b		L
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
	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?			<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	ie orga	inization solicit			v
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution of the state of			0		
7	were not tax deductible?			6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c). Did the complexitien receive a payment in excess of $$75$ mode partly as a contribution and partly for goods and call	nuiono r	vrovidad to the pover?	7-		x
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set If "Yes," did the organization notify the donor of the value of the goods or services provided?			7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		uired			
C	to file Form 8282?	asieq	uirea	7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		1 †?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri-			7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		x
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		4		
11	Section 501(c)(12) organizations. Enter:		1			
	Gross income from members or shareholders	11a		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b		1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		? 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			10-		
а				<u>13a</u>		
<b>۲</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
U	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	1			
c	Enter the amount of reserves on hand	130				
			I	14a		x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			<u> </u>		
	excess parachute payment(s) during the year?			15		x
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		х
	If "Yes," complete Form 4720, Schedule O.					

Form **990** (2020)

032005 12-23-20

Form 990	(2020)
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GIRLS ON THE RUN OF BUFFALO, INC.

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

X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

		1 1	4 . 🗖		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	0			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervisio	n			
	of officers, directors, trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	ļ	5		Х
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?	•	7	'a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		······	-		
Ň	persons other than the governing body?		7	'b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea		······   ·			
	The governing body?	, 0	6	Ba	x	
a b	Each committee with authority to act on behalf of the governing body?			sa Sb	X	
			······	u u		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					х
200	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		·····	9		Λ
bec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code.)				
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			0a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	• • •				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		·····	0b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before filing the	form?	1a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		1	2a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?		2b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "Y	′es," describe				
	in Schedule O how this was done		<u>1</u> ;	2c	X	
13	Did the organization have a written whistleblower policy?			3	X	
14	Did the organization have a written document retention and destruction policy?			4	Х	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	, i				
а	The organization's CEO, Executive Director, or top management official		1	5a	x	
	Other officers or key employees of the organization			5b		Х
	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 arrangen	nent with a				
			4	6a		Х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			Ja		27
U	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluat	• •				
				<b>C</b> L		
200	exempt status with respect to such arrangements?		<u>   1</u>	6b		
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ NY					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990-T (Section	501(c)(3)s or	nly) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
		n on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of interest p	olicy, and fin	anci	al	
	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 box MEGHAN CAVANAUGH - $716-853-6509$	oks and records	▶			
	232 MIDDLESEX ROAD, BUFFALO, NY 14216					
	ZJZ MIDDIESEK KORD, DUFFRIO, NI 14210					

Form 990 (2020)	GIRLS ON TH	E RUN OF	BUFFALO,	INC.	27-2193377	Page 7
Part VII Compensa	ation of Officers, Direc	tors, Truste	es, Key Emplo	oyees, Higł	nest Compensated	
Employee	s, and Independent Co	ntractors				
Check if Sche	edule O contains a response o	r note to any lir	ne in this Part VII			
Section A. Officers, Di	ectors, Trustees, Key Empl	oyees, and Hig	hest Compensate	ed Employees	5	
1a Complete this table for	r all persons required to be lis	ted. Report cor	npensation for the	calendar yea	r ending with or within the organization'	s tax year.
<ul> <li>List all of the organi</li> </ul>	zation's <b>current</b> officers, dire	ctors, trustees (	whether individual	s or organizat	tions), regardless of amount of compens	ation.
Enter -0- in columns (D), (B	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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Т

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	an	compensation	compensation	amount of
	week		cer ar	id a d	Irecto	r/trus	ee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC)		organization and related
	below	ual tr	tional		yolqr	st con vee	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) MEGHAN CAVANAUGH	1.00	_	_		-		<u> </u>			
BOARD MEMBER		х						72,583.	0.	0.
(2) KATHERINE G. JOYCE	1.00							-		
BOARD MEMBER		х						72,483.	Ο.	0.
(3) ANN JOYNT	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) CAITLIN ZULEWSKI	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) CHRISTIE NELSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) CHRISTINE TINNESZ	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) CHRISTINE VINCEK	1.00									
TREASURER		Х		Х				0.	0.	0.
(8) JOURDAN STEPHENSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) JULIA SPITZ	2.00									_
PRESIDENT		Х		Х				0.	0.	0.
(10) MEG GOMEZ	1.00									•
BOARD MEMBER		Х						0.	0.	0.
			-							
032007 12-23-20		_	_	_	_	_	_			Form <b>990</b> (2020)

032007 12-23-20

Form 990 (2020)

## 09591104 784124 GIR007001

	990 (2020) GIRLS ON	THE RUN	ΙC	)F	BU	FF	'AL	Ο,	INC.	27-21	933	377	Pa	age <b>8</b>
Par	t VII Section A. Officers, Directors, Tru	stees, Key Emp	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	<b>(B)</b> Average hours per week	box	not cl , unles	ss per	ition more rson i	than c s both pr/trust	n an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	1	an	(F) timate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS(		fr org and	pensa om the anizati d relate anizatio	e ion ed
			-											
											$\square$			
											$\dashv$			
											-			
			-											
	Subtotal								145,066.		0.			0.
	Total from continuation sheets to Part V Total (add lines 1b and 1c)								145,066.		0.			0.
2	Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable				0
3	Did the organization list any former office	r, director, truste	ee, k	key e	empl	oye	e, or	hig	hest compensated emp	loyee on	ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s											3		X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or											4		Х
	rendered to the organization? If "Yes," con											5		Х
<u>Sec</u>	tion B. Independent Contractors Complete this table for your five highest co	ompensated ind	lepe	nder	nt co	ontra	actor	rs th	nat received more than \$	100,000 of compe	ensat	ion fro	m	
	the organization. Report compensation for	the calendar ye	ear e	endin	ig w	ith c	or wi	thin I		ear.		10		
	(A) Name and busines	s address	NC	ONE	2				<b>(B)</b> Description of s	ervices	C	(C ompei	) nsatio	n
2	Total number of independent contractors \$\$100,000 of compensation from the organ		ot lin	nitec	to t	thos (		ted	above) who received mo	ore than				
													000 /	

032008 12-23-20

			GIRLS ON THE	RUN OF BU	JFFALO, INC	2.	27-2193	377 Page <b>9</b>
Pa	rt V							
			Check if Schedule O contains a response	or note to any line		(B)	(0)	
					( <b>A)</b> Total revenue	Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ខេត	1 :	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
۵. ۵	(	с	Fundraising events 1c					
ar /	(	d	Related organizations 1d					
ini, 0	(	е	Government grants (contributions) 1e	27,697.				
er S	1	f	All other contributions, gifts, grants, and					
Dthe				183,311.				
ontin	9	-	Noncash contributions included in lines 1a-1f		211 009			
<u>0</u>		h	Total. Add lines 1a-1f	Business Code	211,008.			
	<b>.</b>	-	PROGRAM SERVICES	900099	91,117.	91,117.		
vice	2 4	a b		500055	<i>J</i> <b>1</b> <i>7</i> <b>1</b> <i>77</i>	<u> </u>		
Ser		c						
		d						
Program Service Revenue		е						
Ţ	1	f	All other program service revenue					
	!	g	Total. Add lines 2a-2f		91,117.			
	3		Investment income (including dividends, intere					
			other similar amounts)					
	4 5		Income from investment of tax-exempt bond p					
	5		Royalties	(ii) Personal				
	6 8	а	Gross rents 6a					
			Less: rental expenses 6b					
	(		Rental income or (loss) 6c					
	(	d	Net rental income or (loss)	►				
	7 :	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a</b>					
0	I	b	Less: cost or other basis					
venue		_	and sales expenses 7b Gain or (loss)					
			Gain or (loss)					
Other Re			Gross income from fundraising events (not					
đ	•	-	including \$ of					
-			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b	1,659.				
				▶	11,408.			11,408.
	9 8	а	Gross income from gaming activities. See					
		h	Part IV, line 19     9a       Less: direct expenses     9b					
				<b>&gt;</b>				
	10		Gross sales of inventory, less returns					
			and allowances 10a	a				
		b	Less: cost of goods sold 10k					
			Net income or (loss) from sales of inventory	►				
S				Business Code				
eou	11 a							l
Miscellaneous Revenue		b						<u> </u>
Sce		с С						
ž			All other revenue	•				
	12	-	Total revenue. See instructions		313,533.	91,117.	0.	11,408.
03200	9 12-2	23-:			-	-		Form <b>990</b> (2020)

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<sup>032009 12-23-20</sup> 

 Form 990 (2020)
 GIRLS ON THE RUN OF BUFFALO, INC.

 Part IX
 Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in t			X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> 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				
	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	145,067.	101,547.	43,520.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	64,714.	64,714.		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	18,218.	12,753.	5,465.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	0 000		0.000	
С	Accounting	8,903.		8,903.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	10 115		10 115	
	column (A) amount, list line 11g expenses on Sch 0.)	<u>12,115.</u> 15,130.	15 120	12,115.	
12	Advertising and promotion	15,130.	15,130.		
13	Office expenses				
14	Information technology				
15	Royalties	8,111.		8,111.	
16	Occupancy	817.		817.	
17 10	Travel Payments of travel or entertainment expenses	01/•		017.	
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,305.		1,305.	
20	Interest	±,505•		±,505•	
20	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	10,092.	4,884.	5,208.	
24	Other expenses. Itemize expenses not covered		·		
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	5K RACE EXPENSES	28,451.	28,451.		
b	PARENT RUN EXPENSES	14,441.	14,441.		
с	TELEPHONE	4,723.		4,723.	
d	SUPPLIES	3,900.		3,900.	
е	All other expensesSEE_SCH_O	14,162.	12,656.	1,506.	
25	Total functional expenses. Add lines 1 through 24e	350,149.	254,576.	95,573.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				- 000
03201	0 12-23-20	10			Form <b>990</b> (2020)

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GIRLS	ON	THE	RUN	OF	BUFFALO,	INC.
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		Check if Schedule O contains a response or note	e to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		124,374.	1	108,657.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		176.	4	
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
		controlled entity or family member of any of thes	e persons		5	
	6	Loans and other receivables from other disqualif	ied persons (as defined			
		under section 4958(f)(1)), and persons described	l in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Š	9	Prepaid expenses and deferred charges		5,355.	9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line 1	11		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa		129,905.	16	108,657.
	17	Accounts payable and accrued expenses			17	640.
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete F		21		
ŝ	22	Loans and other payables to any current or form	er officer, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
iabi		controlled entity or family member of any of thes	e persons		22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties	27,697.	24	42,425.
	25	Other liabilities (including federal income tax, pay	yables to related third			
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D			25	
	26			27,697.	26	43,065.
(0		Organizations that follow FASB ASC 958, che	ck here 🕨 🔯			
čě		and complete lines 27, 28, 32, and 33.		100.000		65 500
Ilan	27	Net assets without donor restrictions		102,208.	27	65,592.
Ba	28	Net assets with donor restrictions			28	
ŭ		Organizations that do not follow FASB ASC 9	58, check here 🕨 🔛			
г		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
sse	30	Paid-in or capital surplus, or land, building, or eq			30	
ît A	31	Retained earnings, endowment, accumulated inc		100.000	31	
Ne	32	Total net assets or fund balances		102,208.	32	65,592.
	33	Total liabilities and net assets/fund balances		129,905.	33	108,657. Form <b>990</b> (2020)

