FY 2022.2023 Fallbrook Regional Health District Community Health Contract Grant Application

Organization Information

Legal Name

Boys Club of Fallbrook

DBA (if Applicable)

Boys & Girls Clubs of North County

Year Founded - use date of incorporation

1962

Program Name/Title Summer Water Safety

Brief Program Description

The Summer Water Safety Program is held during the 10 weeks of summer break and consists of swimming lessons and a water safety program. Lessons are taught by certified lifeguards, with water safety included. Water Safety is also provided to youth in our daily open swim program.

Is this a new (pilot, recently developed) or established program?

Established Program

Program Information - Type

Time Bound

Requested Amount

15000

How much funding was received for this program in the previous 2021.2022 CHC Grant cycle?

15000

Organization's Mission Statement

Our mission is to enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

Organization's Vision Statement

To provide a world-class Club experience that assures success is within reach of every young person who enters our doors, with all members on track to graduate from high school with a plan for the future, demonstrating good character and citizenship and living a healthy lifestyle.

Agency Capability

Boys & Girls Clubs of North County was established in the Fallbrook community in 1962. In our 60 year history we have grown from a single site to now serving over 2,000 youth in Fallbrook, Bonsall, Rainbow and DeLuz. Boys & Girls Clubs of North County is a member organization of Boys & Girls Clubs of America, a federation, which provides technical assistance, training, program development and other resources, along with standards for member organizations.

Boys & Girls Clubs of North County began as the Boys Club of Fallbrook, but changed its name in 1998 to better reflect the population and communities we serve. Programs were operated out of our clubhouse on Ivy Street until expansion began in 2005. Four new sites were established on school grounds in collaboration with Fallbrook Union Elementary School District. In 2015 we opened a site at Mae Ellis Elementary and added another at La Paloma Elementary in 2017. In 2019 a site was established at Turnagain Arms Apartments, in collaboration with Community Housing Works and Better World Foundation. In 2020 two sites were established at Camp Pendelton schools, Mary Fae Pendleton and San Onofre to serve youth during the pandemic. We have continued programs at MFP this school year. Throughout the pandemic we have been able to continue to serve the community with Water Safety and swimming programs for youth. Boys & Girls Clubs of North County has been recognized by BGCA with numerous awards for youth attendance, marketing and board strength.

Agency Collaborations

Boys & Girls Clubs of North County has a long history of strong collaborations within the Fallbrook and surrounding communities. We will continue to work closely with many other organizations and businesses to ensure the success of our program.

Fallbrook Union Elementary School District: This strong partnership has been in place for over a dozen years. We currently partner at eight school sites. FUESD also assists with staff training opportunities.

Community Housing Works: In collaboration since 2019, we partner at the Turnagain Arms Apartments Site. With this partnership, we have created an after school site right in the apartment complex to be able to serve residents.

Save Our Forest: assists with youth gardening activities and programs.

Fallbrook Public Library: provides educational activities and resources for our youth.

Cal State San Marcos: provides nursing students as volunteers in health related activities and screenings.

Fallbrook Food Pantry: provides service projects for youth and food for families.

Palomar Family Health: provides behavioral health services to youth in our program.

Fallbrook Chamber of Commerce: collaborates on events, marketing and community needs.

North County Fire District and Sherriff's Department: Special event volunteers and tours/guest speakers.

Local organizations and businesses that volunteer and sponsor our programs: Rotary Clubs, Angel Society, Rally for Children, Masonic Lodge, National Charity League, Fallbrook High School, Bonsall Women's Club, Fallbrook Women's Club, Major Market, Del Rey Avocado, Yogurt Palace, Fro Yo, Chase Bank, Pacific Western Bank.

Target Population - Age

	Percent of program participants
Children (infants to 12)	97
Young Adults (13-17)	3
Adults (18-60)	
Seniors (60+)	
We do not collect this data (indicate with 100%)*	

Target Population not collected - Age

n/a

Gender

	Percent of program participants
Female	45
Male	55
Non-binary	
Unknown*	

*Target Population - Gender

n/a

Income Level

	Percent of program participants
Extremely Low-Income Limits, ceiling of \$32,100	40
Very Low (50%) Income Limits, ceiling of \$53,500	25
Low (80%) Income Limits, ceiling of \$85,600	20
Higher Than Listed Limits	15
We do not collect this data (indicate with 100%)*	

*Target Population - Income Level

n/a

Projected number of residents that will directly benefit (participant/client) from this program.

200

Social Determinants of Health (SDOH)

Program/Services Description - Social Determinants of Health

Social & Community Context (Civic Participation, Discrimination, Incarceration, Social Cohesion)

Healthcare Access & Quality (Access to Health Care, Access to Primary Care, Health Literacy)

Program/Services Description - FRHD Community Needs Assessment

Health (Diabetes - prevention, management)

Health (Cholesterol, High Blood Pressure, Hypertension, Obesity)

Mental Health (Social Support - Youth or Families)

Statement of Need/Problem

Living in Southern California, children in the Fallbrook community have constant access to water via swimming pools, lakes, streams, canals, the ocean, etc. With extensive, year round access, it is critical for children to participate in swimming lessons and water safety instruction to minimize their risk of injury or death. According to the CDC, drowning is the third leading cause of unintentional injury death of children and adolescents ages 5-19. There is a simple way to reduce tragic drowning incidences: teach kids to swim. In 2009 the American Academy of Pediatrics found children enrolled in formal swimming lessons had an 88% reduced risk of drowning. They also found that socioeconomically, the number of swim lessons required to achieve basic competency in the water is often costly or difficult to access. They suggest to address this barrier with community-based programs offering low cost swim lessons, including culturally and linguistically appropriate swim instructors, which perfectly describes our program. In addition to teaching kids how to swim, water safety instruction is also imperative. The American Academy of Pediatrics states that water competency is the ability to anticipate, avoid and survive common drowning situations. Elements of water competency include water safety awareness, basic swim skills and the ability to recognize and respond to a swimmer in trouble. All of these skills are taught in our Summer Water Safety Program with the goal of each child gaining water competency. In addition, participating in swim lessons and daily open swim activities will address the social determinants of health of Social and Community Context (social cohesion) and Healthcare Access and Quality (health literacy). Social cohesion is addressed as youth build relationships with each other and their instructor throughout the program. Health Literacy is increased as youth learn the importance of exercise and water safety through their participation.

Statement of Need/Problem - Others

Fallbrook High School has the only one other swimming pool in Fallbrook that is open to the public, however the youth we serve attend our Club on a daily basis and swim for no additional cost, so they do not traditionally access the other swimming pool, due to cost and transportation issues. In addition, the FHS pool charges considerably more for lessons and open swim and does not incorporate water safety into their daily swim activities. Our program is approximately half the cost of the lessons at FHS and more accessible to families in need.

Program/Services Description - Program Entry

Youth interested in participating in swimming lessons simply have a parent complete an enrollment form online or in our office and pay the program fee. If a scholarship is requested, a scholarship form is provided and evaluated by our administration. Youth interested in participating in our open recreation swim program can do so free of charge and with no enrollment for our Club membership. Any youth desiring membership can complete the registration form and pay the \$30 annual registration fee, which can be waived upon scholarship request. Youth hear of the program through our banners and flyers placed around town, email blasts, social media or our website. Staff members follow up on youth who are participating in our open swim program who may benefit from swimming lessons. If a youth is identified, staff will contact parents and request they enroll in the swim lessons program. Youth can continue on in lessons for however many sessions are desired, moving up levels as they gain skills.

Program/Services Description - Program Activities

The Summer Water Safety Program provided by Boys & Girls Clubs of North County is held during the 10 weeks of summer break and consists of two program components. First is a swimming lesson and water safety program. This program provides swimming lessons to children ages 3 and up. Kids enroll for a two week block of 30 minute swimming lessons (10 lessons total) taught by certified life guards and including water safety instruction, for \$60. Scholarships are available to assist those in need. On the first day of the lessons, the youth meet all together to complete an evaluation process, where they are then placed in groups based on their skills and abilities. Lessons include teaching best practice basic swim skills, including ability to enter the water, surface, turn around, propel oneself for at least 25 yards, float or tread water then exit the water. More advanced students progress to learning more complex strokes and breathing techniques. Upon conclusion of the two-week session, participants receive certificates of completion. Kids can enroll in additional sessions in order to continue to increase their swimming skill level. The second component is a structured open swim time. Each weekday the pool is open from 1-5 pm for open swim, monitored by certified lifeguards. Open swim is free for all Club members. Quite often the youth attending the Club have a difficult time paying the small membership fee that is required, so scholarships are available upon request. Activities are conducted each hour to help kids learn water safety, improve their swimming skills and have fun! Water safety instruction provided in lessons and during open swim time include swimming in clothes, falling in and practicing self rescue, along with critical educational components such as never swimming alone and how to recognize when another swimmer is in distress. In addition to the safety benefits of the program, by swimming our youth members will be participating in a great fitness activity. It is an excellent physical workout, as it keeps your heart rate up, builds endurance, muscle strength and cardiovascular fitness. It helps maintain a healthy weight, healthy heart and lungs while providing an all-over body workout. Because of the health benefits of participating in a swim program, youth participants will experience diabetes prevention, less chance of high cholesterol, high blood pressure, hypertension and obesity. In addition, participation in the program will increase the social supports of the youth participants. They will gain friends and social connections with the other youth participants in swim lessons and open swim time, as well as receive the guidance of a caring adult through the lifeguards and swim instructors.

Program Goal #1

To improve the overall health of the youth members of Boys & Girls Clubs of North County, specifically working to prevent diabetes, obesity, high cholesterol, high blood pressure, hypertension and increasing social supports.

Program Objectives - Goal #1

Provide daily swimming lessons and water safety instruction to 150 youth during the summer swim season.

Provide daily open swim time for approximately 50 youth per day, including hourly structured activities

Program Outcomes/Measurables - Goal & Objectives #1

Program enrollments will be tracked for all programs. All sign-ups are handled centrally, so all data is easily accessible and compiled for reporting and tracking purposes, including all demographic data. We will provide lesson plans and program expectations to all staff. Daily roll sheets and participation counts will be kept. We will track numbers of youth that progress from one level to the next and reach out to those failing to progress to evaluate what additional interventions may be helpful.

Anticipated Acknowledgment

Anticipated Acknowledgment

Social Media Postings

Print Materials to Service Recipients

Website Display

Anticipated Acknowledgment

The Fallbrook Regional Health District's generous support of our Triple Play program will be acknowledged on our website and in all printed materials regarding Triple Play, including brochures and flyers. In addition, FRHD will be recognized in a post at least quarterly highlighting our Triple Play program on our Facebook and Instagram pages.



FRHD CHC GRANT BUDGET INSTRUCTIONS

This file has a number of pre-formated pages. Those sections for auto calculations and set formats are shaded in grey and should not be altered. Please keep a copy of this document as it will be used as part of the grant reporting process

There are five tabs to this file:

- 1 Instructions
- 2 Program Budget Form
- 3 Revenue Sources
- 4 Budget Narrative
- 5 Budget Reporting Form

1 Instructions:

All Yellow sections are to be filled out by the applicant. Grey sections will auto calculate and should not be edited by the applicant. All pages are formatted to print portrait, on 1

2 Program Budget Form:

- > PROGRAM COST: This section should reflect the true and total costs of the program.
 - APPLYING ORGANIZATION: This is the applicant agency's investment in their program.

 This is the value of the resources the agency will contribute to the program's cost. These
- This is the value of the resources the agency will contribute to the program's cost. These may include funds from fundraising events, private donors, in-kind goods and services, and volunteer efforts.
- > <u>OTHER FUNDERS</u>: These are funds or resources provided from contracts, grants and partnerships that are used to support the program's operations.
- > REQUESTED FROM FRHD: This is the funding request you are putting forward to the District.
- The line item names may not fully align with your budget. Please edit those items to align with your budget. Explain those items on your Budget Narrative Form as necessary.