Form 990 (2020)
Part X Balance Sheet

	990 (2020) GIRLS ON THE RUN OF BUFFALO, INC.	27-219	3377	Paç	<sub>ge</sub> 12
Pa	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		3 <b>,</b> 5:	
2	Total expenses (must equal Part IX, column (A), line 25)	2		),1	
3	Revenue less expenses. Subtract line 2 from line 1	3		-	16.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	102	2,2	08.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	65	5,5	92.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
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 reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	•			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		L
			Form	uun	$\langle n n n n \rangle$

Form **990** (2020)

SCHEDUL	E A.
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Department of the Treasury Internal Revenue Service

Total

(Form	990	or	990-EZ)
	550		550 LZ

## **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.

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

OMB No. 1545-0047
2020
Open to Public Inspection

Nam	me of the organization Employer identification number								
		GIRL	S ON THE R	UN OF BUFFAL	), INC	2.		2	7-2193377
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	IS.	
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	on of churches described	l in <b>sectio</b>	on 170(b)( <sup>.</sup>	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	<b>)(b)(1)(A)(i</b> i	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	l in sectio	on 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7	X	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 describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		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-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	eor
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	nip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	sses acqui	red by the ore	ganization a	after June 30, 1975.
		See section 509(a)(2). (Con	mplete Part III.)						
11		An organization organized a	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section	509(a)(3). (	Check the box in
	_	lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	l 12g.	
а		<b>Type I.</b> A supporting orga	anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), t	ypically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	ctors or truste	es of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		<b>Type II.</b> A supporting org	-				•		-
		control or management o			ame perso	ns that co	ntrol or mana	ge the supp	ported
		organization(s). You mus	-						
С		Type III functionally inte						lly integrate	ed with,
		its supported organization							
d		Type III non-functionally						-	
		that is not functionally int	• •		•		-	an attentiv	veness
		requirement (see instructi							
е		Check this box if the orga					Туре I, Туре	II, Type III	
		functionally integrated, or	• ·	nally integrated supporting	ng organiz	ation.			[
t		er the number of supported o	•						
<u> </u>		vide the following information i) Name of supported	i about the supporte	d organization(s).	(iv) Is the orga	anization listed	(v) Amount o	f monetary	(vi) Amount of other
	``	organization	() =	(described on lines 1-10	in your governi Yes	ing document?	support (see in	,	support (see instructions)
		•		above (see instructions))	Tes				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020 13

#### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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.)

Calendar year (or fiscal year beginning in)       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         1       Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         2       Tax revenues levied for the organization without charge furnished by a governmental unit to the organization without charge       (a) 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         3       The value of services or facilities furnished by a governmental unit to the organization without charge       (a) 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         5       The portion of total contributions by each person (other than a governmental unit or publicy support dorganization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7       Amounts from line 4       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         3       Gross income from mitterest, dividends, payments received on securities loans, rents, royalties, and income from similar sources are relyted to mitterest, dividends, payments received on the sale of capital asesets (Explain in Part VI)       (b) 2017       (									
membership fees received. (Do not include any 'unusual grants.')       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         3 The value of services or facilities furnished by a governmental unit to the organization without charge       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         Section B. Total Support         Calendary year (or fiscal year beginning in)         63,498.       86,874.       81,205.       204,328.       211,008.       646,913         Section B. Total Support         Calendary year (or fiscal year beginning in)         63,498.       86,874.       81,205.       204,328.       211,008.       646,913         Gotom from time 4         B voltice come from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ast									
include any *unusual grants.*)       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         2 Tax revenues levied for the organization without charge       a       a       b       a       a       b       a<									
2 Tax revenues levied for the organization is benefit and either paid to or expended on its behalf       Image: subject of the organization without charge         3 The value of services or facilities furnished by a governmental unit to the organization without charge       63, 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         4 Total. Add lines 1 through 3 governmental unit or publicly supported organization lincluded on line 1 that exceeds 2% of the amount shown on line 11, column (f)       646, 913         6 Public support. Subtractive 5 from line 4.       63, 498.       646, 874.       81, 205.       204, 328.       211, 008.       646, 913         Section B. Total Support       Calendar year (or fiscal year beginning in) >       63, 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         Section B. Total Support       Calendar year (or fiscal year beginning in) >       63, 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         6 A 498.       86, 874.       81, 205.       204, 328.       211, 008.       646, 913         9 Net income from initerest, dividends, payments received on securities loans, rents, royatties, and income from sintlerest, activities, whether or not the business activities, whether or not include gain or loss from the sale of capital assets (Explain in Part VI)       106.       318.       230.       6547, 567         12									
ization'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 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royatlies, and income from similar sources 9 Net income from uncelated 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) 11 Total support. Add lines 7 through 10 10 Gross receipts from related activities, etc. (see instructions) 12 10 10 10 20 20 20 20 20 20 20 20 20 2									
or expended on its behalf       3       The value of services or facilities furmished by a governmental unit to the organization without charge         4       Total. Add lines 1 through 3       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         5       The portion of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       646,913         6       Public support. Subtract line 5 from line 4       646,913         Section B. Total Support       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7       Amounts from line 4       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and lincome from similar sources activities, whether or not the business activities, whether or not the business activities, whether or not the business activities, whether or not include gain or loss from the sale of capital assets (Explain in Part VI)       106.       318.       230.       647,567         12       Cross receipts from related activities, etc. (see instructions)       12       12									
3 The value of services or facilities furmished by a governmental unit to the organization without charge       63,498.86,874.81,205.204,328.211,008.646,913         4 Total. Add lines 1 through 3       53,498.86,874.81,205.204,328.211,008.646,913         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       63,498.86,874.81,205.204,328.211,008.646,913         6 Public support. Subtract line 5 from line 4       63,498.86,874.81,205.204,328.211,008.646,913         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       9 Net income from unelated business activities, whether or not the business is regularly carried on file 3 through 10       106.318.230.6647,567         11 Total support 12       106.318.230.16654       647,567									
furnished by a governmental unit to the organization without charge       63,498.86,874.81,205.204,328.211,008.646,913         4 Total. Add lines 1 through 3       63,498.86,874.81,205.204,328.211,008.646,913         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       646,913         6 Public support. Subtract line 5 2% of the amount shown on line 11, column (f)       646,913         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         6 Public support. Subtract line 5 through 10       63,498.86,874.81,205.204,328.211,008.646,913         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         6 Gross income from interest, dividends, payments received on securities loars, ents, royalties, and income from similar sources       9         9 Net income from unrelated business activities, whether or not the business is regularly carried on ro loss from the sale of capital assets (Explain in Part VI)       106.318.230.       647,567         11 Total support. Adlines 7 through 10       106.54       12									
the organization without charge       4       Total. Add lines 1 through 3       63,498.86,874.81,205.204,328.211,008.646,913         5       The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6       646,913         6       Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support         Calendar year (or fiscal year beginning in) ►         7       Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         Section B. Total Support         Calendar year (or fiscal year beginning in) ►         7       Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         8       Gross income from tinerest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       9         9       Net income form unrelated business activities, whether or not the business is regularly carried on ito sit row time sale of capital assets (Explain in Par VI.)       106.318.230.       647,567         12       Total Support dot files 7 through 10									
4 Total. Add lines 1 through 3       63,498.86,874.81,205.204,328.211,008.646,913         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6         6 Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support       6466,913         Calendar year (or fiscal year beginning in) ►       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913       63,498.86,874.81,205.204,328.211,008.646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       9       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       106.318.230.       647,567       647,567         12       40.40 lines 7 through 10       647,567       12									
5       The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6       Public support.       646 , 913         Section B. Total Support       3       63,498 .       86,874 .       81,205 .       204,328 .       211,008 .       646 , 913         Section B. Total Support       63,498 .       86,874 .       81,205 .       204,328 .       211,008 .       646 , 913         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources activities, whether or not the business is regularly carried on       10       0 ther income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       106 .       318 .       230 .       647,567         12       406 .       518 .       12									
5       The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6       Public support       646,913         Section B. Total Support       3       63,498.86,874.81,205.204,328.211,008.646,913         Section B. Total Support       63,498.86,874.81,205.204,328.211,008.646,913         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources activities, whether or not the business is regularly carried on interest or loss from the sale of capital assets (Explain in Par VI.)       106.318.230.654         11       Total support Add lines 7 through 10       106.318.230.       647,567         12       400.318.218.218.218.218       12									
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governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6       6       6       6       6       6       6       6       6       6       6       6       6       6       6       6       6       9       6       7       Amounts from line 4       6       6       9       9       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7       Amounts from line 4       6       3       4       8       6       7       8       1       008       646,913         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       and i									
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6         6       Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support         Calendar year (or fiscal year beginning in) ►         7       Amounts from line 4       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         9       Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       106.       318.       230.       654         11       Total support. Add lines 7 through 10       106.       318.       230.       647.,567									
on line 1 that exceeds 2% of the amount shown on line 11, column (f)       6       9       6       Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support         Calendar year (or fiscal year beginning in) ►       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       63,498.86,874.81,205.204,328.211,008.646,913         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.)         106.318.230.         106.318.230.									
amount shown on line 11, column (f)       6       9       6       9       6									
column (f)       6       Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support       Calendar year (or fiscal year beginning in) ▶       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       9       Net income from unrelated business activities, whether or not the business is regularly carried on       10       0ther income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       106.       318.       230.       654         11 Total support. Add lines 7 through 10       647,567       12       Gross receipts from related activities, etc. (see instructions)       12									
6       Public support. Subtract line 5 from line 4.       646,913         Section B. Total Support         Calendar year (or fiscal year beginning in)       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       63,498.86,874.81,205.204,328.211,008.646,913       646,913         9       Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       106.318.230.       654         11       Total support. Add lines 7 through 10       647,567         12       Gross receipts from related activities, etc. (see instructions)       12									
Section B. Total Support         Calendar year (or fiscal year beginning in) ▶       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       63,498.86,874.81,205.204,328.211,008.646,913         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       106.318.230.       654         11 Total support. Add lines 7 through 10       647,567       12									
Calendar year (or fiscal year beginning in)       (a) 2016       (b) 2017       (c) 2018       (d) 2019       (e) 2020       (f) Total         7 Amounts from line 4       63,498.       86,874.       81,205.       204,328.       211,008.       646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       9       Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       106.       318.       230.       654         11 Total support. Add lines 7 through 10       647,567       12       Gross receipts from related activities, etc. (see instructions)       12									
7 Amounts from line 4       63,498.86,874.81,205.204,328.211,008.646,913         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       63,498.86,874.81,205.204,328.211,008.646,913         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       106.318.230.       654         11 Total support. Add lines 7 through 10       106.318.230.       12									
8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       Image: Comparison of the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       Image: Comparison of the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       Image: Comparison of the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       Image: Comparison of the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       Image: Comparison of the business is regularly carried on comparison of the sale of capital assets (Explain in Part VI.)       Image: Comparison of the business is regularly carried on comparison of the sale of capital assets (Explain in Part VI.)       Image: Comparison of the comparison of the sale of capital assets (Explain in Part VI.)       Image: Comparison of the comparison of the sale of capital assets (Explain in Part VI.)       Image: Comparison of the comparison of the co									
dividends, payments received on securities loans, rents, royalties, and income from similar sources       Image: Comparison of the sources of the									
securities loans, rents, royalties, and income from similar sources 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.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12									
and income from similar sources									
9 Net income from unrelated business activities, whether or not the business is regularly carried on									
activities, whether or not the business is regularly carried on									
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10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       106.318.230.654         11 Total support. Add lines 7 through 10       647,567         12       12									
or loss from the sale of capital assets (Explain in Part VI.) 106. 318. 230. 654 11 Total support. Add lines 7 through 10 647, 567 12 Gross receipts from related activities, etc. (see instructions) 12									
assets (Explain in Part VI.)106.318.230.65411Total support. Add lines 7 through 10647,567647,56712Gross receipts from related activities, etc. (see instructions)12									
11 Total support. Add lines 7 through 10       647,567         12 Gross receipts from related activities, etc. (see instructions)       12									
12 Gross receipts from related activities, etc. (see instructions)									
<b>13</b> First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)									
organization, check this box and stop here									
Section C. Computation of Public Support Percentage         14       Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))       14       99.90									
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and									
stop here. The organization qualifies as a publicly supported organization									
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box									
and <b>stop here.</b> The organization qualifies as a publicly supported organization									
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,									
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization									
meets the facts and circumstances test. The organization qualifies as a publicly supported organization									
h 10% -facts-and-circumstances test - 2019 If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the									
•									

Schedule A (Form 990 or 990-EZ) 2020

032022 01-25-21

#### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, 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 qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
6 Total. Add lines 1 through 5							
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	8 Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6		(-,	() =	(.,	(-,	()
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for th	ne organization's fi	rst. second. third.	fourth. or fifth tax	vear as a section 5	01(c)(3) organiza	ation.
Sec	ction C. Computation of Publi						
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16	Public support percentage from 2019	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	<b>)20</b> (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
18	Investment income percentage from	2019 Schedule A,	Part III, line 17			18	%
19a	<b>33 1/3% support tests - 2020.</b> If the	organization did n	not check the box	on line 14, and lin	e 15 is more than 3	3 1/3%, and line	e 17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	lifies as a publicly	supported organiza	ition	
b	33 1/3% support tests - 2019. If the	organization did n	not check a box o	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%	, and
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	op here. The org	anization qualifies	as a publicly suppo	orted organizatio	n ►
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t	his box and see ins	tructions	
03202	23 01-25-21				Sch	edule A (Form 9	990 or 990-EZ) 2020
			15	5			

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2020

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### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC.

		19337	1 Pa	ige <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, 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.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	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 <b>Part VI</b> how			
		2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a	~		
5	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 <b>Part VI</b> the role the organization's	2		
Sec	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	•]•		
a b				
a	ine organization is the parent of each of its supported organizations. Complete line 3 below.			

с	The organization	supported a g	governmental entity.	Describe in	Part VI how you supp	oorted a governmental e	ntity (see instruction <u>s).</u>

- 2 Activities Test. Answer lines 2a and 2b below.
- 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.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b 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? *If* "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

2a

2b

3a

3b

Yes No

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_	dule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFF.			27-2193377 Page 6
Pa				<b>D</b>
1	Check here if the organization satisfied the Integral Part Test as a qualifying t		•	Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations must c	omplet	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2020

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## Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC.

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	inizations <sub>(continu</sub>	ued)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.	7			
8	Distributions to attentive supported organizations to which the				
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	Generation Contractions (see instructions)       (i)       (ii)         Generation E - Distribution Allocations (see instructions)       Excess Distributions       Underdistribution         Pre-2020       Pre-2020       Pre-2020				(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
_j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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Part VI     Supplemental Information. Provide the explanations required by Part II, line 10: Part II, line 17: and 17: EPart III, Section A, lines 12: AB, 36: AB, 45: AB, 41: The and 11: Part IV Section A, lines 12: AB, 36: AB, 45: AB, 41: The and 11: Part IV Section A, lines 12: AB, 36: AB, 45: AB, 41: The and 11: Part IV Section A, lines 12: AB, 37: AB, 45: AB, 45: AB, 41: The and 11: Part IV Section A, lines 12: AB, 43: AB, 45: AB, 45: AB, 41: The and 11: Part IV Section A, lines 12: AB, 43: AB, 45: AB, 45: AB, 41: The and 12: Part IV, Section A, lines 12: AB, 43: AB, 45: AB, 45	Schedule A	(Form 990 or 990-E	<u>z) 20</u> 20 GI	RLS	ON T	ΗE	<u>R</u> UN	OF	BUE	FALO	, IN	с.		<u>2</u> 7-2	193377	Page 8
See instructions.)	Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sec	Informat lines 1, 2, 3 tion D, lines	<b>ion.</b> Pr b, 3c, 4t 2 and 3;	ovide the o, 4c, 5a, Part IV,	e exp , 6, 9a Sect	lanation a, 9b, 9c ion E, lir	s requ , 11a, nes 1c,	ired by 11b, a , 2a, 2l	/ Part II, li and 11c; F b, 3a, and	ine 10; F Part IV, S d 3b; Pa	Part II, line Section B rt V, line 1	, lines 1 ; Part V,	17b; Parl and 2; Pa Section	: III, line 12; art IV, Sectic B, line 1e; F	on C,
		Section D, lines 5, (See instructions.)	6, and 8; an	d Part V	, Sectior	n E, lir	nes 2, 5,	, and 6	5. Also	complete	e this pa	rt for any	addition	al inform	ation.	
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Schedule A (Form 990 or 990-EZ) 202																
Cazza 01-5-21 Schedule A (Form 990 or 990-EZ) 202																
2022 01-5-21 Schedule A (Form 990 or 990-EZ) 202																
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# Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Employer identification number

L

Name of the organizatio	n	Employer identification number
	GIRLS ON THE RUN OF BUFFALO, INC.	27-2193377
Organization type (chee	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, ,	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	Rule. See instructions.
For an organiza	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totali any one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a) any one contril	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppo )(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 butor, during the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the am 0-EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from
contributor, du literary, or educ	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from rring the year, total contributions of more than \$1,000 exclusively for religious, charitable, cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I in (b) instead of the contributor name and address), II, and III.	scientific,
For an organiza	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	n any one contributor, during the

year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B	(Form 9	990,	990-EZ,	or 990-P	F) (	(2020)
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Name of organization

Employer identification number

27-2193377

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WOMEN'S SPORTS FOUNDATION 247 WEST 30TH STREET, 5TH FLOOR NEW YORK, NY 10001	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	RALPH C. WILSON, JR. FOUNDATION 3101 EAST GRAND BOULEVARD, SUITE 200 DETROIT, MI 48202	\$ <u>113,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DICKS SPORTING GOODS 345 COURT STREET CORAOPOLIS, PA 15108	\$ <u>    10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	GIRLS ON THE RUN INTERNATIONAL P.O. BOX 30667 PMB 65493 CHARLOTTE, NC 28230	\$10,087.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	HEALTHNOW NEW YORK 257 WEST GENESEE STREET BUFFALO, NY 14202	\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
023452 11-2	WEGMANS FOOD MARKETS 1500 BROOKS AVENUE ROCHESTER, NY 14624	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2020)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

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Name of organization

Employer identification number

27-2193377

GIRLS ON THE RUN OF BUFFALO, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

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Schedule B (Form 990,	990-F7	or 990-PF) (2020)
Schedule B (Form 330,	990-EZ,	01 990-FF) (2020)

Page	4

No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (e) Transfer of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held         (e) Transfer of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held         (h) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (h) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (h) Purpose of gi	ame of org	ganization		Employer identification numb								
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			(e) Transfer of gi	ift								
		Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee								
	F											
	154 11-25-2	20		Schedule B (Form 990, 990-EZ, or 990-PF) (2								

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SCHEDULE G	Suppleme	ntal Info	rmatio	on Re	egarding	Fund	raisi	ng or Gaming A	ctiv	/ities	OMB No. 1545-0047		
(Form 990 or 990-EZ) 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.										, or if the	2020		
	L L	organizatio			o Form 990						Open to Public		
Department of the Treasury Internal Revenue Service	► Go	to www.ir						the latest informati	on.		Inspection		
Name of the organization	ו										lentification number		
Dent L. Frankreis	GIRLS O									27-219			
	complete this part		if the o	rganiz	ation answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	EZ filers are not		
1 Indicate whether th	i		hrough a	any of	the followin	g activ	ities. (	Check all that apply.					
a 📃 Mail solicitat			-	e				overnment grants					
	email solicitations	i		f				nment grants					
c Phone solici				g∟	Special	fundra	ising	events					
d In-person so <b>2 a</b> Did the organization		r oral agree	amont w	vith an	v individual	(includ	ina of	ficere directore true	toos	or			
								undraising services?	lees		es 🗌 No		
<b>b</b> If "Yes," list the 10		-	-		-			-	he fu				
compensated at le	ast \$5,000 by the	organizatio	on.										
						(iii)	Did		(v)	Amount paid			
(i) Name and addres or entity (fund			(ii) Ac	tivity		(iii) fundr have ci or con	ustody	(iv) Gross receipts from activity	tò (	or retained by fundraiser	(or retained by)		
or oriting (func						contrib		non douvry	lis	sted in col. (i)	organization		
						Yes	No						
Total													
3 List all states in whi					d to solicit d	contrib	utions	or has been notified	it is	exempt from	registration		
or licensing.	-	-											
LHA For Paperwork Re	eduction Act Noti	ce, see the	e Instru	ctions	for Form 9	990 or	990-E	Z. 9	Sche	edule G (Form	990 or 990-EZ) 2020		

032081 11-25-20

Schedule G	(Form 990 or 990-EZ) 2020	GIRLS	ON	$\mathbf{THE}$	RUN	OF	BUFFALO,	INC.	27-2193377	Page <b>2</b>
Part II	Fundraising Events	Complete it	f tha a	ragniza	tion ane	worod	"Ves" on Form 00	0 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.

		or rundraising event contributions and gre			wente with groot receipt	5 greater than \$0,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			5K RACE			col. (c))
Ð			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	13,067.			13,067.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	13,067.			13,067.
	4	Cash prizes				
Se	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				1,659.
	-	Direct expense summary. Add lines 4 through		II		1,659.
	11	Net income summary. Subtract line 10 from li	.,			11,408.
Pa	irt I	II Gaming. Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or r	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re∕		0				
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			<b>Yes</b> %	<b>Yes</b> %	<b>Yes</b> %	
	6	Volunteer labor	No	No	Νο	
	7	Direct expense summary. Add lines 2 through	1 5 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)		•	
	0	Net gaming income summary. Subtract line r				<u> </u>
		ter the state(s) in which the organization condu the organization licensed to conduct gaming ac		states?		Yes No
		No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax v	vear?	Yes No
		Yes," explain:				
					Sahadula C /Fay	
0320	32 11	I-25-20			Schedule G (For	m 990 or 990-EZ) 2020

Sch	edule G (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC. 27-2	193377	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No 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 No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15-	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
156	Toos the organization have a contract with a tintu party non-whom the organization receives gaming revenue?	103	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming 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		
	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to		<b>—</b>
	retain the state gaming license?	Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Pa	organization's own exempt activities during the tax year <b>s \$</b> Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	t III lines 9	9h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, III 103 0,	55, 105,
0320	83 11-25-20 Schedule G (Forn	1 990 or 990	-EZ) 2020
	27		

Schedule G	(Form 990 or 990-EZ)	GIRLS	ON 7	$\mathbf{THE}$	RUN	OF	BUFFALO,	INC.	27-2193377	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (co	ontinued	1)						
				/						
									Pahadula O /Farm 000	
									Schedule G (Form 990 or	' 990-EZ)

032084 04-01-20

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Name of the organization

## 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. ► Go to www.irs.gov/Form990 for the latest information.



GIRLS ON THE RUN OF BUFFALO, INC.