A INDIRECT EXPENSES:

This section is for expenses that are part of indirect operats of the program, necessary which may not be part of the direct service provision expenses (Adminsitration, facility expenses, general liability ins., etc.). Please refer back to the training materials for clarification of these expenses. The District will not consider funding more than 25% of these expenses

B PERSONNEL EXPENSES - PROGRAM SPECIFIC:

As stated, this section is for staffing expenses that are directly related to the provision of the services/program. Please list each position title separately, unless there are multiple of the same title then use (x3) as an indicator. For example, if funding salaries for four separate Drivers, you would indicate as, Driver (x4) and the expense amount would be the cost of all four Drivers. Please include a single line items for general staffing expenses such as personell expenses (Payroll taxes, WC, etc). Benefits (health, retirement, etc) should be listed on a separate line.



C DIRECT PROGRAM EXPENSES:

This section is for supplies, items and or specific expenses related to the provision of the services/program. This may include phone, rent, prining, program related insurance (e.g., vehicle), trainings and cetifications.

3 Revenue Sources

Please list all sources of revenue the agency recieves by category. This Form has two > sections, one for Agency Funding and one for Project Funding. Please fill out both sides of the table. Amounts do not need to be exact; however, we ask for best estimates.

4 Budget Narrative

There are headers that align with the Budget Form. These items should be explained (narrative) if they are unsusual or have a specific project impact. Explanations regarding utility expenses are generally understood, but expenses relating to trianing or for a specilarity insurance could be expressed here.

5 Budget Reporting Form

This form will be used for those grantees who are awarded contracts. This form would be

> submitted with the quarterly Impact Report and should demonstrate that funds were allocated according to the submitted proposal budget.



FRHD CHC GRANT BUDGET FORM

Agency
Name:

Boys & Girls Clubs of North
County

PROGRAM NAME:
Summer Water Safety

Not all line items will correspond with your program budget. If the item does not fully align either leave it blank or group it in the best category possible. However, be sure your program budget is fully itemized.

Α	INDIRECT EXPENSES:	PROGRAM COST	APPLYING ORGANIZATION	OTHER FUNDERS	REQUESTED FROM FRHD
A1	Administrative Support	7,364.00	7,364.00		
A2	General Insurance (not program specific	1,750.00	1,750.00		
А3	Accounting & audit expenses				
A4	Consultant/Contractor Fees				
A5	Physical Assets (Rent, Facility Costs)	4,800.00	2,300.00	2,500.00	
A6	Utilities	1,200.00	1,200.00		
A7	IT & Internet				
A8	Marketing & Communications	100.00	100.00		
A9	Office Supplies				
A10	Training & Education	1,500.00	1,500.00		
A11	Other: specify				
	TOTAL INDIRECT EXPENSE	16,714.00	14,214.00	2,500.00	
В	PERSONNEL EXPENSES - PROGRAM	PROGRAM	APPLYING	OTHER FUNDERS	REQUESTED FRO
B1	SPECIFIC Head Lifeguard	6,400.00	ORGANIZATION 3,200.00		FRHD 3,200.0
B2	Lifeguards/Swim Instructors	33,600.00	21,800.00		11,800.0
В3	Salary (list position)	22,222.22			,
В4	Salary (list position)				
В5	Payroll Expenses (WC, taxes) @9%	3,600.00	3,600.00		
В6	Benefits		·		
В7	Other: specify				
	TOTAL PERSONNEL EXPENSE	43,600.00	28,600.00	-	15,000.0
С	DIRECT PROGRAM EXPENSES	PROGRAM COST	APPLYING ORGANIZATION	OTHER FUNDERS	REQUESTED FRO
C1	Equipment				
C2	Program/Project Supplies	1,600.00	1,600.00		
C3	Printing/Duplicating				
C4	Travel/Mileage				
C5	Program Specific Insurance				
C6					
C7					
C8					
C9					
C10					
C11					
C12					
C13					
C14					
C15					
	TOTAL OTHER EXPENSES	1,600.00	1,600.00	-	
		W	X % REQUESTED	Y	Z
D	TOTAL ALL EXPENSES	PROGRAM	% REQUESTED FROM FRHD		

D TOTAL ALL EXPENSES PROGRAM COST FROM FRHD

\$ 61,914.00 24%

2) FUNDING SOURCES

Е	FUNDS FOR PROGRAM		_
E1	APPLYING ORGANIZATION X	44,414.00	
E2	OTHER FUNDERS Y	2,500.00	
E3	REQUESTED FROM FRHD Z	15,000.00	
	TOTAL FUNDING SOURCES	\$ 61,914.00	NOTE: THIS AMOUNT SHOULD BE EQUAL TO YOUR PROJECT COST.

3) % OF AGENCY BUDGET

F	CALCULATE % of Total Agency	\$ 1,809,578.00	\$ 61,914.00	3%
	budget that this Program represents.	AGENCY BUDGET**	PROGRAM COST	% of AGENCY BUDGET

^{**} Agency budget is your agency's entire budget for the year. Fill in the amount.



Agency Name: Boys & Girls Clubs of North County

Program Name: Summer Water Safety

Total Organization Budget (Current Fiscal Year)

\$ 1,809,578.00

Total Project Budget (Current Fiscal Year)

\$ 61,914.00

Organization Sources of Revenue

Sources of Funding

(Total Organization Budget)

(This Project Request)

		Percent	One-time funding?			Percent of	One-time funding?
Source of funds	\$ Amount	of Total	(Yes/No)		\$ Amount	Total	(Yes/No)
Federal	35000	0.02	n				
State	22000	0.01	n				
City/County*	14000	0.01	У				
Other Govt.	965000	0.53	n				
Proposed FRHD	42000	0.02	n		15000	0.23	N
Fees for Service	181000	0.1	n				
Grants (non-gov't)	230000	0.13	n				
General Donations	120000	0.07	n				
Other Internal							
Organizational Fundraising	200000	0.11	n		46914	0.77	
Other (list):							
Total	###############	100%			\$61,914.00	100%	
* City/County	* City/County						

^{*} City/County

If the organization currently receives funding from any Cities or Counties, please list the jurisdiction and contract amount below.

We received \$14,000 for a Youth Sports Grant from San Diego County.



Agency Name: Boys & Girls Clubs of North County

Program Name: Summer Water Safety

INSTRUCTIONS:

- 1 List items from your PROJECT BUDGET FORM (Sections A and B) where an expense is indicated, that you are seeking FRHD support.
- 2 Provide a brief narrative description of each budget line item to be funded by the proposed grant.
- 3 Your narrative should explain why this expense is necessary to the project and why or how FRHD funding would make an impact.

#	Name	Narrative:			
B. P	B. PERSONNEL EXPENSES -PROGRAM SPECIFIC				
#	Name	Narrative:			

Name Narrative:

В1	Head Lifeguard	and ensures grant objectives are met.		
В2	Lifeguard/Swim Our Lifeguards/Swim Instructors provide daily lessons and program activities t program participants, while guarding the pool and ensuring safety.			
B5	Payroll Expenses	Calculated at 9% of total payroll		

C. DIRECT PROGRAM EXPENSES

Name Narrative:

nding, we will d for the ss this
n able to

Funding History: Summer Water Safety Program

Estimated program fees: \$ 9,000

Individual donations for scholarships: \$ 2,500

Donations of chemicals: \$ 2,500

Organizational Fundraising: \$47,914



Board of Directors 2021-22

		3M, retired
Governing Board	Bierbrauer, Chet	ckbierbr@gmail.com
		Branch Manager/VP of Mortgage
		Lending
2 nd Vice President	Catania, Chris	Chris.catania@rate.com
		Senior Portfolio Manager, retired
Governing Board	Grimm, Steve	Stephen.grimm@att.net
Immediate Past		Restauranteur, retired
President	Edelstein, Mike	Medelstein 49@aol.com
		High School Superintendent, retired
Board President	Mitchell, Dale	Dmitchell11800@gmail.com
		Tax Accountant, retired
Treasurer	Norberg, Paul	<u>pnorberg@att.net</u>
		U.S. Bank Branch Manager
Governing Board	Quinn, Roy	Roy.quinn@usbank.com
	Reisbeck-Stoewer,	Education Administrator, retired
Governing Board	Donna	<u>Drstoewer2015@gmail.com</u>
Governing Board	Short, Jim	Software developer, retired
		Community volunteer
Governing Board	Small, Louise	tlsmall@earthlink.net
		FUESD School Board
		member/Educator, retired
Secretary	Stillman, Siegrid	sig@nickynote.com
		SDGE
Governing Board	Tattersall, Dale	dtattersall@semprautilities.com
		Attorney at Law
Executive Committee	Zoller, Deborah	zollerlaw@aol.com

(Rev. January 2020)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(e)(1) of the internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Go to www.irs.gowForm890 for instructions and the latest information. Internal Revenue Service For the 2019 calendar year, or tax year beginning 7/1/2019 and ending 6/30/2020 Check I applicable: C Name of organization Boys & Girls Club of North County D Employer identification number Address change Doing business as Number and street (or P.O. box if mail is not delivered to street address) 95-2241614 Name chance 445 E Ivy St initial return City or town (760) 728-5871 Fallbrook CA 92028 Final submitmentaries Foreign country name Fortilan province/state/ocunty Foreign postal code Amended return G Gross receipts \$ 1,548,556 P Name and address of principal officer: Application pending Him) is this a group return for subordinates? Yee X No Allison Barclay 445 E lvy St. Fallbrook, CA 92028 H(b) Are all subordinates included? X 501(c)(3) 501(c) (Tipo-exempt alatus:) ◀ (insert no.) 4947(a)(1) or If "No," ettach a list. (see instructions) Website: www.bgcnorthcounty.org H(c) Group exemption number Form of organization: X Corporation Trust L Year of formation: 1962 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: To promote the health, social, educational, vocational, and character development of boys and girls through group activities, sports Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 16 Number of independent voting members of the governing body (Part VI, line 1b). 4 16 8 107 6 44 Total unrelated business revenue from Part VIII, column (C), line 12. 78 D Net unrelated business taxable Income from Form 990-T, line 39. **7**b 0 **Current Year** Contributions and grants (Part VIII, line 1h) 1,280,643 1 303 708 Program service revenue (Part VIII, line 2g) 241.102 154,191 10 361 515 11 Other revenue (Part VIII, column (A), lines 5, 6d, 6c, 9c, 10c, and 11e) . 128,158 64.852 Total revenue -add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1 650 262 1.523,266 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0 Đ Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 ٥ 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 1,275,129 1,296,734 Professional fundralsing fees (Part IX, column (A), line 11e) 15,402 Total fundralsing expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 468,297 399,115 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,758,828 1.695.849 Revenue less expenses. Subtract line 18 from line 12. 19 -108,568-172,583 Beginning of Current Year End of Year Total assets (Part X, line 16) . . 1,770,321 1,832,363 21 59,638 294,463 22 Net assets or fund balances. Subtract line 21 from line 20 1.710.483 1.537,900 Part II Signature Block Under persuase of perjuty, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparar (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Allson Type or print name and title Print/Type preparer's name Preparby signature Paid Chack Roland W Munger

Firm's name Munger & Company, CPAs

Firm's address > 2170 South El Camino Real, Ste. 217, Oceanaide, CA 92054

Preparer

Use Only

No

P01871458

X Yes

3/2/2021

Phone no.