Employer identification number 27-2193377

## FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CURRICULUM AND RUNNING TO INSPIRE SELF-RESPECT AND HEALTHY LIFESTYLES

IN PRE-TEEN GIRLS. THE PROGRAM ADDRESSES MANY ASPECTS OF GIRLS'

DEVELOPMENT - THEIR PHYSICAL, EMOTIONAL, MENTAL, AND SOCIAL WELL-BEING.

LESSONS ADMINISTERED PROVIDE GIRLS WITH THE TOOLS TO MAKE POSITIVE

DECISIONS AND TO AVOID RISKY ADOLESCENT BEHAVIORS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THEIR PARENTS, SCHOOLS, VOLUNTEERS, STAFF, AND THE COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS.

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

DRAFT IS REVIEWED AT MEMBER MEETING PRIOR TO FILING RETURN.

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

POLICY IS REVIEWED AT MEMBER MEETING.

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

OFFICER SALARIES ARE APPROVED BY THE BOARD DURING THE BUDGETING PROCESS.

THE SALARIES ARE INCREASED BY A COST OF LIVING ADJUSTMENT ANNUALLY AS WELL

AS DISCRETIONARY INCREASES DECIDED UPON BY BOARD VOTE.

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

UPON REQUEST

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 932211

 032211
 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

29

Schedule O (Form 990 or 9	990-EZ) 2020							Page 2
Name of the organization	GIRLS	ON	THE	RUN	OF	BUFFALO,	INC.	Employer identification number $27 - 2193377$

PRINTING, PUBLICATIONS, POSTAGE & SHIPPING:	
PROGRAM SERVICE EXPENSES	2,958.
MANAGEMENT AND GENERAL EXPENSES	779.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,737.
SNEAKERS:	
PROGRAM SERVICE EXPENSES	3,084.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,084.
T-SHIRTS:	
PROGRAM SERVICE EXPENSES	2,530.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,530.
COACH EXPENSES:	
PROGRAM SERVICE EXPENSES	2,228.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,228.
FOOD AND BEVERAGE:	
	0.4.4

# PROGRAM SERVICE EXPENSES

032212 11-20-20

Name of the organization GIRLS ON THE RUN OF BUFFALO, INC.	Employer identification number 27-2193377
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	944.
FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	727.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	727.
MERCHANDISE:	
PROGRAM SERVICE EXPENSES	352.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	352.
BACKGROUND CHECKS:	
PROGRAM SERVICE EXPENSES	283.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	283.
CPR TRAINING:	
PROGRAM SERVICE EXPENSES	277.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	277.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

STATE COPY

## TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

#### FOR THE YEAR ENDING

June 30, 2021

#### **Prepared For:**

Girls on the Run of Buffalo, Inc. PO Box 1271 Buffalo, NY 14213

#### **Prepared By:**

Bonadio & Co., LLP 100 Corporate Parkway, Suite 200 Amherst, NY 14226

#### Amount of Tax:

Balance due of \$75

#### Make Check Payable To:

Department of Law

#### Mail Tax Return To:

NYS Office of Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

#### Return Must Be Mailed On Or Before:

November 15, 2021

#### **Special Instructions:**

The report should be signed and dated by an authorized individual(s).

New York Form CHAR500 reports should also be filed with the Department of State via the web at: Https://my.ny.gov/

The attached copy of the federal Form 990 must be properly signed and dated.

# **CHAR500**

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

**Open to Public** Inspection

1.General Informati	on						
For Fiscal Year Beginning	g (mm/dd/yyyy)	07/01/202	0 and Ending	(mm/dd/yyyy) 06/30	/2021		
Check if Applicable: Address Change	Name of Organi GIRLS O		OF BUFFALO	, INC.	Employer Identification Number (EIN): 27-2193377		
Name Change Initial Filing	Mailing Address PO BOX 1	:		-	NY Registration Number: 42-57-17		
Final Filing Amended Filing	Final Filing     City / State / ZIP:     Telephone:						
Reg ID Pending	Website:	RBUFFALO.O			Email:		
Check your organization's							
registration category:	7A only	EPTL only	X DUAL (7A 8	EXEMPT*	Confirm your Registration Category in the Charities Registry at <u>www.CharitiesNYS.com</u> .		
2. Certification							
See instructions for certifities two signatories.	cation requireme	nts. Improper certif	fication is a violation	of law that may be subjec	t to penalties. The certification requires		
We certify under p	enalties of periur	v that we reviewed	this report including	all attachments and to th	he best of our knowledge and belief,		
				of the State of New York	applicable to this report.		
President or Authorized	Officer			JULIA SPI' OFFICER	12		
Tresident of Authonized		gnature			me and Title Date		
Chief Financial Officer or	Treasurer:						
	Siç	gnature		Print Na	me and Title Date		
3. Annual Reporting	g Exemption						
Check the exemption(s) the	nat apply to your	filing. If your organ	ization is claiming ar	exemption under one ca	tegory (7A or EPTL only filers) or both		
categories (DUAL filers) th	nat apply to your	registration, comple	ete only parts 1, 2, a	nd 3, and submit the cert	ified Char500. No fee, schedules, or		
additional attachments ar	e required. If you	cannot claim an ex	emption or are a DL	JAL filer that claims only o	ne exemption, you must file applicable		
schedules and attachmer	nts and pay applie	cable fees.					
3a. 7A filin	g exemption: To	tal contributions fro	m NY State includin	g residents, foundations,	government agencies, etc. did not		
exceed \$2	5,000 <u>and</u> the or	ganization did not e	engage a professiona	al fund raiser (PFR) or fund	d raising counsel (FRC) to solicit		
contributio	ons during the fis	cal year.					
		Gross receipts did	not exceed \$25,000	and the market value of a	ssets did not exceed \$25,000 at any time		
during the fiscal year.							
4. Schedules and A	ttachments						
See the following page							
for a checklist of	Yes X I	No 4a. Did your or	ganization use a pro	fessional fund raiser, fund	d raising counsel or commercial co-venturer		
schedules and				? If yes, complete Schedu			
attachments to							
complete your filing. X Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.							
5. Fee							
See the checklist on the	7A filing fe	e: EP1	TL filing fee:	Total fee:			
	ũ	e: EPT	ΓL filing fee:	Total fee:	Make a single check or money order		
See the checklist on the	ũ	e: EP	TL filing fee:	Total fee:	Make a single check or money order payable to: <b>"Department of Law"</b>		

CHAR500 Annual Filing for Charitable Organizations (Updated January 2021)

\*The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

068451 01-07-21 1019

Page 1

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#### GIRLS ON THE RUN OF BUFFALO, INC.

CHAR500
Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
Your organization is registered as DUAL and you marked <u>both</u> the 7A and EPTL filing exemption in Part 3.

#### **Checklist of Schedules and Attachments**

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- X If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable

All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.

Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

X Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.

Audit Report if you received total revenue and support greater than \$750,000

No Review Report or Audit Report is required because total revenue and support is less than \$250,000

We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

#### **Calculate Your Fee**

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- X \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b
\$25, if the NET WORTH is less than \$50,000
$\fbox$ \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
\$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
\$1500, if the NET WORTH is \$50,000,000 or more

#### Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com Call: (212) 416-8401 Email: Charities.Bureau@ag.ny.gov Is my Registration Category 7A, EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

**7A** filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

**EPTL** filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

**EXEMPT** filers have registered with the NY Charities Bureau and meet conditions in <u>Schedule E - Registration</u> <u>Exemption for Charitable Organizations</u>. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at <u>www.CharitiesNYS.com.</u>

Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

068461 01-07-21 1019 CHAR500 Annual Filing for Charitable Organizations (Updated January 2021)

2

2020.05000 GIRLS ON THE RUN OF BUFFA GIR00701

# **CHAR500**

**Open to Public** Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

#### 1. Organization Information Name of Organization: NY Registration Number: GIRLS ON THE RUN OF BUFFALO, INC. 42-57-17 2. Government Grants Name of Government Agency Amount of Grant 1. SBA PPP LOAN FORGIVENESS 27,697. 1 2. 2. З. 3. 4. 4 5. 5. 6. 6. 7. 7. 8. 8. 9. 9. 10. 10. 11. 11. 12. 12. 13. 13. 14. 14.

Total Government Grants: Total:

Page 1

27,697.

15.

15.

# GIRLS ON THE RUN OF BUFFALO, INC. FINANCIAL STATEMENTS For the Years Ended June 30, 2021 and 2020

### TABLE OF CONTENTS

Independent Accountant's Review Report	1
Statement of Financial Position	2
Statement of Activities	3
Statement of Cash Flows	4
Statements of Functional Expenses	5 - 6
Notes to Financial Statements	7 - 10

# Peter D. Stevanoff

Certified Public Accountant 3368 Nash Road, Hamburg, NY 14075

#### INDEPENDENT ACCOUNTANT'S REVIEW REPORT

To the Board of Directors of Girls on the Run of Buffalo, Inc.

I have reviewed the accompanying financial statements of Girls on the Run of Buffalo, Inc. (a nonprofit organization), which comprise the statement of financial position as of June 30, 2021 and 2020 and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, I do not express such an opinion.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

#### Accountant's Responsibility

My responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require me to perform procedures to obtain limited assurance as a basis for reporting whether I am aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. I believe that the results of my procedures provide a reasonable basis for my conclusion.

#### Accountant's Conclusion

Based on my review, I am not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Henry

Peter D. Stevanoff, CPA

Hamburg, NY October 11, 2021

#### GIRLS ON THE RUN OF BUFFALO, INC. Statement of Financial Position as of June 30,

Assets	2021	 2020
<u>Current Assets</u> Cash Accounts Receivable Prepaid Expenses Total Current Assets	\$ 108,657 - - 108,657	\$ 124,374 176 5,355 129,905
Total Assets	\$ 108,657	\$ 129,905
<u>Liabilities and Net Assets</u> <u>Current Liabilities</u> Customer Deposit Total Current Liabilities	\$ <u>640</u> 640	\$ 
<u>Long Term Liabilities</u> Paycheck Protection Program Loan Total Long Term Liabilities Total Liabilities	 42,425 42,425 43,065	 27,697 27,697 27,697
<u>Net Assets</u> Unrestricted Net Assets Total Liabilities and Net Assets	\$ 65,592	\$ 102,208

See Accompanying Notes and Independent Accountant's Review Report

#### GIRLS ON THE RUN OF BUFFALO, INC. Statement of Activities for the years ended June 30,

		2021		-	2020
Revenue, Gains, and Other Support					
Contributions, Gifts and Grants	\$	183,311		\$	204,328
Program Service Revenue		91,117			114,917
Gross Income from Fundraising Events 13,067			27,044		
Less: Direct Expenses from Fundraising Events 1,659	_	11,408	4,237		22,807
Miscellaneous Income		27,697			8 <b>7</b> .(
Total Revenue, Gains, and Other Support	\$	313,533		\$	342,052
Expense					
Program Services	\$	70,754		\$	96,871
Office Supplies and Expense		17,384			15,215
Printing, Publications, Postage and Shipping		780			871
Insurance		10,092			10,673
Professional Services		21,018			21,187
Salaries and Benefits		227,999			215,085
Travel and Meeting Expenses	-	2,122			3,649
Total Expense		350,149			363,551
Change in Net Assets		(36,616)			(21,499)
Unrestricted Net Assets, Beginning of Year		102,208			123,707
Unrestricted Net Assets, End of Year	\$	65,592		\$	102,208

#### GIRLS ON THE RUN OF BUFFALO, INC. Statement of Cash Flows for the years ended June 30,

	-	2021	0	2020
Net Cash Flows From Operating Activities:				
Increase/(Decrease) in Net Assets	\$	(36,616)	\$	(21,499)
Decrease/(Increase) in Accounts Receivable		176		32,447
Decrease/(Increase) in Prepaid Expenses		5,355		(5,355)
Net Cash Flow Provided by Operating Activities		(31,085)	0	5,593
Net Cash Flow From Financial Activities:				
Increase/(Decrease) in Credit Cards Payable		-		(1,525)
Increase/(Decrease) in Customer Deposit		640		5 <b>7</b> 5
Increase/(Decrease) in Loans Payable	2	14,728	Ø	27,697
Net Cash Flow Provided by Financing Activities		15,368	8= 8=	26,172
Net Increase in Cash	\$	(15,717)	\$	31,765
Cash, Beginning of Year	n	124,374	2	92,609
Cash, End of Year	\$	108,657	\$	124,374

#### GIRLS ON THE RUN OF BUFFALO, INC. Statement of Functional Expenses for the year ended June 30, 2021

	Program Services			Supporting	Services			
			Printing, Publicati	on				
	Program	<u>Office</u>	Postage and		Professional	Salaries and	Travel and	
	Expenses	<u>Expense</u>	<u>Shipping</u>	<u>Insurance</u>	Services	<b>Benefits</b>	Meetings	Tota
5K Race Expenses	\$ 13,208						\$	13,208
Bank and Credit Card Fees		652						652
Coach Expenses	2,228							2,228
Curricula and Related	2,958							2,958
Delivery and Garbage		211						211
General Insurance				6,513				6,513
Legal and Accounting					8,903			8,903
Licensing					10,544			10,544
Marketing and Outreach	15,130				,			15,130
Meeting Expenses	,						1,305	1,305
Mileage							817	817
NY State Filing Fee	75							75
Office Expense - Other		596						596
Office Rent		7,800						7,800
Parent Program	14,440	.,						14,440
Postage and Shipping	,		764					764
Printing and Copying			16					16
Program Expenses	17,101		10					17,101
Salaries and Benefits	17,101					227,999		227,999
Sneakers	3,084					221,555		3,084
Supplies	0,004	3,303						3,303
Telephone		4,723						4,723
Travel		4,720					-	4,720
T-Shirts	2,530							2,530
Utilities	2,000	99						2,530
Volunteer Appreciation		33						95
Website and Hosting	-				1,571			1,571
Workers Compensation Insurance				2 570	1,071			
				3,579				3,579
otal	\$ 70,754 \$	17,384	\$ 780 \$	10,092	\$ 21,018	\$ 227,999	\$ 2,122 \$	350,149
		11,004	φ 100 q	10,002	Ψ 21,010	Ψ 221,000 (	$\varphi = z_1 + z_2 = \psi$	000,148

See Accompanying Notes and Independent Accountant's Review Report

#### GIRLS ON THE RUN OF BUFFALO, INC. Statement of Functional Expenses for the year ended June 30, 2020

	Program Services			Supporting	Services			
			Printing, Publicat	ion				
	Program	<u>Office</u>	Postage and		Professional	Salaries and	Travel and	
	Expenses	<u>Expense</u>	Shipping	<u>Insurance</u>	<u>Services</u>	<u>Benefits</u>	Meetings	Total
5K Race Expenses	\$ 20,289						\$	20,289
Bank and Credit Card Fees		644						644
Coach Expenses	9,646							9,646
Curricula and Related	6,896							6,896
Delivery and Garbage		269						269
General Insurance				6,214				6,214
Legal and Accounting					6,975			6,975
Licensing					11,555			11,555
Marketing and Outreach	1,452				,			1,452
Meeting Expenses	,						2,114	2,114
Mileage							1,305	1,305
NY State Filing Fee	125						.,	125
Office Expense - Other		155						155
Office Rent		7,800						7,800
Parent Program	5,586	.,						5,586
Postage and Shipping	0,000		732					732
Printing and Copying			139					139
Program Expenses	43,141		100					43,141
Salaries and Benefits	10,111					215,085		215,085
Sneakers	4,621					210,000		4,621
Supplies	1,021	1,546						1,546
Telephone		4,683						4,683
Travel		-1,000					230	230
T-Shirts	2,802						250	2,802
Utilities	2,002	118						2,802
Volunteer Appreciation	2,313	110						2,313
Website and Hosting	2,010				2,657			2,657
Workers Compensation Insurance				4,459	2,007			4,459
Workers Compensation insurance				4,439				4,409
Total	\$ 96,871 \$	15,215	\$ 871 \$	\$ 10,673	\$ 21,187	\$ 215,085	\$ 3,649 \$	363,551

See Accompanying Notes and Independent Accountant's Review Report

#### **NOTE 1- NATURE OF ACTIVITIES**

Girls on the Run of Buffalo, Inc. (the Organization) is an Independent Council of Girls on the Run International. The Organization provides a program for girls that combines training for a 5k (3.1 miles) running event with healthy living education, life skills development, mentoring relationships and physical training – all of which are accomplished through an active collaboration with girls and their parents, schools, volunteers, staff and the community.

#### NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

This summary of significant accounting policies of Girls on the Run of Buffalo, Inc. is presented to assist in understanding the Organization's financial statements. The financial statements and notes are representations of the Organization's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

#### Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables and other liabilities.

#### Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Tax Status

The Organization is a non-profit organization that is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code.

#### Cash, Cash Equivalents and Marketable Securities

Cash and cash equivalents consist of cash on hand, and cash in bank. The Organization considers all highly liquid debt instruments with original maturities of 3 months or less to be cash or cash equivalents.

#### NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

#### Accounts Receivable

Accounts receivable are stated at unpaid balances, less an allowance for uncollectible accounts. Management provides for probable uncollectible amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on experience, third-party contracts and other circumstances. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable.

#### Revenue Recognition

Revenue is recognized when it is earned and expenses when they are incurred.

#### Financial Statement Presentation

The Organization now reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

#### Net Assets without Donor Restrictions

These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services, raising contributions, and performing administrative functions.

#### Net Assets with Donor Restriction

These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted. Net Assets received with such restrictions are recorded "with donor restrictions," if applicable.

#### Contributions and Grant Revenues

Contributions received are recorded in net assets without donor restrictions or net assets with donor restrictions depending on the existence of any donor restrictions. When restrictions expire (that is, when a stipulated restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions. To the contrary, restrictions on contributions of property or equipment or on assets restricted to acquiring property expire when the property or equipment is placed in service. Grant revenues are recognized when the terms of the grants have been fulfilled.

#### NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

#### **Expense Allocations**

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities. Accordingly, certain costs have been allocated among the programs and supporting services benefitted. Detail on these allocations is provided in the Statement of Functional Expenses.

#### Donated Services

No amounts have been reflected in the financial statements for donated services. The Organization generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Organization, but these services do not meet the criteria for recognition as contributed services. The Organization receives a substantial amount of donated services.

#### Scholarships Awards and Financial Aid

The Organization awards scholarships and financial aid to girls in need to cover the costs of participation in the program. These awards are nonmonetary in nature and represent a waiver of registration fees. Management estimates that the Organization awarded scholarships and financial aid to 264 girls, valued at approximately \$43,560. No amounts have been reflected in the financial statements for these scholarship awards and financial aid amounts since they do not meet the criteria for recognition.

#### NOTE 3- LEASES

The Organization leases its administrative office in Buffalo, NY under an operating lease that expires as of April 30, 2022. The monthly rent for the current lease period of May 1, 2019 through April 30, 2022 is \$650. Rent expense for the years ended June 30, 2021 and 2020 is \$7,800.

Future minimum payments for the remaining ten months of the lease agreement is \$6,500.

#### NOTE 4- RETIREMENT PLAN

The Organization has a flexible 401k plan for eligible employees. The plan is funded entirely by employee pre-tax contributions.

#### NOTE 5- SUBSEQUENT EVENTS

The Organization has evaluated events and transactions for potential recognition in the financial statements through October 11, 2021, the date the financial statements were available to be issued.

The extent of the impact of COVID-19 will depend on certain developments, including the duration and spread of the outbreak, impact on grants, funding, and the schools all of which are uncertain and cannot be predicted. At this point, the extent to which COVID-19 may influence the financial condition is uncertain and, for these reasons, no contingent liabilities have been recorded.