self-employed

(760) 730-8020

Firm's EIN > 47-3342732

-	990 (2015)	Boys & Girls Club of North County	95-2241614	
P.	art III	Statement of Program Service Accomplishments		Page
		Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly de	escribe the organization's mission:		
	To promo	te the health, social, educational, vocational, and character development of boys	*********	
	and girls	through group activities, sports and other programs.	**********	
2	Did the e			~~
-	the arter	rganization undertake any significant program services during the year which were not listed on		
	M "Voe "	Form 990 or 990-EZ?	Yes Yes	X No
3	Did the A	resolute triese new services on Schedule O.	_	
•	SERVICES?	rganization cease conducting, or make significant changes in how it conducts, any program		
	H "Yes "	escribe these changes on Schedule O.	Yes	X No
4	Describe	the organization's program service accomplishments for a service at the service and service and service accomplishments for a service at the service accomplishments for a service accomplishment and service accomplishments for a service accomplishment accomplishment and service accomplishments for a service accomplishment accompl		
	expenses	the organization's program service accomplishments for each of its three largest program services.	, as measured by	
	the total s	. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alk expenses, and revenue, if any, for each program service reported.	xcations to others,	
40	(Code:) (Expenses \$ 1,447,027 including grants of \$) (Revenue		
	Improve t	he health, social, vocational, and character development of boys and girls through group	154,	191)
	activities,	sports, and other programs,		

				~

_		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$	
			*	/
			=	
le	(Code:) (Expenses \$ Including graphs of \$ \(\frac{1}{2}\) (Parents)		
	10000) (Expenses \$ Including grants of \$) (Revenue	\$)
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d (	Other progr	am services (Describe on Schedule Q.)		
	Expenses	\$ 0 including grants of \$ 0.) (Revenue \$	0.89	
9	fotal progra	m service expenses 1,447,027	0)	

	lather and the state of the sta		Yee	No
1	complete Schedule A.		×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2	-	-
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.		Ť	-
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.	3		X
5	In the omenication a section Sold (ALC) - Sold (ALC) - Continues C	4		X
_	The property of a property of the property of			
6	assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III	5		X
·	have the right to provide advice on the distribution or investment of amounts in such funds or accounts?			
7	"Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space.	6		X
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	7	$\vdash$	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		X
·	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt			
10	negotiation services? If "Yes," complete Schedule D, Part IV .	9		X
	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		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	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	-
ь	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more		^	
	of its total assets reported in Part X, line 16? if "Yes," complete Schedule D. Part VII.	11b		х
	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D. Part VIII.	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		
	Did the organization report an amount for other liabilities in Part X. line 257 if "Yes " complete Schedule D. Part V.	11a		X
f	Did the organization's separate or consolidated linancial statements for the tax year include a footnote that addresses	710	-	X
	the organization's liability for uncertain tax positions under FiN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		x
	Schedule D, Parts XI and XII.	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tay year? # "Vee "	124	_	_
	and if the organization enswered "No" to line 12a, then completing Schedule D. Perts XI and XII is antiquel	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(B)? If "Yes " complete Schedule 5	13		Ŷ
14 <b>a</b>	Did the organization maintain an office, employees, or agents outside of the United States?	14a	= 5	x
b	Did the organization have aggregate revenues of expenses of more than \$10,000 from grantmaking	-76	-+	_
	fundraising, business, investment, and program service activities outside the United States, or appreciate			
	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		_
16	υια the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate greats or other	10	-	X
	assistance to or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV	16	- 0	v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraleing equipme	10	-+	<u>x</u>
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	الحا	- 1	
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on	17	-	<u>X</u> _
40	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?			
0.00	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedute H.	20a		X
24	if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X

	The state of the s				
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	ls on		Ye	e N
	Part IX, column (A), line 27 if "Yes," complete Schedule i. Parts I and III		22		1
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 compensations	d		1	
	employees? if "Yes," complete Schedule J		23	Ш	∐ x
244	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer line	18		1	11
	24b through 24d and complete Schedule K. If "No," go to line 25a		24		l x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	10 10 1	24	0	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the to defease any tax-exempt bonds?	-	240		
0	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		240		
208	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess	benefit		1	
la la	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	1.116	254		X
N	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in 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		Ιx
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any	current	100	+	+^
	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 i Pert II		26	Ĭ.	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee	. kev			+^
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee		1	1	1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	<b>.</b>		L	
	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 Schadule I				
_	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		239	1:10	UTK
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor	? <i>If</i>			
	If Yes, "complete Schedule L, Part IV.		28a		X.
Č	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. =27 %	28b		X
	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				- ·
31	conservation contributions? If "Yes," complete Schedule M .		30		X
31 <b>32</b>	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 26% of its net assets?				
33	If "Yes," complete Schedule N, Part II.	45000	32		X
••	Did the organization own 100% of an entity disregarded as separate from the organization under Regula sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	ations			
34	Was the organization related to any tay event as temple scribe. If no it is a second or the second o	· E :	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, or IV, and Part V, line 1.				
36a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	·     <3 ×	34		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	and a line of	35a	_	X
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	Denounce			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	polodosi	35b	-	
	organization? If "Yes," complete Schedule R, Part V, line 2.	I CHEUSQ	36		J.
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	etion	30	_	X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R. Pal	t VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 111	and	-		^
_	197 Note: All Form 990 filers are required to complete Schedule O.	willy	38	x	
Part	Statements Regarding Other IRS Filings and Tax Compilence		30	^	_
	Check if Schedule O contains a response or note to any line in this Part V.				
	, and a super wife a super sup		-	·	ᆜ
la	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	la l ol		Yes	No
b	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable	lh o	U.S.	F	
C	Did the organization comply with backup withholding rules for reportable payments to yendors and repor	table		4	
	gaming (gambling) winnings to prize winners?	MINTS	1c	X	100
			Form		200404
			CALLE	99U (	4V18)

	95-22	4181	<b>d</b> 19	hape.
P2	Statements Regarding Other IRS Filings and Tax Compliance (continued)	7101	-	300
20	Enter the number of employees reported on Form W.S. Towns W.J. Con.	_	Yee	N
	Statements, filed for the calender year anding with an within the area of the file.	GH	1	18
ь	if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1000	NE:	7
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	100		Ĭ.
b	if "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3a		X
40	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over.	3b		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
Ь	If "Yes," enter the name of the foreign country	48	_	Х
	See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	188		
5a	was the organization a party to a prohibited tax shelter transaction at any time during the tay was 2	-	1000	
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tay shalter transcelled	5a		X
C	if "Yes" to line 5a of 5b, did the organization file Form 8886-T?	5b		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	BG	$\vdash$	_
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1 1	х
b	it "Yes," did the organization include with every solicitation an express statement that such contributions or	-		
	gitte were not tax deductible?	6b	1 1	
7	Organizations that may receive deductible contributions under section 170(c)		100	
2	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for acade	100		
	and services provided to the payor?	7a		X
þ	IT "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Ť
C	Life the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
d	required to file Form 8282?	7c	- 1	X
•	If "Yes," indicate the number of Forms 8282 filed during the year	7		ě.
- 7	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		X
ď	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		X
h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
•	sponsoring organization have excess business holdings at any time during the year?		123	
9	Sponsoring organizations maintaining donor advised funds,	8		_
a	Did the sponsoring organization make any taxable distributions under section 4966?	-07		ll-
b	Did the sponsoring crossization make a distribution to a depart depart advisor as a selected.	9a	_	_
10	Section 501(c)(7) organizations. Enter:	9b	-	
	Initiation fees and capital contributions included on Part VIII. line 12	223	1 33	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
H	Section 501(c)(12) organizations. Enter:			
a	Gross Income from members or shereholders	18	37	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		8	
28	Section 4947(a)(1) non-exempt charitable trusts, is the groundzation filing Form 980 in lieu of Form 40412	2a	1	
D	IT "Yes," erner the amount of tax-exempt interest received or accrued during the year		100	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.		130	
a	is the organization licensed to issue qualified health plans in more than one state?	3a		_
	riose: See the instructions for additional information the organization must report on Schedule C		200	
b	Enter the amount of reserves the organization is required to mainteln by the states in which	3		
C	the organization is licensed to issue qualified health plans	1	W.	
4a	Enter the amount of reserves on hand	32		E
b	Did the organization receive any payments for indoor tanning services during the tax year?	4e		X
5	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	4b		
	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachule payment(s) during the year	15	_[]:	X_
	f "Yes," see instructions and file Form 4720, Schedule N.			· A
8	s the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		(
-				F
			170	

_	980 (2019) Boys & Girls Club of North County 95-	24161	4	Page
Pa	GOVERNANCE, Management, and Disclosure For each "Vee" recorded to lines 2 through 7h holest and 8	100		
	TOSDOTISO TO IEFRO DAL DEL CARCADA TRA CIRCUMSTANCAS PROCESSOS OF CHARGAS OF CARACILLA C	Dan I		ction
-	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
10	Enter the number of voting members of the governing body at the end of the tax year	_	Yes	N
	If there are material differences in voting rights among members of the governing body, or	16	1	1
	if the governing body delegated broad authority to an executive committee or similar	15		183
	committee, explain on Schedule O.	133		1
ь	Enter the pumper of valled members included as Russian III		800	130
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	18	1 61	
_	any other officer, director, trustee, or key employee?		4110	
3	Did the organization delegate control over management duties customarily performed by or under the direct	2	-	X
•	supervision of officers, directors, trustees, or key employees to a management company or other person?			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3	-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4	-	X
6	Did the organization have members or stockholders?	5	1	X
78	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	6		X
	one or more members of the governing body?			
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,	78	1	X
_	Etockholders, or persons other than the commission reserved to (or subject to approval by) members,		1	
8	stockholders, or persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during	7b	_	X
•	the year by the following:	200		117
	The governing body?	100	100	
ь	Each committee with authority to act on behalf of the governing body?	8a	X	_
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	8b	-	X
_	at the organization's malling address? If "Yes," provide the names and addresses on Schedule O.			
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	9	<u></u>	X
	the internal Revenue	Code	-	
10 <b>e</b>	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	108	-	X
	affillates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	110	_	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	111	-	
<b>Za</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13.	480		301
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If Types #	120	^	-
	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	x	-
14	Did the organization have a written document retention and destruction policy?	14	x	-
16	Did the process for determining compensation of the following persons include a review and approval by		^	100
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		574	B
	The organization's CEO, Executive Director, or top management official.	150	×	
b	Other officers or key employees of the organization	15b	^	х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see Instructions).	100	500	^
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	3.00	98	
	with a taxable entity during the year?	160	a 200	
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	200	)	X.
	perticipation in joint venture arrangements under applicable federal tax law, and take steps to sefection		20	
	the organization's exempt status with respect to such arrangements?	16b		
ecti	on C. Disclosure	100		_
7	List the states with which a copy of this Form 990 is required to be filled CA			_
8	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) available for public inspection. Indicate how you <u>made these available.</u> Check all that soply.	, , , ,		
L	Own website Another's website X Upon request Other (synlain on Schedule O	ı		
₽	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	licy.		
	and mancial statements available to the public during the tax year.			
D .	State the name, address, and telephone number of the person who possesses the organization's books and records	•		
	Allison Barclay (760) 728-5871 445 E Ivy St, Fallbrook, CA 92028			
_	440 E Ny St. Fallbrook, CA 92028			

Form 990 (2019)	Boys & Girls Club of North County 95-2241614	24000
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	Page
	Employees, and Independent Contractors	
	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 to organization's	his table for all persons required to be listed. Report compensation for the calendar year ending with or within the	
or compensati	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount on. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	
<ul> <li>List all (</li> </ul>	of the organization's current key employees, if any. See instructions for definition of "key employee." organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)	

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.