See Independent Accountant's Review Report

	~~~		Return of Organization Exempt From	Income Tax	OMB No. 1545-0047		
Form <b>990</b> Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) <b>20</b>							
	Do not enter social security numbers on this form as it may be made public.						
Depa Inter	artment of th nal Revenue	ne Treasury e Service	st information.	Open to Public Inspection			
Α	For the 2	2020 calenda	ar year, or tax year beginning $JUL \ 1$ , $\ 2020$ and ending	JUN 30, 2021			
	Check if	C Name of	organization	D Employer identificat	ion number		
i	applicable:						
	Address change	GIRL	S ON THE RUN OF BUFFALO, INC.				
	Name change	Doing bu	usiness as	27-2193377			
	Initial return		and street (or P.O. box if mail is not delivered to street address) Room/suit				
	Final return/		OX 1271	716-853-65			
	termin- ated Amendeo		own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	315,192.		
	return Applica-	DUFF.	ALO, NY 14213	H(a) Is this a group retur			
	tion		nd address of principal officer: JULIA SPITZ	for subordinates?			
_			AS C ABOVE	<b>H(b)</b> Are all subordinates incluc			
				If "No," attach a list			
			GOTRBUFFALO.ORG X Corporation Trust Association Other ► I Yes	H(c) Group exemption n			
		Summary	X Corporation Trust Association Other ► L Yea	ar of formation: 2010 M S	tate of legal domicile: IN I		
	_		e the organization's mission or most significant activities: THE ORGAN	TZATION PROVID	 ϜϚ Δ		
e	1 Bi		E YOUTH DEVELOPMENT PROGRAM WHICH COMBI				
Jan	2 C	heck this bo					
veri	3 N		ing members of the governing body (Part VI, line 1a)		. 10		
ĝ	4 N		ependent voting members of the governing body (Part VI, line 1b)		0		
ა ა	5 TO		4				
Activities & Governance	<b>6</b> To		of individuals employed in calendar year 2020 (Part V, line 2a)		284		
ctiv	7a To		d business revenue from Part VIII, column (C), line 12		0.		
_<	b N		business taxable income from Form 990-T, Part I, line 11		0.		
				Prior Year	Current Year		
Ð	<b>8</b> C	ontributions	and grants (Part VIII, line 1h)	204,328.	211,008.		
Revenue	9 Pi	rogram servio	ce revenue (Part VIII, line 2g)	114,917.	91,117.		
eve	<b>10</b> In	vestment inc	come (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.		
ш.	11 0	ther revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,807.	11,408.		
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	342,052.	313,533.		
			nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.		
			to or for members (Part IX, column (A), line 4)	0.	0.		
es			compensation, employee benefits (Part IX, column (A), lines 5-10)	215,084.	227,999.		
Expense	16a Pi		undraising fees (Part IX, column (A), line 11e)	0.	0.		
ä			ng expenses (Part IX, column (D), line 25)	148,467.	122,150.		
_	1		es (Part IX, column (A), lines 11a-11d, 11f-24e)	363,551.	350,149.		
		-		-21,499.	-36,616.		
				Beginning of Current Year	End of Year		
ets c	а 20 То	ntal assets (F	Part X, line 16)	129,905.	108,657.		
Asse	20 TO		(Part X, line 26)	27,697.	43,065.		
Net Assets or	22 N		fund balances. Subtract line 21 from line 20	102,208.	65,592.		
		Signature		1	· · ·		
Unc	ler penalti	es of perjury, I	declare that I have examined this return, including accompanying schedules and stater	ments, and to the best of my kn	owledge and belief, it is		
			Declaration of preparer (other than officer) is based on all information of which prepare				

2255							
146							
-6600							
May the IRS discuss this return with the preparer shown above? See instructions X Yes No							
032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)							
)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	m 990 (2020) GIRLS ON THE RUN OF BUFFALO, INC.	27-2193377 Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	GIRLS ON THE RUN OF BUFFALO, INC. COMBINES TRAI	INING FOR A 5K (3.1
	MILES) RUNNING EVENT WITH HEALTHY LIVING EDUCAT	
	DEVELOPMENT, MENTORING RELATIONSHIPS, AND PHYS	
	WHICH ARE ACCOMPLISHED THROUGH AN ACTIVE COLLAR	
2	Did the organization undertake any significant program services during the year which were r	
-	prior Form 990 or 990-EZ?	
	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?
3	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest pro-	area convices to measured by expenses
4		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and	allocations to others, the total expenses, and
	revenue, if any, for each program service reported.	01 117
4a	· · · · · · · · · · · · · · · · · · ·	) (Revenue \$ 91,117)
	DEVELOPMENT EDUCATION AND RUNNING TRAINING.	
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue \$
		,
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Rev	enue \$ )
4e	Total program service expenses 254, 576.	
		Form <b>990</b> (2020)
03200	02 12-23-20	

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 Form 990 (2020)
 GIRLS ON THE RUN OF BUFFALO, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1	X X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		_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			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </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	44.		х
لم	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	11d		х
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		- 23
•	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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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			
	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			
	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			
	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,			v
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	v	
10	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? <i>If</i> "Yes,"	10		x
20-	complete Schedule G, Part III	19 20a		X X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		- 23
21	It "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		<u> </u>
	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
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GIRLS ON THE RUN OF BUFFALO, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
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 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? 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			
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity (including an employee thereof) or family member 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, key employee, creator or founder, or substantial contributor? If	00-		v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i>	000		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	28c 29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 23
30		30		x
31	contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
0L	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•••	Part V. line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R. Part V. line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No

1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1</b> a	2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portat	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	
32004	12-23-20			Form	990	(2020)

<u>Form 990 (</u> 2							BUFFALO,		
Part V	Statements	Regarding	Othe	er IRS	Filings	s and	l Tax Complia	nce	(continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0.		3b		
4a			-			
		accour	nt)?	<u>4a</u>		X
b			. ()			
_				-		v
						X X
				50		
Ua				62		x
h	•					
D.				6b		
7						
		rvices r	provided to the pavor?	7a		x
b				7b		
с						
	tied for the calendar year ending with or within the year covered by this return       2a       4         if at least one is reported on line 2a, did the organization file all required to e-file (see instructions)       2         Whet if this sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)       2         Nets if this sum or lines 2a, and 2a is greater than 250, you may be required no e-file (see instructions)       2         Whet if this sum or lines 2a, and 2a is greater than 250, you may be required an explanation on Schedule O       3         At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly (such as a sheat account, securities account, or other financial accountly (such as a sheat cortinations any time during the tax yea?       1         See instructions for filing requirements for FilinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       Was the organization file foreign country       2         Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that we anot tax deductible as charitable contributions?       1       1         Yes, ' did the organization in Ferom 8886.77       1       1       1       1         Yes, ' did the organization in Ferom 8886.75       1       1       1       1       1       1       1       1       1       1       1       1       1 </th <th>7c</th> <th></th> <th>X</th>		7c		X	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h		
8		d by th	e			
				8		
Note:         If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e.slip</i> (see instructions)         3a           3a         Did the organization have unrelated business grease more of \$1,000 more during the year?         3a           bit 1*Ves, "nate the name of the organization have an interest in, or a signature or other authority over, a financial account) is foring country ▶         3a           See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),         5a           Vas the organization have annual greats the organization that it was or is a party to a prohibited tax shelter transaction?         5a           11 *Yes, "anter the name of the organization file Form 886F?         5a           6b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that wen to tax deductible?         5a           7 Organization taxe exchange, or otherwise dispose of tangible personal property for which it was required to file form 886F?         5a           16 Ures, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?         5a           17 Organizations that may creceive deductible contributions under section 170(c).         5b           11 *Ves," indicate the number of Forms 8282 filed during the year         7d           12 *Ves," did the organization notify the doors or the value of the orgeos or services provided?         7b						
-						
	4a       At any time during the calendar year, did the organization have an interest in, or a signature or other atthouty over, a financial account; such as a bank account, securities account, or other financial account;?       4a         bit "Ves," enter the name of the foreign country ≥       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         5a       Was the organization are party to a prohibited tax shelter transaction at any time during the tax year?       5a         5a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a         bit "Yes," did the organization include with every solicitation an express statement that such contributions orgits were not tax deductible?       7a         7 Organization have access of \$75 made party to a prohibited tax shelter transaction?       7a         bit "Yes," did the organization notify the donor of the value of the goods or services provided?       7a         bit "Yes," idid the organization notify the donor of the value of the goods or services provided?       7a         cl the organization aver the year, pay premums, directly or indirectly, on a personal benefit contract?       7a         d if "Yes," indicate the number of Forms 8282 filed during the year       7d       7d         d bit the organization notify the donor advised funds.       9a sponation file a Form 1098-C?       7f		96			
		100	1			
				-		
				-		
יי פ		112	1			
h				-		
~		11b				
12a	<i>i</i>		?	12a		
13						
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					
	organization is licensed to issue qualified health plans	13b				
		13c				
				14a		X X
				14b		
15	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       S         Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       S         So Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       S         So Des the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions?       S         D If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       S         7       Organization state may receive deductible contributions under section 170(c).       Did the organization notify the donor of the value of the goods or services provided to the paryof?       T         Did the organization notify the donor of the value of the goods or services provided?       7       T         Did the organization notify the donor or services provides?       7       T         Did the organization notify the donor or during they as a contribution and party for goods and services provided to the paryof?       T         Did the organization notify the donor or during they exa       Td       Td         Did the organization notify the donor or during they exa?       Td       Td         Did the organization mate any taxibi distributions under section 49667       Pi <t< th=""><th></th><th></th><th></th></t<>					
				15		X
			<u> </u>			v
16		t incoi	ne?	16		X
	If "Yes," complete Form 4/20, Schedule O.					

Form **990** (2020)

032005 12-23-20

Form 990	(2020)
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GIRLS ON THE RUN OF BUFFALO, INC.

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

X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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 1a1	<u>)</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b		<u>0</u>		
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, 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		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	37	X
6	Did the organization have members or stockholders?	6	Х	
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?	<u>7a</u>		X
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:		37	
a	The governing body?	<u>8a</u>	X	
b	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			v
800	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		N.	
10-	Did the evention have least charters because an efficience	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	x	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<u>11a</u>		
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	x	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i>	120		
С		12c	x	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?	13	X	
14		14	X	
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
h		15b		x
	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104	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 $\blacktriangleright \mathrm{NY}$			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	, ,,		
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ıd 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			
	MEGHAN CAVANAUGH - 716-853-6509			
	232 MIDDLESEX ROAD, BUFFALO, NY 14216			
032006	5 12-23-20	Forn	n <b>990</b>	(2020)

2020.05000 GIRLS ON THE RUN OF BUFFA GIR00701

2020.05000	GIRLS	ON	THE	RUN	OF	BUFFA	GIR00701

Form 990 (2	2020)	GIRLS	ON	THE	RUN	OF	BUFFALO,	INC.	27-23
Part VII	Compensation	of Office	ers, D	)irecto	ors, Tru	ustee	es, Key Emplo	oyees, Hi	ghest Compensated
	Employees, an	d Indepe	nden	t Cont	tracto	rs			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B) (C)							(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle:	ss per	more than one erson is both an director/trustee)		n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MEGHAN CAVANAUGH	1.00							= = = = = = =		
BOARD MEMBER		Х						72,583.	0.	0.
(2) KATHERINE G. JOYCE	1.00	37						70 400	0	0
BOARD MEMBER	1 0 0	X						72,483.	0.	0.
(3) ANN JOYNT	1.00	x							0.	•
BOARD MEMBER (4) CAITLIN ZULEWSKI	1.00	Δ						0.	U •	0.
(4) CAITLIN ZULEWSKI SECRETARY	0	x		x				0.	0.	0.
(5) CHRISTIE NELSON	1.00	^		<u> </u>				0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(6) CHRISTINE TINNESZ	1.00									
BOARD MEMBER		х						0.	0.	0.
(7) CHRISTINE VINCEK	1.00									
TREASURER		х		x				0.	0.	0.
(8) JOURDAN STEPHENSON	1.00									
BOARD MEMBER		х						0.	0.	0.
(9) JULIA SPITZ	2.00									
PRESIDENT		Х		Х				0.	0.	0.
(10) MEG GOMEZ	1.00									
BOARD MEMBER		Х						0.	0.	0.
		_								
		-								
032007 12-23-20	1	I				I		1		Form <b>990</b> (2020)

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Page 7

								27-21	<u>9337</u>	77	Page <b>8</b>	
Part VII Section A. Officers, Directors, Trus	VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Emplo				ompensated Employee	s (continued)						
(A) Name and title	<b>(B)</b> Average hours per week	box	not ch , unles	ss per	ition more rson i	l than c s both r/trust	an	<b>(D)</b> Reportable compensation from	(E) Reportable compensation from related		<b>(F)</b> Estima amoun othe	ted t of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C)	from t organiza and rela	sation he ation ated
										_		
										_		
1b Subtotal					<u> </u>		<b>&gt;</b>	145,066.		0.		0.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)	I, Section A							0. 145,066.		0.		0.
2 Total number of individuals (including but n compensation from the organization ►	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable			0
3 Did the organization list any <b>former</b> officer,			•		-		-		-		Yes	s No X
<ul> <li>line 1a? If "Yes," complete Schedule J for s</li> <li>For any individual listed on line 1a, is the su and related organizations greater than \$150</li> </ul>	m of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from the	ne organization		4	X
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," corr	accrue compen	sati	on fr	om	any	unre	late	ed organization or individ	lual for services		5	X
Section B. Independent Contractors     Complete this table for your five highest co     the organization. Report compensation for	•	•							•	nsatio	n from	
(A) Name and business			DNE					(B) Description of s		Con	<b>(C)</b> npensati	on
							_					
							_					
2 Total number of independent contractors (ii \$100,000 of compensation from the organized statement of	•	ot lin	nited	to	thos (		ted	above) who received mo	ore than			
							_		i	Fc	orm <b>990</b>	(2020)

		(2020) GIRLS ON THE	RUN OF BU	JFFALO, INC	2.	27-2193	377 Page <b>9</b>
Pa	rt VI	II Statement of Revenue					
		Check if Schedule O contains a response of	or note to any line	7.1.5	(5)	(0)	
				<b>(A)</b> Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
				Total revenue		business revenue	from tax under
							sections 512 - 514
ts t	1 a	Federated campaigns 1a					
ran	k	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events 1c					
ifts ar A	c						
s, G	e	Government grants (contributions)	27,697.				
Sir	f	All other contributions, gifts, grants, and					
uti			183,311.				
oti		Noncash contributions included in lines 1a-1f					
u o	÷ د			211,008.			
0 0		Total. Add lines 1a-1f	Business Code	211,000.			
	•	PROGRAM SERVICES	900099	91,117.	91,117.		
ice	2 8		900099	91,11/•	91,11/•		
er v	k						
n S /eni	C						
Jrar Rev	C	1					
Program Service Revenue	e						
Ъ	f	All other program service revenue		~ 110			
	ç			91,117.			
	3	Investment income (including dividends, intere					
		other similar amounts)	🕨				
	4	Income from investment of tax-exempt bond p	roceeds 🕨 🕨				
	5	Royalties	►				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	k	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	c	Net rental income or (loss)	<b>&gt;</b>				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a</b>					
	ł	Less: cost or other basis					
ē		and sales expenses 7b					
venue		Gain or (loss)					
c)		I Net gain or (loss)					
Other Ro		Gross income from fundraising events (not					
)the	00						
0							
		contributions reported on line 1c). See	13,067.				
			1,659.	11 100			11 100
		Net income or (loss) from fundraising events	····· ►	11,408.			11,408.
	9 8	Gross income from gaming activities. See					
		Part IV, line 19					
		b Less: direct expenses 9b					
		Net income or (loss) from gaming activities	····· ►				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	k	Less: cost of goods sold10b					
	C	Net income or (loss) from sales of inventory	►				
6			Business Code				
\$no	11 a	۱					
ane Duƙ	k						
scellaneo Revenue	c						
Miscellaneous Revenue		All other revenue					
Σ		• Total. Add lines 11a-11d					
	12	Total revenue. See instructions		313,533.	91,117.	0.	11,408.
03200	9 12-2		F		,,		Form <b>990</b> (2020)

GIRLS ON THE RUN OF BUFFALO,

Do n	Check if Schedule O contains a respons of include amounts reported on lines 6b,	(A)	his Part IX ( <b>B)</b> Program service	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	expenses	Management and general expenses	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				
	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	145,067.	101,547.	43,520.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	64,714.	64,714.		
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
	Payroll taxes	18,218.	12,753.	5,465.	
	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	8,903.		8,903.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	12,115.		12,115.	
12	Advertising and promotion	<u>12,115.</u> 15,130.	15,130.		
	Office expenses				
	Information technology				
	Royalties				
	Occupancy	8,111.		8,111.	
	Travel	817.		817.	
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	1,305.		1,305.	
	Interest	-		-	
	Payments to affiliates				
	Depreciation, depletion, and amortization				
		10,092.	4,884.	5,208.	
4	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	5K RACE EXPENSES	28,451.	28,451.		
	PARENT RUN EXPENSES	14,441.	14,441.		
	TELEPHONE	4,723.		4,723.	
	SUPPLIES	3,900.		3,900.	
	All other expenses SEE SCH O	14,162.	12,656.	1,506.	
	Total functional expenses. Add lines 1 through 24e	350,149.	254,576.	95,573.	0
	Joint costs. Complete this line only if the organization				•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fight if following SOP 98-2 (ASC 958-720)				

INC.

Form 990 (2020)

GIRLS ON THE RUN OF BUFFALO, INC. Part X Balance Sheet

27-2193377 Page 11

			(A)		(B)
			Beginning of year	$ \downarrow \downarrow$	End of year
	1	Cash - non-interest-bearing	124,374.		108,657
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, direct	or,		
		trustee, key employee, creator or founder, substantial contributor, or	35%		
				5	
	6	Loans and other receivables from other disqualified persons (as defin			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)	B)	6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
A	9	Prepaid expenses and deferred charges	5,355.	9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b			10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	400.655
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	108,657
	17	Accounts payable and accrued expenses		17	640
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
iliti		trustee, key employee, creator or founder, substantial contributor, or	35%		
Liabilities				22	
	23			23	40.405
	24	Unsecured notes and loans payable to unrelated third parties	27,697.	24	42,425
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Pa	t X		
		of Schedule D		25	42.005
	26	Total liabilities. Add lines 17 through 25		26	43,065
s		Organizations that follow FASB ASC 958, check here <b>X</b>			
JCe		and complete lines 27, 28, 32, and 33.	102 208		CE E00
alar	27	Net assets without donor restrictions			65,592
B	28	Net assets with donor restrictions		28	
nn		Organizations that do not follow FASB ASC 958, check here			
Ъ		and complete lines 29 through 33.			
ets (	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	102 208	31	65 500
Š	32	Total net assets or fund balances			65,592
	33	Total liabilities and net assets/fund balances	1 129,905.	33	108,657

Form 990 (2020)

	990 (2020) GIRLS ON THE RUN OF BUFFALO, INC.	27-219	3377	Pag	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>3,5</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	350		
3	Revenue less expenses. Subtract line 2 from line 1	3			16.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	102	2,2	08.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		<i>c</i> 1		~ ~
De	column (B))	10	65	5,5	92.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u> т	 	
				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.		v	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. <b>2</b> a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				х
a	Were the organization's financial statements audited by an independent accountant?		. <b>2</b> b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
-		audit			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 on Sch		. 20		
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
38		0	3a		x
h	Act and OMB Circular A-133?		Jod		- 23
U U	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
	יו מעמונס, פארומות איזיץ טו סטורכענוב ט מוע עבסטושב מוץ סנבאס נמגבו נט עוועבועט סעטון מעעונס		Eorm	990	(0000)

Form **990** (2020)

SCH	EDU	LE A
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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **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.

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

OMB No. 1545-0047
2020
Open to Public Inspection

Name of	the organization	
---------	------------------	--

Name of	the organization						Employer	identification number	
	GIRL	S ON THE RU	JN OF BUFFALC	), INC			2	7-2193377	
Part I	Reason for Public (	Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The orgar	ization is not a private found	ation because it is: (F	or lines 1 through 12, cl	neck only o	one box.)				
1 🛄	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	)(A)(i).			
2	A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	n 990 or 99	90-EZ).)				
3	A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).			
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
	city, and state:								
5	An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental ur	nit describe	ed in	
	section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).			
7 X	An organization that norma	•	ntial part of its support fr	om a gove	ernmental i	unit or from th	e general p	oublic described in	
	section 170(b)(1)(A)(vi). (C								
8	A community trust describe			-					
9 🔛	An agricultural research org				-		-	-	
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city,	, and state of	the college	or	
	university:								
10	An organization that norma								
	activities related to its exem		•	. ,				•	
	income and unrelated busin		(less section 511 tax) fro	m busines	ses acquir	red by the org	anization a	iπer June 30, 1975.	
	See section 509(a)(2). (Con					O(-)(A)			
11 <u>1</u> 12 <u>1</u>	An organization organized a	-	•	•				nurnance of one or	
	An organization organized a more publicly supported or	-	-	-			•		
	lines 12a through 12d that	-							
a	<b>Type I.</b> A supporting orga						-	aivina	
u	the supported organization	-	-	•	-				
	organization. You must o			majonty o				pporting	
b	<b>Type II.</b> A supporting org			ion with its	s supporte	d organizatio	h(s) by hav	vina	
~ _	control or management o	-				-		•	
	organization(s). You mus						90 a. 10 oa pr		
c	Type III functionally inte	-		in connect	ion with, a	nd functional	ly integrate	d with,	
	its supported organization						, ,	,	
d	Type III non-functionally		-				ted organiz	zation(s)	
	that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distri	bution req	uirement and	an attentiv	/eness	
	requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.			
e	Check this box if the orga	anization received a v	vritten determination from	m the IRS	that it is a	Type I, Type I	I, Type III		
	functionally integrated, or	Type III non-functior	nally integrated supportir	ng organiz	ation.				
f Ente	er the number of supported o	organizations							
	vide the following information								
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your governi	nization listed ng document?	(v) Amount of		(vi) Amount of other	
	organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)	
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

#### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv)

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	63,498.	86,874.	81,205.	204,328.	211,008.	646,913.
2	Tax revenues levied for the organ-						
	ization'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 $\dots$						
4	Total. Add lines 1 through 3	63,498.	86,874.	81,205.	204,328.	211,008.	646,913.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						646,913.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	63,498.	86,874.	81,205.	204,328.	211,008.	646,913.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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.)	106.	318.	230.			654.
11	Total support. Add lines 7 through 10						647,567.
	Gross receipts from related activities,	etc. (see instructio	ins)			12	
	First 5 years. If the Form 990 is for th		,			01(c)(3)	
	organization, check this box and stop	here					
See	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (li	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	<u>99.90 %</u>
15	Public support percentage from 2019	Schedule A, Part I	II, line 14			15	<u>99.82 %</u>
16a	33 1/3% support test - 2020. If the c	organization did no	t check the box or	line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	k and
	stop here. The organization qualifies	as a publicly suppo	orted organization				►X
b	33 1/3% support test - 2019. If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the facts						
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization	-	
b	10% -facts-and-circumstances test	-			-		
	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