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

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. **Position** (A) Name and title (E) (ES) Average (do not check more than one (D) box, unless person is both an Reportable Reports Estimated amount hours officer and a director/trustee) of other compensation compensation compensation from the from related Highest companieshed (liet any Organization بمنست اعسامه omanizations from the hours for (W-2/1099-M/8C) (W-2/1098-MISC) organization and related organizations organizations THE REAL PROPERTY. dotted line) (1) Ailison Barday 40.00 CEO X 0.00 95, 102 (2) Chet Bierbrauer 1.00 Director X 0.00 (3) Rex Bright 2.00 President X 0.00 X (4) Chris Catania 2.00 2nd Vice President 0.00 X (5) Jeff Corbett 1.00 Director 0.00 (6) Steve Grimm 1.00 Director 0.00 X (7) Mike Edelstein 2.00 Past President 0.00 Х X (8) Janine Hali 1.00 Director 0.00 (9) Dale Mitchell 2.00 1st Vice President 0.00 X X (10) Paul Norberg 2.00 Treasurer 0.00 X (11) Roy Quinn 1.00 Director 0.00 X (12) Donna Reisbeck-Stoewer 1.00 Director 0.00 X (13) Jim Short 1.00 Director 0.00 X (14) Louise Small 1.00 Director 0.00

(A) Name and title	(iii) Average hours	(do	not di unia	Pai Pai heak ss ps	C) iltion mon imon		one h an	(D) Reportable compensation	(E) Reportable compansation	(E) (F) eportable peneation of other compens that compens the compens the compens that compens the compens that compens the compens the compens that compens the compens the compens that compens the compens that compens the compens		
	per week (list eny hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)			
(15) Siegrid Stillman	2.00				-	-				1		
Secretary (16) Dale Tattersali	0.00			Х								
Director Date lattersall												
MT Debasek Tallan	0.00	X				_	ш			1		
Director	1.00	v										
(18)		X			_		Н			+		_
(19)		-								├		_
(20)			Н	-	-							
(21)										L		
(22)												
(23)												
(24)	-40											
(25)				٦	7		Н			-		
1b Subtotal		_!	Ц	_1				95,102	0	_	_	_
c Total from continuation sheets to Part VII,	Section A					57		0	0			0
d Total (add lines 1b and 1c).							<b>.</b> □	95 102	0	_	-	0
2 Total number of individuals (including but not	limited to those list	ed al	bove	) W	ho r	ecel	ved	more than \$100,	000 of			_
reportable compensation from the organizati	on 🕨			_	_		_					0
3 Did the organization list any former officer, of employee on line 1a? If "Yes," complete Sch	Fractor, trustee, key	emp	loye	<b>e</b> , c	r hi	ghes	t co	mpensated			Yee	No
4 For any individual listed on line 1a, is the sur	n of reportable com	pens	atio	n en	Id o	ther	COM	pensation from	OC 0 FS	3	0350	X
the organization and related organizations gr Individual	eater than \$150,000	0? <i>If</i>	"Yes	s, " c	omį	plete	Sch	edule J for such				
5 Did any person listed on line 1a receive or action services rendered to the organization? If	Crue compensation	from	an	· · / Un Boar o	rela	ted o	orga	nization or Indivi	dual		S	X
Section B. Independent Contractors	Too, Oomplete Col	raryun	901	UT a	UGI	port	SULL			- 6		X
Complete this table for your five highest com- compensation from the organization. Report	pensated independence	ent c	ontn	acto	re t	het r	ecei	ved more than \$	100,000 of			_
(A)		Les Cen	ei iù	ai y	cai	el lui	ы.	(四)	7	ex ye	-	_
Name and business a	gare <b>es</b>		_	_	_	-	_	Description of servi	ces C	ompen		_
			_	_	-	-				_		0
				_		-	_			_	_	0
			_	_	_		_			_	_	0
										-		0
2 Total number of independent contractors (inc	luding but not limite	d to t	hos	e Hs	ted	abov	/e) v	vho received	CEMI	57	Sol.	-

PartVIII Statement of Revenue
Check if Schedule O contains a re

							(A) Total revenue	(B) Related or sumpt function revenue	(C) Unrelated business revenue	(D) Revenue exclude; from tex under eactions 512-514
41	10		60	8	18		Salve (e)	THE REAL PROPERTY.	SANS THE	5600016 0 12-0 14
Grants		b Membership dues	Ř.		1b	38,281				No sense
9		c Fundraising events.			10				BLOUE ALIS	
集		d Related organizations.			1d				NEW DESIGNATION	
4 1		<ul> <li>Government grants (contri</li> </ul>			10	0				
Contributions, (	5	f All other contributions, gift	s, grai	nts, and						
11		similar amounts not includ			11	1,167,009			WI PROPERTY.	
ĘS	S S	Noncash contributions incl				La.		THE RESIDENCE		
8	ili.	lines 1a-1f		0.00	g	\$ 0	The Contract			
-	1	h Total. Add lines 1a-1f .			-		1,303,708			
•	21	Voidh December and Lance		_		Business Code			100 Z 200 1	
울	1 7		8 788	B		800088	154,191	154,191		
Pram Ser		4======================================					0			
E		4					0			
2.2							0			
Program Service Revenue	1 7	All other program service r					0	_		
	9		avanu	w			0			
	3	Investment income (includi	na dh	idende lei	loone	1 and	154,191	1704-3101	LATE SHOWING	Wal had to
	ľ	other elmilar amounts).	1001109, 1111	101 65	r, and	E45				
	4	Income from investment of	tov.e	remnt boo	 dom	oneda	515			515
	5	The second secon	100-0/	-	u pre	Austria,	0			
	-	110721000, , , , , , ,		(i) Rea		(fi) Personal	11 12 11 11 12 11 11 11 11 11 11 11 11 1			
	6a	Gross rents	6a			the second		ALCO CONTRACTOR		
	b		6b							
	C		6c		0	0				
	ď			T .a a			0			1 2 2 1 V
	7a	Gross amount from		(I) Securit	ies	(ii) Other	100 S 100 E	Part of the last	EXCHINATE I	E.Mirrodomo-
		sales of assets	11							
		other than inventory	7a		0	0		N N H		
를	b	Less: cost or other basis								
ξ	1	and sales expenses	7b		0	o	300			
2	C		7c		0	0				
5	d						0			
Other Revenue	84	Gross income from fundrais events (not including \$ of contributions reported on See Part IV, line 18	line 1		8a	87.531				
	ь	Less: direct expenses			8b	25,290	10000	CHARLES CO.		
	C	Net income or (loss) from fu	ındrak	alna eventi		20,200	62 241		THE STORY OF THE STORY	20.04
	9a				-		02,241			62,241
		See Part IV, line 19			9a	0				
	Ь				9b	0				
- 11	C	Net income or (loss) from ga				<b>P</b>	0		THE RESPONSE	
	10a	Gross sales of inventory, les	38			0	CHICAGO.		STATES !	S SECUL
- 1		returns and allowances		[	10a	0				
	b.	Less: cost of goods sold		[	10b	0		6-10 St. 50	The State	PRINCIPAL PROPERTY.
	C	Net Income or (loss) from sa	ales of	Inventory		9 4 89	0			
	44	B.01				Business Code	DECEMBER OF		<b>使用的人的</b>	
	11a	Miscellaneous Revenue			. 4	900099	2,611			2,611
	b						0			
Reverse	C	All officer positions			.		0			
	a	All other revenue			â		0			
	12	Total Add lines 11a-11d .	<u> </u>	4 64.4	-		2,611			1 2 2 5
	14	Total revenue. See instruct	ions. ,	A 10 10 10			1,523,266	154,191	0	65 367

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete a	ili columns. Ali other	organiz <b>ations must</b> d	complete column (	ΔΙ
Check if Schedule O contains a response or no	te to any line in this F	Part IX	1 1 1 1 1 1 1	cv.
Do not include amounts reported on lines 6b. 7b.	(A)	(B)	(C)	Ť

8b, l	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			College extrement	expenses
	domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic				The second
	individuals. See Part IV, line 22	0	i		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				C-ELL -
	trustees, and key employees.	95.102	83,690	7,608	3.80
3	Compensation not included above to disqualified			1,000	3,01
	persons (as defined under section 4958(f)(1)) and	4	1		
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages .	1,025,885	878,643	147 242	
3	Pension plan accruals and contributions (include		0,0,0,0	171 242	_
	section 401(k) and 403(b) employer contributions)	0			
)	Other employee benefits	81,675	70,115	44.000	
)	Payroll texes	94,072	80.758	11 256	30
	Fees for services (nonemployees):	64,012	QU / DB	13,314	
a .	Management	10,933	4 440		
b	Legal	10,833	4 440	6,493	
c ,	Accounting .	9,000			
d i	Lobbying .			9,000	
	Professional fundraising services. See Part IV, line 17	0	THE PERSON NAMED IN COLUMN 1		
f	Investment management fees	0	NAME OF STREET		
ci (	Other. (If line 11g amount exceeds 10% of line 25, column	0			
•	(A) amount, list fine 11g expenses on Schedule O.).			1	
	Advertising and promotion	0		0	
í	Office expenses	5,090		5,090	
ì	oformation technology	67 281	53 292	3,989	
	nformation technology	11,473	6.561	4,912	
	Royalties	0			
	Occupancy	57.141	53,066	4.075	
	Travel	0			
F	Payments of travel or entertainment expenses				
T .	or any federal, state, or local public officials	0			
, L	Conferences, conventions, and meetings	7,215	1,419	5,796	
	nterest.	0			
-	Payments to affiliates	0			
L	Depreciation, depletion, and amortization	125,085	114 645	10,440	0
11	nsurance	31,103	26,914	4,189	
C	Other expenses, itemize expenses not covered		1 1 V 1 2	EU dan LEU I	198.50
A	bove (List miscellaneous expenses on line 24e. If	PLANTER AND	SEST TATE		
IA.	ne 24e amount exceeds 10% of line 25, column	SSEASE FOR			
(4	A) amount, list line 24e expenses on Schedule O.)	(19) (19)			
0	ues and Subscriptions	16 287	6,870	9,417	1.000
E	guipment Repair and Maintenance	19,914	18,592	1,322	
: M	liscellaneous	5,988	5.417	571	
	nack Program	42,805	42.605	OI II	
	Il other expenses	0			
T	otal functional expenses. Add lines 1 through 24e	1,695,849	1,447,027	244,714	4 400
J	oint costs. Complete this line only if the	1,530,010	I THI ULI	Z-14 / 14	4 108
0	rganization reported in column (B) joint costs			].	
fh	om a combined educational campaign and	1			
fu	Indraising solicitation. Check here		1111		
	flowing SOP 98-2 (ASC 958-720)			1	

Part X B

**Balance Sheet** 

Check if Schedule O contains a response or note to any line in this Part X . . . (A) (B) Beginning of year End of year 336,089 1 567 091 Savings and temporary cash investments 2 166,965 2 158,398 3 0 37,106 1.800 Loans and other receivables from 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 . . . . . . 0 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ٥ 6 0 7 0 0 8 Prepaid expenses and deferred charges . . . ٥l 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,641,602 Less: accumulated depreciation . . . . . 10b 1.536.526 1,230,161 10c 1,105,078 investments—publicly traded securities . . . . 0 11 0 12 0 12 0 13 Investments-program-related. See Part IV, line 11 . . . . . . . 0 13 0 14 0 14 0 15 15 0 16 Total assets. Add lines 1 through 15 (must equal line 33) . . . . . . . 1.770.321 16 1.832.363 17 Accounts payable and accrued expenses. 59,838 17 61,463 Grants payable....... 18 O 18 19 19 20 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 0 22 23 Secured mortgages and notes payable to unrelated third parties . 0 23 233,000 Unsecured notes and loans payable to unrelated third parties . . . . 24 0 24 ٥ 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 0 25 0 26 Total flabilities. Add lines 17 through 25 . . . . . . . . 59.838 28 294,463 Organizations that follow FASB ASC 968, check here > X Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 1,710,483 27 1.532.180 28 0 28 5.720 Organizations that do not follow FASB ASC 958, check here 🦻 🔝 and complete lines 29 through 33. 29 29 0 30 Paid-in or capital surplus, or land, building, or equipment fund . . . . . 0 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 0 31 32 Total net assets or fund balances. . . . . . . . . . . . . . . . . . . . 1,710,483 32 1,537,900 Total liabilities and net assets/fund balances 1,770,321 33 1.832.363

	and (2019) Boys & Gins Club of North County	95-	2241614	4 66	500
Pai	t XII Reconciliation of Net Assets				100
	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)	11		1.57	3.26
2	Total expenses (must equal Part IX, column (A), fine 25)	2			5 849
3	revertue less expenses. Subtract line 2 mom line 1	3			2.583
4	Net assets of fund parances at beginning of year (must equal Part X, line 32, column (A))	4			0.48
5	Net unrealized gains (losses) on investments.	8			
6	Donated services and use of facilities	6			
7	Investment expenses.	7			
8	Prior penod adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X. line 32				
	column (B))	10		1.53	7.900
Pari	Financial Statements and Reporting			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Check if Schedule O contains a response or note to any line in this Part XII	790	8	5.	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		0.00	GIRL.	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1000	100	USS:
	Schedule O.		3	33	
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	•			- C
	reviewed on a separate basis, consolidated basis, or both:			150	15
	Separate basis Consolidated basis Both consolidated and separate basis			1	15
b	Were the organization's financial statements audited by an independent accountant?		1000	1	405
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	• 11	2b	X	
	separate basis, consolidated basis, or both:			34	16.
					5
e			<b>SECO</b>	10	1
G	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			4	22
	the audit, 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 Schedule O.		1	E	<b>FIR</b>
3a			025		
Jd	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
b	the Single Audit Act and OMB Circular A-133?		3a		Х
0	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
_	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	Sa ese	3b		
			Form	990	2019)