<u>1</u> 8	Private foundation. If the organizatio		•				
-						dula A (Earm 000	

Schedule A (Form 990 or 990-EZ) 2020

#### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC. 27-2193377 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	L					
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support			-	-	<b>.</b>	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ie organization's fi	irst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organi	zation,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2020 (I	ine 8, column (f), c	divided by line 13,	column (f))		15	%
-	Public support percentage from 2019					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	<b>)20</b> (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
	Investment income percentage from a					18	%
19a	33 1/3% support tests - 2020. If the						ie 17 is not
	more than 33 1/3%, check this box ar						▶□
b	33 1/3% support tests - 2019. If the						
	line 18 is not more than 33 1/3%, che						on ▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			▶∟
03202	3 01-25-21				Sch	edule A (Form	990 or 990-EZ) 2020

#### 2020.05000 GIRLS ON THE RUN OF BUFFA GIR00701

Yes No

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2020

10a

10b

#### TNTO

		1933/	/ Pa	age <b>5</b>
Ра	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
h	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	112		
Ŭ	detail in Part VI.	11c		
Sec	cerally Fail VI.			L
				<b></b>
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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.	2		
Sec	tion C. Type II Supporting Organizations			
		,	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•				
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). Stion D. All Type III Supporting Organizations	1		Ĺ
Sec				<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	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		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	supported organizations played in this regard.			
		-) -)		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	·)·		
a				
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	1 <u>s).</u>	

- Activities Test. Answer lines 2a and 2b below. 2
- 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.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

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Schedule A (Form 990 or 990-EZ) 2020

2a

2b

За

3b

Yes No

Sche Pai	dule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFF.			27-2193377 Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI) See instructions.
•	All other Type III non-functionally integrated supporting organizations must c			
Sect	ion A - Adjusted Net Income	0	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2020

#### Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC.

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (contini	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in <b>Part VI</b> )		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive			
Ū	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
10		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	ns	Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
	From 2018				
	From 2019				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
-	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
				_	
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in <b>Part VI.</b> See instructions.			-	
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC.       27-219337         Part VI       Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section B, lines 1 and 2; Part IV, Section B, lines 1 and 2; 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; 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.)	on C,
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, Secti 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; 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.	on C,
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 (Form 990 or 990-EZ) 2020

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

# Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

Т

Name of the organization		Employer Identification number
	GIRLS ON THE RUN OF BUFFALO, INC.	27-2193377
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 50	ion is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I	Rule. See instructions.
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total any one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections 509(a any one contri	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 butor, during the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the am D-EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from
contributor, du literary, or edu	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from uring the year, total contributions of more than \$1,000 exclusively for religious, charitable, acational purposes, or for the prevention of cruelty to children or animals. Complete Parts inn (b) instead of the contributor name and address), II, and III.	scientific,
For an organiz	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	m any one contributor, during the

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B	(Form	990,	990-EZ,	or 990-PF)	(2020)
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Name of organization

Employer identification number

27-2193377

#### GIRLS ON THE RUN OF BUFFALO, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	WOMEN'S SPORTS FOUNDATION 247 WEST 30TH STREET, 5TH FLOOR NEW YORK, NY 10001	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	RALPH C. WILSON, JR. FOUNDATION 3101 EAST GRAND BOULEVARD, SUITE 200 DETROIT, MI 48202	\$ <u>113,000.</u>	Person     X       Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	DICKS SPORTING GOODS <u>345 COURT STREET</u> <u>CORAOPOLIS, PA 15108</u>	\$ <u> </u>	Person     X       Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	GIRLS ON THE RUN INTERNATIONAL P.O. BOX 30667 PMB 65493 CHARLOTTE, NC 28230	\$10,087.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	HEALTHNOW NEW YORK 257 WEST GENESEE STREET BUFFALO, NY 14202	\$ <u>7,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
023452 11-25	WEGMANS FOOD MARKETS 1500 BROOKS AVENUE ROCHESTER, NY 14624	\$ <u>5,000.</u>	Person X Payroll (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2020)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

27-2193377

GIRLS ON THE RUN OF BUFFALO, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Part II No	<b>DICASH Property</b> (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

#### 023453 11-25-20

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Schedule B (Form 990	990-EZ, or 990-PF) (2020)
Schedule B (Fohn 330,	330-EZ, 01 330-FF) (2020)

Page	4
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lame of org	ganization		Employer identification numb							
IRLS	ON THE RUN OF BUFFALO,	INC.	27-2193377							
Part III	Exclusively religious, charitable, etc., contributi	ons to organizations described in through (e) and the following line e charitable, etc., contributions of \$1,000 c	section 501(c)(7), (8), or (10) that total more than \$1,000 for the ye							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
-		(e) Transfer of g								
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							
(a) No.										
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
	Transferee's name, address, ar	(e) Transfer of g	Relationship of transferor to transferee							
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
F	(e) Transfer of gift									
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							
(a) No										
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
—										
	Transferee's name, address, ar	(e) Transfer of g								
F			Relationship of transferor to transferee							

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

SCHEDULE G	Suppleme	ntal Informati	on Regarding	Fund	raisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047	
(Form 990 or 990-EZ)						Part IV, line 17, 18, o	r 19,	or if the	2020	
	C	-	red more than \$1 tach to Form 990			m 990-EZ, line 6a.			Open to Public	
Department of the Treasury Internal Revenue Service	► Go					the latest informati	on.		Inspection	
Name of the organization						~			entification number	
Part I Fundrais		N THE RUN				2 • n Form 990, Part IV, I	ina 1'	27-2193		
	complete this par		iganization answ	ereu r	85 01	1 FOIII 990, Fait IV, I	ine i	7. FOIII 990-E2		
c Phone solicit d In-person sol 2 a Did the organizatio	ions email solicitations ations icitations n have a written c ed in Form 990, P	or oral agreement v art VII) or entity in	e Solicita f Solicita g Specia vith any individual connection with p	ation of ation of I fundra I (includ	non-g gover iising o ing of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Ye:		
compensated at le	•						ie iui			
(i) Name and address or entity (fund		(ii) A	ctivity	(iii) fundr have ci or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization	
				Yes	No					
Total										
3 List all states in whi or licensing.	ch the organizatio	n is registered or I	icensed to solicit	contrib	utions	or has been notified	it is e	exempt from re	egistration	
LHA For Paperwork Re	duction Act Noti	ica saa tha Instri	ictions for Form	000 or	000_ <b>⊏</b>	7 0	Scho		990 or 990-EZ) 2020	

Schedule G (Form 9	90 or 990-EZ) 2020	GIRLS	ON	$\mathbf{THE}$	RUN	OF	BUFFALO,	INC.	27-2193377	Page <b>2</b>
Part II Fund	raising Events.	Complete i	f the o	organizat	tion ans	wered	"Yes" on Form 99	0, Part IV, lir	ne 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.

					gives in gives i see p	e greater triair pe,eeer
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			5K RACE			col. (c)
			(event type)	(event type)	(total number)	coi. (c))
nue						
Revenue	1	Gross receipts	13,067.			13,067.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	13,067.			13,067.
	4	Cash prizes				
ŝ	5	Noncash prizes				
bense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
-	8	Entertainment				
	9	Other direct expenses	4 6 5 6			1,659.
	10	Direct expense summary. Add lines 4 through			<b>&gt;</b>	1,659.
	11	Net income summary. Subtract line 10 from li	ne 3, column (d)			11,408.
Pa	rt I	<b>II Gaming.</b> Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or r	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Вe	4					
	-	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
			<b>Yes</b> %	<b>Yes</b> %	<b>Yes</b> %	
	6	Volunteer labor	No	Νο	Νο	
	7	Direct expense summary. Add lines 2 through	1 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Ent	ter the state(s) in which the organization condu	icts gaming activities:			
а	ls t	he organization licensed to conduct gaming ac	ctivities in each of these s	states?		Yes No
b	lf "	No," explain:				
		ere any of the organization's gaming licenses re			vear?	Yes No
b	11 "	Yes," explain:				

Sch	edule G (Form 990 or 990-EZ) 2020 GIRLS ON THE RUN OF BUFFALO, INC. 27-2	2193377	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	No
	to administer charitable gaming?	Yes	No
	Indicate the percentage of gaming activity conducted in:	11	
	The organization's facility	13a	%
	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗌 Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
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:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year <b>&gt;</b> \$		
Pa	Image: supplemental Information.         Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable.         Also provide any additional information.         See instructions.	t III, lines 9,	9b, 10b,
0320	33 11-25-20 Schedule G (Forr	n 990 or 990	-EZ) 2020

Schedule G	(Form 990 or 990-EZ)	GIRLS	ON THE	RUN	OF	BUFFALO,	INC.	27-2193377 Page
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation <sub>(co</sub>	ontinued)					
		•						
·								
								Oshadula O (E
								Schedule G (Form 990 or 990-E

032084 04-01-20

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Name of the organization

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. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

GIRLS ON THE RUN OF BUFFALO, INC.

Employer identification number 27-2193377

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CURRICULUM AND RUNNING TO INSPIRE SELF-RESPECT AND HEALTHY LIFESTYLES

IN PRE-TEEN GIRLS. THE PROGRAM ADDRESSES MANY ASPECTS OF GIRLS'

DEVELOPMENT - THEIR PHYSICAL, EMOTIONAL, MENTAL, AND SOCIAL WELL-BEING.

LESSONS ADMINISTERED PROVIDE GIRLS WITH THE TOOLS TO MAKE POSITIVE

DECISIONS AND TO AVOID RISKY ADOLESCENT BEHAVIORS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THEIR PARENTS, SCHOOLS, VOLUNTEERS, STAFF, AND THE COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS.

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

DRAFT IS REVIEWED AT MEMBER MEETING PRIOR TO FILING RETURN.

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

POLICY IS REVIEWED AT MEMBER MEETING.

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

OFFICER SALARIES ARE APPROVED BY THE BOARD DURING THE BUDGETING PROCESS.

THE SALARIES ARE INCREASED BY A COST OF LIVING ADJUSTMENT ANNUALLY AS WELL

AS DISCRETIONARY INCREASES DECIDED UPON BY BOARD VOTE.

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

UPON REQUEST

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 9	90-EZ) 2020							Page <b>2</b>
Name of the organization	GIRLS	ON	THE	RUN	OF	BUFFALO,	INC.	Employer identification number $27 - 2193377$

PRINTING, PUBLICATIONS, POSTAGE & SHIPPING:	
PROGRAM SERVICE EXPENSES	2,958.
MANAGEMENT AND GENERAL EXPENSES	779.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,737.
SNEAKERS:	
PROGRAM SERVICE EXPENSES	3,084.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,084.
I-SHIRTS:	
PROGRAM SERVICE EXPENSES	2,530.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,530.
COACH EXPENSES:	
PROGRAM SERVICE EXPENSES	2,228.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,228.

FOOD AND BEVERAGE:

#### PROGRAM SERVICE EXPENSES

032212 11-20-20

944.

09591104 784124 GIR007001

2020.05000 GIRLS ON THE RUN OF BUFFA GIR00701

Schedule O (Form 990 or 990-EZ) 2020	Page
Name of the organization GIRLS ON THE RUN OF BUFFALO, INC.	Employer identification number 27-2193377
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	944.
FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	727.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	727.
MERCHANDISE:	
PROGRAM SERVICE EXPENSES	352.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	352.
BACKGROUND CHECKS:	
PROGRAM SERVICE EXPENSES	283.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	283.
CPR TRAINING:	
PROGRAM SERVICE EXPENSES	277.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	277.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E,	