## Depreciation and Amortization

Form 4562

Department of the Tressury Internal Revenue Service

## (Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for Instructions and the latest information.

Form 4562 (2019)

Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number Boys & Girls Club of North County 990 95-2241614 Election To Expense Certain Property Under Section 179 Note: if you have any listed property, complete Part V before you complete Part I. 2 Threshold cost of section 179 property before reduction in limitation (see instructions). 3 0 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . a (a) Description of property (b) Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 0 9 0 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions , 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . . . 12 0 13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12 . . . Ð Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 16 Property subject to section 168(f)(1) election . . . 16 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2019 . . . . 17 125.085 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property veer placed (business/investment use (e) Convention (f) Method (a) Depreciation deduction period in service only-see instructions) 19 a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property g 25-year property 25 yrs. SA h Residential rental 27.5 yrs. MM S/I property 27.5 yrs. MM 8/1 I Nonresidential real 39 yrs. MM S/L property MM S/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20 a Class life S/I b 12-year 12 yrs. S/L c 30-year 30 yrs. MM S/L d 40-year 40 yrs. S/L Part IV Summary (See Instructions.) 21 Listed property. Enter amount from line 28 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 125,085 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs For Paperwork Reduction Act Notice, see separate instructions.

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

Complete If the organization is a section 801(c)(3) organization or a section 4947(a)(1) nonexampt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

20**19** 

Open to Public
Inspection
Employer Identification number

0.0		Olde Olde editions					zwibiokes imistratifiating	u mimpél.			
Boy		Girls Club of North County	and Office the				95-2	241614			
MACHINA	MAURILANI	Reason for Public Cha	erity Status (All o	rganizations must c	omplete i	his part.)	See instructions.				
1		anization is not a private found A church, convention of churc	ierrion pecause it is: ( Chas, or association	ror lines 1 through 12, of churches described	, check on In <b>sectio</b> r	ly one box   1 <b>70(b)(1</b> )	:.) (A)(I).				
2	Ш	A school described in section	n <mark>170(b)(</mark> 1)(A)(II). (A	ttach Schedule E (Fori	m 990 or 9	90-EZ).)					
3		A hospital or a cooperative ho					m.				
4		A medical research organizate hospital's name, city, and state	ion operated in conju	unction with a hospital	described	in <b>section</b>	170(b)(1)(A)(III). E	nter the			
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local gover	mment or governme	ntal unit described in a	ection 17	O(b)(1)(A)	(v).				
7	X	An organization that normally described in section 170(b)(1	receives a substant	al part of its support fr	om a gove	rnmental i	unit or from the gene	eral public			
8		A community trust described I			F II Y						
9	П	An agricultural research organ				ويتممم وأرام	notice with a land on				
	_	university:	BITE COILEGE OT AGRICUL	ture (see instructions).	Enter the	name, city	, and state of the co	liege or			
10		An organization that normally receipts from activities related support from gross investment acquired by the organization as	to its exempt function of the control of the contro	ons—subject to certair ted business taxable in	exception	ns, and (2)	no more than 33 1/3	00/ of No.			
11		An organization organized and									
12	Ħ	An organization organized and	d operated exclusive	ly for the henefit of to	Apriorm #	o templion	д <b>адч</b> у.				
		of one or more publicly suppo Check the box in lines 12a thr	ITIBO ONDRNIZATIONS (K	nachaar in aachan 50	Gravit or	maatlam fil	MANA Con	_ ### - N. # S			
		Type I. A supporting organithe supported organization	ization operated, sur	pervised or controlled	hy its sunr	anded oraș	antenton(a) tunionth	r less colories			
	_	organization. You must co	mpiete Part IV. Sec	tions A and B.	a majonty (	or trie altec	DIDIE OF Trustees of th	ne supporting			
b		Type II. A supporting organ control or management of t	ization supervised o	r controlled in connect ization vested in the s	ion with its ame perso	supported	d organization(s), by	having supported			
C	Г	organization(s). You must Type III functionally integ	complete Part IV, S	ections A and C.			_				
	_	its supported organization(i	8) (800 instructions),	You must complete !	Part IV. Se	ctions A.	D. and P	•			
d	L	Type III non-functionally it that is not functionally integ	<b>ntegrated.</b> A suppor	ting organization oper	sted in cor	naction w	th its supported one	anization(s)			
	_	— tadnitalielii (200 ivsiliici)	ns). You must com:	piete Part IV. Sections	A and D.	and Part	V.				
	L	_i Check this box if the organi	zation received a wr	fiten determination fro	m the IRS	that it is a	Type I. Type II. Type	e ili			
		runctionally integrated, or T	ype III non-functions	ily integrated supports	ng organiz	<b>ation</b> ,	astro d astro of the				
I		inter the number of supported			5	, ,		. 0			
- 9	Ø N	rovide the following information are of supported organization	On about the support	ed organization(s). (iii) Type of organization	6.44.05.						
	.,		full mild	(described on lines 1-10 above (see instructions))	listed in you docur	r governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
A)											
3)											
C)											
<b>D)</b>											
•)											
otal							0				
							n n	0			

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or If the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ction A. Public Support	_					
	andar year (or flecal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Giffs, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	119,737	1,114,828	1,709,857	1,691,763	1,545,530	6,181,718
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				1,001,700	1,545,850	6,101,710
3	The value of services or facilities						0
·	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	119,737	1,114,828	1,709,857	1,691,763	1,545,530	0 404 745
5	The portion of total contributions by each person (other than a				1,351,700	1,040,030	6 181 715
	governmental unit or publicly	ADSERVATE:					
	supported organization) included on	S S S S S			PER LA CO		
_	line 1 that exceeds 2% of the amount shown on line 11, column (f)						
Sai	Public support. Subtract line 5 from line 4	too state	THE RESERVE		1 31810(219		6,181,715
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2018	(c) 2017	(d) 2018	7-1 00 to 1	100.2
7	Amounts from line 4	119,737	1,114,828	1,709.857		(e) 2019	(f) Total
8	Gross Income from interest, dividends,	110,707	1,114,020	1,709,007	1,691,763	1,545,530	6 181 715
	payments received on securities loans,						
	rents, royalties, and income from						
_	almilar sources	86	163	227	361	515	1,362
9	Net income from unrelated business activities, whether or not the business is regularly carried on						.,,
10	Other income. Do not include gain or						0
	loss from the sale of capital seasts (Expisin in Part VI.)	6,521	9.980	O	1,465	2.044	00.0
11	Total support. Add lines 7 through 10.	EUS-SUNDIN	Kentilla la	Value Val	Harris Tolland	2.611	20.577 6.203.644
12	Gross receipts from related activities, etc. (se	e instructions)	1 1 1 1 1 1 1 10			12	6,203,644
13	First five years. If the Form 990 is for the or	ganization's first, se	cond. third, fourth.	or fifth tay year as.	e earling ED1/aV2	1	
Sec	organization, check this box and stop here . tion C. Computation of Public Su	nort Persents				F30 E800 3	
14	Public support percentage for 2019 (line 6, c	olumn (f) divided by	line 11 column (6)			44	
15	Public support percentage from 2018 Schedu	Je A. Part II. fine 14				14	99.65%
16a	33 1/3% support test—2019. If the organiza	tion did not check th	na boy on line 13 .	nd line 44 le 33 48	204 ma	Abl- I	99.61%
	and stop ners. The organization qualifies as	a publicly supported	dorganization				. III. By V
D	33 1/3% support test—2018. If the organization qualifie	ition did not check a	how on line 13 or 1	Re and line 15 is 1	22 1/20/	ala a ala dista	
172	10%-facts-and-circumstances test—2019. 10% or more, and if the organization meets ti Part VI how the organization meets the "facts	. If the organization of the "facts-and-circum -and-circumstances"	did not check a box stances" test, chec " test. The omaniza	on line 13, 16e, or k this box and stop tion qualifies as a	r 16b, and line 14 p here. Explain in		
	organization.  10%-facts-and-circumstances test—2018. 15 is 10% or more, and if the organization me Explain in Part VI how the organization meets	. If the organization ( lets the "facts-and-c t the "facts-and-circ	iid not check a box ircumstances" teet, irrateoces" teet. Th	on line 13, 16s, 16 check this box and	3b, or 17s, and line 3 stop here,		
18 (	supported organization	ot check a box on lin	e 13, 16a, 16b, 17	a, or 17b, check thi	is box and see		_
	natructions.	11 - 17 40					

Part III 8	upport Schedule for Orga	is Club of North ( I <b>nizations Des</b>	cribed in Sect	lon 509(a)(2)		95-224161	1.010
(C	Complete only if you checke the organization falls to qu	ed the box on ill	ne 10 of Part I d	or If the organiz	ation failed to lete Part II.)	qualify under Pa	art II.
	Public Support or fiscal year beginning in)	(4) 0045	01.0010	I			
_	or fiscal year beginning in)  contributions, and membership fees	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	o not include any "unueual granta.")	( )					
2 Gross receip	ts from admissions, merchandise						
sold or service	cee performed, or facilities Any activity that is related to the						
	a tax-exempt purpose	ł				11	
	ts from activities that are not an						
	de or buelness under section 513 .	1					
	es levied for the						
	on's benefit and either paid to	1		-			
	d on its behalf						
	of services or facilities					li i	
	y a governmental unit to the	- 1					
	n without charge						
	lines 1 through 5 , , , ,	0	0	0	0	0	
	om disqualified persons .						
	ided on lines 2 and 3						
	other than discussified		1				
	exceed the greater of \$5,000					- 1	
	mount on line 13 for the year ,	1	1		1	1	
	a and 7b	0	0	0	0	0	
	port (Subtract line 7c from	21/10/22	A CONTRACTOR OF THE SECOND	10 S.	Alcin Sales		
line 6.)		T SET KILD					
	otal Support						
	fiscal year beginning in)	(a) 2015	(b) 2018	(c) 2017	(d) 2018	(e) 2019	(f) Total
	om line 6	0	0	0	0	0	
	from interest, dividends,	1					
	eived on securities loans, rents,			l.	1		
	Income from elmilar ecurces						
	taxes) from businesses						
	er June 30, 1975						
	and 10b	0	0	O	0	0	
	from unrelated business		-	- 0	- 0	0	
	t included in line 10b, whether			1.1	1		
	isiness is regularly carried on .						-
	e. Do not include gain or						
	sale of capital assets				- 1	1	
	Part VI.)						
	ort. (Add lines 9, 10c, 11,	3					
and 12.)	to the Form 000 is forther and	0	D	0	0	0	
organization	ers. If the Form 990 is for the org , check this box and stop here .	enization's link, se	cond, third, fourth,	or fifth tax year as	a section 501(c)(S	<b>)</b> )	
ection C. Co	emputation of Public Supr	ort Percenter				ALCOHOL:	<u> </u>
Public suppo	ort percentage for 2019 (line 8, col	umn (f) dhided by	line 13 column (f)	100		15	
Public suppo	ort percentage from 2018 Scheduk	A. Part III. line 15				16	0.00%
ection D. Ca	imputation of investment	Income Perce	ntage			14	0.00%
Investment is	ncome percentage for 2019 (line 1	Oc, column (f), divi	ided by line 13, colu	ипп (f))		17	0.00%
Investment is	scome percentage from 2018 Sch	edule A. Part III. lin	ne 17			18	0.00%
la 33 1/3% eur	port tests-2019. If the organize	tion did not check	the box on line 14.	and line 15 is mon	then 33 1/394	nd line 17 le	2.00
	n 33 1/3%, check this box and sto				, alan 00 110 70, a	IN HIM I / NS	

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . .

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? if "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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 12e or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," enswer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 filling 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 Pert 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 4948 (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 antity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

_	Ye	10	No
T.	733		
1	I		
2			G/I
3a			
3b	100		
3с	-		
4a	L	I	
911			F
4b	-	ı	83
333	13		
4c		Ī	
	H	1	
5a			
5b	211		EU
5c	lle.		100
6		I	
22			
7	595	H	
8			70.
鞋	He		
9a		1	E
<b>9</b> b	B.	100	
9c			
10			
10a		-	
10b			

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 (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations, Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

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.

	Yes	No
2a		
2b		
3a		88. RG
3b		

20, 1970 (explair complete Section	in Part VI). See B Athrough E.
Prior Year	(B) Current Year
	100
0	
0	0
Prior Year	(B) Current Year (optional)
0	0
0	0
0	0
0	0
0	0
0	0
0	0
	Current Year
CONTRACTOR OF THE PARTY OF THE	0
TO REPORT OF	0
	0
Man Village	0
EASTER T	
10	
20 1007	0
	a Iši supporting o

Secti	Current Year					
1	Amounts paid to supported organizations to accomplish ex	empt purposes				
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported				
	organizations, in excess of income from activity					
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations					
4	The state of the s					
- 6	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions, Add lines 1 through 6.			0		
8		he organization is respon	nsive	1.2		
	(provide details in Part VI). See instructions.					
9	The state of the s			0		
10	Line 8 amount divided by line 9 amount			0.000		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(II) Underdistributions Pre-2019	(iii) Distributable Amount for 2019		
1_	Distributable amount for 2019 from Section C, line 6			0		
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2019			ACCOUNT OF THE PARTY.		
	From 2014	CHENNICO III				
ь						
C	From 2016					
d	From 2017					
	From 2018					
	Total of lines 3a through e	0				
	Applied to underdistributions of prior years	Della Constitution	0			
	Applied to 2019 distributable amount		All the second state	0		
T	Carryover from 2014 not applied (see instructions)		HILK CONTENTS OF	N. Charles State		
j	Remainder. Subtract lines 3g, 3h, and 3l from 3f.	р				
4	Distributions for 2019 from Section D, line 7: \$ 0					
	Applied to underdistributions of prior years		0	CARNE HIS AND		
	Applied to 2019 distributable amount		Each Box (/ce)	0		
C	Remainder. Subtract lines 4a and 4b from 4.	0	ENVIOLENCE TO END			
6	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See Instructions.		0			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			0		
7	Excess dietributions carryover to 2020. Add lines 3j and 4c.	0				
8	Breakdown of line 7:					
	Excess from 2015 . 0		Back Z. KON			
	Excess from 2016.					
C	Excess from 2017 . 0		WE DOWNER	A Comment		
	Excess from 2018 . 0		B BERLEIN BI			
	Excess from 2019			CLASS BISSON		

	orm 990 or 990-EZ) 2019 Boys & Girls Club of North County	95-2241614	Page 8
PartVI	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 1	1c; Part IV, Section	
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section D	ion E, lines 1c, 2a, 2b,	
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; a	and Part V, Section E,	
-	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.	)	
Dod II Cod	No. D. Los 40 Why are an all a faither to the state of th		
Part II Sec	tion B Line 10 The amount of other income is miscellaneous revenue.		
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			TAX DATE OF
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	**************************************		
			***************************************
			110
		*********	********

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

**Schedule of Contributors** 

OMB No. 1546-0047

2019

Department of the Treasury Internal Revenue Service Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization

Boys & Girls Club of North County

Organization type (check one):

Employer identification number 95-2241614

Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not 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			
Check if your organization is cov	rered by the General Rule or a Special Rule.			
Note: Only a section 501(c)(7), (instructions.	(8), or (10) organization can check boxes for both the General Rule and a Special Rule. See			
General Rule				
For an organization filing or more (in money or procentributor's total contributor's	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 operty) from any one contributor. Complete Parts I and II. See Instructions for determining a outlons.			
Special Rules				
regulations under section 13, 16a, or 16b, and that	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the ns 509(a)(1) and 170(b)(1)(A)(vI), that checked Schedule A (Form 990 or 990-EZ), Part II, line t received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.			
contributor, during the ye	For an organization described in section 601(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruetty to children or animals. Complete Parts I, II, and III.			
contributor, during the ye contributions totaled mor during the year for an ex General Rule applies to	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one par, contributions exclusively for religious, charitable, etc., purposes, but no such re than \$1,000. If this box is checked, enter here the total contributions that were received inclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the this organization because it received nonexclusively religious, charitable, etc., contributions during the year.			
Caution: An organization that len	n't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,			

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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer Identification number** Boys & Girls Club of North County 95-2241614 Contributors (see Instructions). Use duplicate copies of Part I if additional space is needed. (a) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Angel Society ___1 Person P.O. Box 1408 Pavroli Falibrook CA 92028 \$_____10,000 Noncesh Foreign State or Province: Foreign Country: (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZiP + 4 Total contributions Type of contribution Del Rey Avocado 2 Person 1260 S. Main Street **Payroll** Falibrook CA 92028 \$______5,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 3 Linda Heald ---------Person 3501 Tierra Linda Lane Payrol! Fallbrook CA 92028 \$_____10,000 Noncesh Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) **(a)** (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 John and Janet Kister Person 3636 Luneta Lane Payroll Fallbrook CA 92028 10,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution Bob and Susan Lucy - 5 Person 3705 Fire Road Payroll Falibrook CA 92028 10,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncesh contributions.) (a) (b) (C) No. Name, address, and ZIP + 4 Total contributions Type of contribution Pacific Western Bank 6 Person 130 West Fallbrook Street Payroli Falibrook CA 92028 \$ 5,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country:

noncesh contributions.)

Page 2 Name of organization Employer identification number Boys & Girls Club of North County 95-2241614 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution SDGE Semper Energy ___<u>7</u>___ Person P.O. Box 129007 Payroli San Diego CA 92112 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncesh contributions.) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution James and Jeanette Short . 8 Person 3033 Via Loma Payroll Fallbrook CA 92028
Foreign State or Province: Noncesh Foreign Country: (Complete Part II for noncesh contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution Better World Together Foundation 9 Person 1 Better World Cir Ste. 200 Payroll Temecula CA 92590 \$_____10,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncesh contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Boys and Girls Club of Falibrook Foundation 10 Person PO Box 1497 Pavroll Bonsail CA 92003 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (a) (c) No. Name, address; and ZIP + 4 Total contributions Type of contribution __11 French Fund Person P.O. Bax 20160 Long Beach Payroll Long Beach CA 90801 Nonceah Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (a) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution Nordson Foundation 12 Parson 28601 Clemens Rd Payroll Westlake OH 44145 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncesh contributions.)

Name of or	rganization		Employer Identification number		
Boys & Gl	Iris Club of North County		95-2241614		
PartI	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space i			
(n)	(b)	(c)	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions			
13	Tony and Sue Godfrey 300 Corporate Pointe Ste. 220 Culver City CA 90230 Foreign State or Province: Foreign Country:	\$ 5000	Person  Payroll  Noncash  (Complete Part If for noncash contributions.)		
(a)	(b)	(c)	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions			
14	Rite Aid Foundation  30 Huner Lane  Camp Hill PA 17011  Foreign State or Province:  Foreign Country:	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c) Total contributions	(d)		
No.	Name, address, and ZIP + 4		Type of contribution		
15	San Diego Foundation 2508 Historic Decetur Rd Ste, 200 San Diego CA 92108 Foreign State or Province: Foreign Country:	\$ 10,000	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		
16	US Bank PO Box 634 Milwaukee Wi 53201 Foreign State or Province: Foreign Country:	\$5,000	Person X Payroll  Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions			
17	Zable Foundation 1660 Hotel Cir N Ste. 710 San Diego CA 92108 Foreign State or Province: Foreign Country:	\$ 20,000	Person X Payroli		
(a)	(b)	(c)	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions			
	Foreign State or Province: Foreign Country:	\$	Person Payroli Noncash (Complete Part II for noncash contributions.)		

Schedule B (Form 290, 290-EZ, or 290-PF) (2019) Name of organization Employer identification number Boys & Girls Club of North County 95-2241614 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) Description of noncash property given from FMV (or setimate) (See instructions.) Date received Part I (a) No. (c) (d) Date received from FMV (or estimate) Description of noncash property given Part I (See instructions.) (a) No. (c) (b) Description of noncash property given from (d) FMV (or estimate) Date received Part I (See Instructions.) (a) No. (c) (b) Description of noncash property given from (d) Date received FMV (or estimate) Part I (See instructions.) (a) No. (c) (b) Description of noncash property given from (d) Date received FMV (or estimate) Part I (See Instructions.) (a) No. (c) from FMV (or estimate) Description of noncash property given Date received Part I (See Instructions.)

transfer or mile	anization				Pag			
Boys & Gir	s Club of North County				Employer Identification number 95-2241614			
Part III	/ in) mer roes mole illes	or organizations cor release for the year. (	I <b>r from any one</b> ( npleting Part III, ∈ Enter this informs	<b>contributor.</b> Comp enter the total of ex	ibed in section 601(c)(7), (8), or elete columns (a) through (a) and			
(a) No. from Part I	(b) Purpose of			of glift	(d) Description of how gift is held			
1.0-111-0-0			**************					
			(e) Trans	fer of gift				
-	Transferee's name	address, and ZIP	+4	Relations	thip of transferor to transferee			
				=======================================				
(a) No.	For, Prov.	Country			12 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
from Part i	(b) Purpose of	gift	(c) Usa	of gift	(d) Description of how gift is held			
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of to				hip of transferor to transferee			
	For. Prov.	Country						
(a) No. from Part i	(b) Purpose of	gift	(c) Use	of gift	(d) Description of how gift is held			
	022							
	(e) Transfer of gift							
	Transferee's name, address, and ZiP + 4			Relational	hip of transferor to transferee			
			,					
	For. Prov.	Country		222				
a) No. from Part I	(b) Purpose of g	ift	(c) Use	of gift	(d) Description of how gift is held			
					PRABOTTO			

Transferee's name, address, and ZIP + 4

For. Prov. Country

Relationship of transferor to transferee

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# Supplemental Financial Statements

 Complete if the organization answered "Yes" on Form 990. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1845-0047

Open to Public Inspection Employer Identification number

Schedule D (Form 990) 2019

	s & Girls Club of North County  Organizations Maintaining Donor	A 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		95-2241614
R.O.	Organizations Maintaining Donor Complete if the organization answe	'Advised Funds or Other Sir red "Yes" on Form 200 : Bart IV	nilar Funds or Ac	counts.
		(a) Donor advised funds		) Funds and other accounts
1	Total number at end of year		,-	y - and and but accounts
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and do	nor advisors in writing that the ass	ets held in donor advi	sed
	funds are the organization's property, subject	to the organization's exclusive (eg	al control?	Yes No
6	Did the organization inform all grantees, dono	rs, and donor advisors in writing ti	hat grant funds can be	beau
	only for charitable purposes and not for the be	enefit of the donor or donor adviso	r, or for any other pur	D086
Da	conferring impermissible private benefit?			Yes No
100		1 m 4 m		
1	Complete if the organization answer	ed "Yes" on Form 990, Part IV	line 7.	
•	Purpose(s) of conservation essements held b	y the organization (check all that a	ipply).	
	Preservation of land for public use (for exam			
	Protection of natural habitat	Pr	eservation of a certific	od historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization	on held a qualified conservation or	ontribution in the form	Of a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
2	Total number of conservation easements		2a	
b	Total acreage restricted by conservation ease	ments	2b	
c d	Number of conservation easements on a certification	fied historic structure included in (	a) 2c	
u	Number of conservation easements included i	n (c) acquired after 7/25/06, and n -	ot on a	
3	historic structure listed in the National Registe	for a series of a series of a series of the		
•	Number of conservation easements modified, the tax year	dansierred, refeased, extinguishe	d, or terminated by the	e organization during
4	Number of states where property subject to co	meanistics exament is located		
5	Does the organization have a written policy re-	Samiled the periodic monitoring in	reaction banding of	
	violations, and enforcement of the conservation	n easements it holds?	ebecacıı' usurallığ öl	Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violations, and s	Inforcing conservation e	Yes No
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enfor	dra conservation easen	COME Curing the year
_	Ψ			
8	Does each conservation easement reported or	ine 2(d) above satisfy the require	ements of section 170	(h)(4)(B)(j)
	and section 1/U(n)(4)(B)(1)?			Van [7] 41.
9	in Part XIII, describe how the organization repo	orts conservation easements in its	revenue and expense	statement and
	balance sheet, and include, if applicable, the te	ext of the footnote to the organizat	ion's financial stateme	ents that describes the
Par	organization's accounting for conservation eas	ements.		
Mill	Organizations Maintaining Collect	ions of Art, Historical Treasi	res, or Other Sim	ilar Assets.
1a	Complete if the organization answers	EASP ASC OFF TO THE TOTAL IN	line 8.	
	If the organization elected, as permitted under works of art, historical treasures, or other simile	rado ado ede, noi to report in its	revenue statement a	nd balance sheet
	public service, provide in Part XIII the text of th	a fromote to the flooreist exclinition	, education, or resear	ch in furtherance of
b	If the organization elected, as permitted under	FASR ASC 958 to report in He rev	ins mar describes lives	e nems.
	works of art, historical treasures, or other simils	or assets held for nublic exhibition	Curre ergrenment SUG E	Palance sneet
	PUDIC SERVICE. Drovide the following amounts re	elating to these Heme:		
	(I) Revenue included on Form 990, Part VIII, III	ne 1		b 4
	IN A SOCIETY IN CONTROL OF THE CASE OF THE			
2	if the organization received or held works of art	, historical treasures, or other sim	lar assets for financia	dein novide the
	ionoming amounts required to be reported unde	NT FASB ASC 958 relating to these	ltemer .	
	Revenue included on Form 990. Part VIII. Ilne 1	1		<b>▶</b> \$
	Assets included in Form 990 Part X			\$
or P	perwork Reduction Act Notice, see the instruct	lons for Form 990.		Rehadula D (Form 000) 1040

200	hedule D (Form 990) 2019 Boys & Giris Ciub	of North County					me o	044044		
P	Organizations Maintaining	Collections of Ar	Histor	ical Tre	actives or	Othor	Challes Ace	241614	41_018200	Page
3	Certificing organization, a scdristion :	accession, and other i	records, c	heck an	of the follow	na tha	t make signific	ent use o	Turruea The	/
	conection items (cueck all that apply)				,		THE PROPERTY OF	MIL GGC G	ii ito	
4	Public exhibition		d 🔲	Loan or	exchange pr	ogram				
- 1	b Scholarly research		• 🗍	Other		_				
(	Preservation for future generation	ns								
4	Provide a description of the organizat	tion's collections and o	explain ho	w they f	arther the orga	anizeti:	on's exempt pu	rpose in l	Part	
5										
•	During the year, did the organization assets to be sold to raise funds rather	solicit or receive done	MONS OF A	rt, histori	cal treasures,	or oth	er similar		_	
102	Escrow and Custodial Arra	TACTOR DE ITIER (CONTRO	o as part	OI UIB OI	ganization's c		on?		Yes	No
20,000	Complete if the organization	nigeinents. Answered "Yes" on	Form 9	on Dad	IV line 0 e					
-	990, Part X, Ilne 21,			oo, ran	14, IIIIC 8, U	ı ıabo	rted an amou	nt on H	orm	
10		custodian or other inte	emediary	for cont	ributions or of	her se	tale not		_	_
	included on Form 990, Part X?					1104 424	SALTS LICK		Yes	No
b	if "Yes," explain the arrangement in Pa	art XIII and complete	the follow	ing table	88		3553	<u> </u>	100	) MO
		•						Amount		
C		5 F - F RT F5	0.702.0	7 I .	1 × 5.	10				
d		- EN 20 E SE	75 77	11/2/20		10				_
9		41 C + 1607 + + + +	+ ¥1:0	154 D		16				
•		* * * * * * * * *	14	25 17 1	# 11 · · ·	11				- (
2a	A Sering Asset I II WARRING OIL OIL ION	nt on Form 990, Part )	K, line 21,	for escri	ow or custodia	al acco	unt liability?	П	/es X	No
ь	in seal and an entering all the little	art XIII. Check here if	the explai	nation he	s been provid	led on	Part XIII	171 51		
Par	Endowment Funds.									
	Complete if the organization a	answered "Yes" on	Form 99	0 Part	IV. line 10.					
		(a) Current year	(b) Prior	year	(c) Two years b	pack	(d) Three years be-	ok (e) F	our years	back
1a	Beginning of year balance								,	
þ	Contributions									
C	Net investment earnings, gains,	1 0								
d	and losses . Grants or scholarships					_				
-	Other expenditures for facilities					_				
•	and programs			10						
- 1	Administrative expenses			-		-				
a	End of year balance	0		0		0		-		
2	Provide the estimated percentage of the		alance (lin		ump (al) hald			0		0
	Board designated or quasi-endowment	<b>&gt;</b> %		a igi oo	ulling (el)) Heild	ao.				
b	Permanent endowment	%								
C	Term endowment ▶	%								
	The percentages on lines 2a, 2b, and 2	2c should equal 100%	١.							
3a	Are there endowment funds not in the	possession of the orga	<b>enization</b>	that are	held and adm	inistere	d for the			
	organization by:							- 1	Yes	No
	(I) Unrelated organizations		(E) (C)	CG 1754	P FW 455	# . T	20. 19.5	3a(I)		
b	(ii) Related organizations .		CH 300	10000	354 8524 95791		100	3a(ii)		
4	If "Yes" on line 3a(II), are the related on Describe in Part XIII the intended uses	ganizations listed as r	required o	n Sched	ule R? . 💮 🔉		*# # MC	3b		
Part	Land, Buildings, and Equipm	or the organization's	endowne	nt tunas.						
Em-11	Complete if the organization a	newared "Vee" on f	Earm 00	n David	M line dde i	O				
	Description of property	(a) Cost or other						X line	10.	
	committee i of biobaid.	(a) Cost or other (Investment			other basis her)		ocumulated precistion	(d) Bo	ook value	
1a	Land		0	/or	47,000	90	N SOMETHON			
b	Buildings		0		1,419,624		830.013			000
C	Leasehold improvements		0		702,920		328.737			611
d	Equipment		0		428,539		345.569			183
0	Other		0		43 519		32,207			970 312
Total	. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, i	Part X co	lumn (B)	line 10c.		UZ ZOF		1 106	

	(a) Description of accurity or extegory (including name of security)	(b) Book value	IV line 11b. See Form 990 Part X	
(1) Finan	cial derivatives	. 0	Cost or end-of-year market value	_
(2) Closel	ly held equity interests	. 0		
(3) Other				
(B)	bose 902 3 Lv= = 192 4 dv = 1 = p3 L b = 2 & 2 & 2 = = 0 = p2 = b = p			
<u>(C)</u>				
(D) (E)				
(F)				
(G)	,			_
(H)				
Total. (Colu	imn (b) must equal Form 990, Part X, cot. (B) line	12) > 0	TO THE REAL PROPERTY.	W.
Part VIII		10		
	Complete if the organization answ	ered "Yes" on Form 990 Part	V line 11c. See Form 990, Part X	line 13.
	(a) Description of Investment	(b) Book value	(c) Method of valuation: Coat or end-of-year market value	
(1)				
(2)				
(3)				
(5)				
(6)				
(7)				_
(8)				_
(9)				
Part IX	mn (b) must equal form 990, Pert X, col. (8) line to Other Assets.  Complete if the organization answ	· · · · · · · · · · · · · · · · · · ·	V line 11d. See Form 900. Pert V	line 15
	(a	) Description	(b) Book	
A C C				
7.77				
(2)				
(2)				
(2) (3) (4)				
(2) (3) (4) (5)				
(2) (3) (4) (5)				
(2) (3) (4) (5) (6) (7)				
(1) (2) (3) (4) (5) (6) (7) (8)				
(2) (3) (4) (5) (6) (7) (8) (9)	umn (b) must equal Form 990, Part X, col	(B) line 15.)		
(2) (3) (4) (5) (6) (7) (8) 9)	Other Liabilities. Complete If the organization answer			art X,
(2) (3) (4) (5) (6) (7) (8) 9) Otal. (Cole	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
(2) (3) (4) (5) (6) (7) (8) (9) (Coli	Other Liabilities. Complete If the organization answelline 25.			
(2) (3) (4) (5) (6) (7) (8) (9) (rtal. (Cole Part X	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
(2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (7) (7) (8) (9) (1) (1) Federal (2) (3)	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
(2) (3) (4) (5) (6) (7) (8) 9) Ortal. (Cole Part X	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
2) (3) (4) (5) (6) (7) (8) (9) Otal. (Cole Part X  1) Federa (2) (3) (4) (5)	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
2) 3) 4) 5) 6) 7) 8) 9) rtal. (Cole 2art X	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
2) 3) 4) 5) 6) 7) 8) 9) otal. (Cole 2art X  1) Federa 2) 3) 4) 5)	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	
(2) (3) (4) (5) (6) (7) (8) 9) otal. (Cole	Other Liabilities. Complete If the organization answelline 25.	ered "Yes" on Form 990, Part I	/, line 11e or 11f. See Form 990, Pa	

# SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundralsing or Gaming Activities

Complete if the organization enewered "Yee" on Form \$90, Part IV, line 17, 18, or 19, or 19 the organization entered more than \$16,000 on Form 990-EZ, line 6e.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service

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

Remark Cirio Chilo of the st					Employer Identifica	on number
Boys & Girls Club of North County  Fundralsing Activities	95-2241614					
Fundraising Activities. Form 990-EZ filers are no	Complete if the	organiza	tion answ	ered "Yes" on Fo	rm 990, Part IV, I	ine 17.
1 Indicate whether the organization	od required to C	omplete ti	ils part.		bh se	
a Mail solicitations			MONON and	ng activities. Check of non-government (	all that apply.	
b Internet and email solicitations				of government grant		
c Phone solicitations				oi governinent gram İraising events	8	
d in-person solicitations			pocies fulk	Striets Susers		
2a Did the organization have a writter	or oral agreeme	and scalety many	المعالية المارية	Cool, all - all - all - a	10	
key employees listed in Form 990,	Part VID or entit	r in connec	tion with a	(including officers, c	irectors, trustees,	X Yes No
b If "Yes," list the 10 highest paid ind	ividuals or entitle	s (fundrale	ers) curem	ant to acroements u	nder which the fire	X Yes _ No
compensated at least \$5,000 by th	e organization.	- (	o. o, pa. oz.	ant to agreement the		Maliser is to be
(I) Name and address of individual		(ND DM a.m.	designation in the same		(v) Amount paid to	
or entity (fundraleer)			(lv) Gross receipts from activity	(or retained by) fundralser listed in	(vii) Amount paid to (or retained by) organization	
			inclin country	col. (i)		
4 The Court Court		Yes	No			
1 The Gavel Group 26439 Rancho Pk Lake Forest CA 92630	Event Auction					
2		-	Х	87,445	17,250	70,195
_						
3				0	0	0
Y-				0	0	•
						0
6					0	0
•						
6	_			0	0	0
_						
7				0	0	0
				0	0	0
8						
9				0	0	
10		-	_	0	0	0
				0		_
				- 0	0	0
Total .	F 4 90	¥ 3		87,445	17,250	70,195
3 List all states in which the organizati	on le registered (	or <b>licensed</b>	to solicit co	ontributions or has b	een notified it is ex	empt from
registration of tick/titilitig.						•
				~~~~~~~~~~~~~~~~~~		
=		**				
				<u> </u>		
<u> </u>						

Ĺ

	===	(a) Event #1 Fundraising Event	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
R .		(evers type)	(event type)	(total number)	col. (s))
Movernus ,	Gross receipts STATE	185 949		0	185,949
	A A A A A IL INCHIA (III III III III III III III III III	98,418		0	98,418
+	ilne 2) . , ,	87,531		0	87,531
4	Cash prizes			0	
6	Noncash prizes			0	0
6	Rent/facility costs			0	0
6 7 8	Food and beverages.			o	0
8	Entertainment			0	0
9	Other direct expenses .	25,290		0	25,290
10	Direct evenence summany Add i	Been different Die est	/d\		
11 art II	Net income summary. Subtract	line 10 from line 3, colun	nn (d)		(25,290) 62,241
11	Net income summary. Subtract	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more
11 art II	Gaming. Complete if the than \$15,000 on Form 9	line 10 from line 3, colum corganization answer	nn (d)		00.044
11	Gaming. Complete if the	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more
11 ort II	Gaming. Complete if the than \$15,000 on Form 9	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more (d) Total gaming (add col. (a) through col. (c))
11 art II	Gaming. Complete if the than \$15,000 on Form 9	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more (d) Total gaming (add col. (a) through col. (c))
11 art II 1	Gaming. Complete if the than \$15,000 on Form 96 Gross revenue	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more (d) Total gaming (add col. (a) through col. (c)) 0
11 art II 1	Gaming. Complete if the than \$15,000 on Form 98 Gross revenue Cash prizes Noncash prizes	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more (d) Total gaming (add col. (a) through col. (c)) 0 0
1 2 3 4	Gaming. Complete if the than \$15,000 on Form 96 Gross revenue. Cash prizes. Noncash prizes. Rent/facility costs.	line 10 from line 3, colunt o organization answer 90-EZ, line 6a.	nn (d)), Part IV, line 19, or re	62,241 ported more (d) Total gaming (add col. (a) through col. (c)) 0
111 2 3 4 5	Gaming. Complete if the than \$15,000 on Form 96 Gross revenue. Cash prizes. Noncash prizes. Rent/facility costs.	Ine 10 from line 3, columbia organization answere 90-EZ, line 6a. (a) Bingo	nn (d)	(a) Other gaming Yes% No	62,241 ported more (d) Total gaming (add col. (a) through col. (c)) 0 0
11 2 3 4 5	Gaming. Complete if the than \$15,000 on Form 96 Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes	nn (d)	Yes % No	62,241 ported more (d) Total gaming (add col. (a) through col. (c)) 0 0 0

11 12	95-2241614 Pag
12	Does the organization conduct gaming activities with nonmembers?
	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?
}	Indicate the percentage of gaming activity conducted in:
A	The organization's facility
b	An outside raciity
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name >
	Address >
	Does the organization have a contract with a third party from whom the organization receives gaming
	amount of gaming revenue retained by the third party >> \$ 0 and the
;	If "Yes," enter name and address of the third party:
	Name >
	Address >
	Garning manager information:
	Name >
	Saming manager compensation 👂 \$0
	Description of services provided Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer
	Director/officer

SCHEDULE O (Form 990 or 990-EZ)

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.irz.gov/Form990 for the latest information.

OMB No. 1848-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
Boys & Girls Club of North County

Employer identification number 95-2241614

Form 990, Part VI, Line 11b: The Chief Executive Officer reviews the Form 990 for general
accuracy before it is filed, in addition, the Form 990 is provided to Board Members for review
and appoval prior to filing.
Form 990, Part VI, Line 12c: The conflict of interest policy as well as situations and
positions that may lead to a conflict of interest are reviewed periodially to ensure that no
violations of the policy have taken place.
Form 990, Part VI, Line 19: The Organization's governing documents and tex forms are available
upon request.
Form 990, Part VI, Section B, Line 15a: The Board of Directors reviews compensation data to
establish guidelines for the organization.
^~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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A

TAXABLE YEAR California Exempt Organization FORM Annual Information Return Calendar Year 2019 or facal year beginning (mm/dd/yyyy) 07/04/2019 and ending (mm/dd/yyyy) 03/80/2020 Corporation/Organization name California corporation number BOYS & GIRLS CLUB OF NORTH COUNTY 0437493 Additional information. See instructions. FEIN 95-2241614 Street address (suits or room) 445 E IVY ST PMB no. FALLBROOK 92028 Foreign country name Foreign province/state/orwarts Foreign postal code Yes X No if exempt under R&TC Section 23701d, has the organization D Final Information Return? If "Yee," enter the gross receipts from nonmamber sources  $\dots$  \$ if organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. E Check accounting method: (1) Ceah (2) X Accrual (3) Other No filing fee is required..... F Federal return filed? (1). 900T (2). 990PF (3). 8ch H (990) M is the organization a Limited Liability Company? . . . . . . . . . . . . No (4) X Other 990 series Did the organization file Form 100 or Form 109 to H is this organization in a group exemption . . . . . . . . . . . . . Yes 🔀 No O is the organization under audit by the IRS or has the if "Yes," what is the parent's name? IRS audited in a prior year?..... 👰 🗌 Yes 🔯 No P is federal Form 1023/1024 pending? . . . . . . . . . . . . Yes 🔯 No Did the organization have any changes to its guidelines Date filed with IRS not reported to the FTB? See instructions. . . . . . . . . . . . . . . . Yes X No Part i Complete Part I unless not required to file this form. See General information B and C. 244,848 00 38,281 00 1,265,427 00 4 Total gross receipts for fiting requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B . . . . [4] 1,548,556 00 7 Total costs. Add line 5 and line 6 ..... 00 8 Total gross income. Subtract line 7 from line 4 1,548,668 00 9 Total expenses and disbursements. From Side 2, Part II, line 18 ...... Espandes 1.721.139 00 -172.583 00 00 00 90 Filing Fee 14 00 15 Filling fee \$10 or \$25. See General information F 15 00 16 Penalties and Interest. See General Information J 16 00 Under peneities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and 00 belief, it is true, correct, and complete. Declaration of preparer (other their texpeyer) is based on all information of which preparer has any knowledge. Sign Here Signature ■ Talephone of officer Preparer's Charle If salt. 03/02/2021 employed > Paid P01871456 Firm's name (or yours. Preparer's Firm's FEIN ►MUNGER & COMPANY, CPAS if self-employed) and address **Use Only** 47-3342732 2170 SOUTH EL CAMINO REAL, STE. 217, OCEANSIDE, CA Telephone 의(760) **730-8020** 

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish autofibute information

	1		Supre Late H CL Intilities and Sec				
		Gross sales or receipts from all busing	less activities. See instruc	tions			241,722
	1	Interest	,	• • • • • • • • • • • • • • • • • • • •			515 (
Receipts from	١	Dividends					10
Other	13	Gross rents	**********				10
Sources		Gross royalties					0
	1 3	Gross amount received from sale of a	issets (See Instructions)				C
		Other Income. Attach schedule			· · · · · · · · · · · · · · · · · · ·		2,611 0
	B	Total gross sales or receipts from other source	es. Add iine 1 through line 7, E	nter here and on Side 1, Part I,	line 1 8		244,848 0
		Contributions, gifts, grants, and simila	ir amoun <b>ts paid. Attach s</b> c	:hedule			0
	שנ	Dispursements to or for members			<b>6</b> 40		0
	11	Compensation of officers, directors, a	nd trustees. Attach sched	ule			95, 102 0
	12	Other salaries and wages					1.025.885 0
Expenses	13	Interest		************			0
end Diaburae-	14	Taxes					94,072 0
ments	70	Koms			A 4-		57,141 0
	10	Depreciation and depletion (See Instr.	(Ctions)		in ac		125,085 0
- //		Crist Exhauses sid Disprissussuss's	Altech schoduje		6 47		323,854 0
Schedule	76	rossi expenses and disbursements. A	dd line 9 through line 17.	Enter here and on Side 1,	Part I, line 9 , 18		1,721,139 0
Assets	_	Balance Sheet	Beginning of	taxable year	End of ta	xable ;	
			(a)	(b)	(C)		(d)
				503,054			725.48
2 Net acc	Juni	receivable		37,106			1.80
d leveles	, a le	celvable					
4 Foderal	WB and						
6 Investment		state government obligations					
7 Investor	A IID	In other bonds	EFERNAL CIC		AREA MARKET STATE OF THE STATE		
9 Modeen	rivus n lea	in stock	22 E 15 E				
9 Other in	onie	nns				0	
		ble assets				0	
h Lase	TUIS COO	umulated depreciation	2,594,602		2,594,602		
44 Lend	aluc		( 1,411,441 )	1,183,161	1,536,528		1,058,076
12 Other se	enda.	Attach schedule		47,000	ELECTIVE ST		47,000
						0	
Jabilities a				1,770,321	ALC: NO PARTY OF		1,832,363
		rable			SCHOOL H	1000	
5 Contribut	lone	, gifts, or grants payable		59,838		0	81,483
6 Bonds ar	d ne	ites payable			200	0	
7 Mortgage	B D4	yable			VI STATE OF THE ST	0	
8 Other lint	عتان	s. Attach schedule				0	233,000
9 Capital si	ock	or principal fund					
0 Pald-in or	CRO	ital surplus. Attach reconcilistion				0	
1 Retained	eam	lings or income fund		4 740 400		0	
		e and net worth		1,710,483 1,770,321		9	1 537 900
chedule M		Reconciliation of income per boo	de with Income non set	1,770,321].			1,832,363
		Do not complete this schedule if the	amount on Schedule I	ine 13. column (d) le teen	then are one		
Net incom	в ре	r books	-172,583				
Federal in	com	e tex	0	not included in this re		-	
Excess of	cap	Ital losses over capital gains	0	8 Deductions in this ret	win. Attach schedule	0	
Income no	rt rec	corded on books this year.	THE RESERVE OF THE RE	against book Income			
		le	0	Attach schedule	uns year.	pervi	100
		orded on books this year not	ELONG BURGIN	9 Total, Add line 7 and )			
		is return. Attach schedule	0	10 Net income per return			
Total. Add	line	1 through line 5	-172,583			1355	HIS MARCH
			-1/2,003	Subtract line 9 from li	10 5		-172 583

# 2019 Depreciation and Amortization

3885F

Atte	ch to Form 541, Form 10	9, or Form 199.							
Name	as shown on tax return					Tel	in .		
	S & GIRLS CL					1	-2241614		
Tangi	bia and intengible assets place:	in service during the 2	2019 taxable year:		Depreci			Amortizat	Hon
	(a) Description of property	(b) Date placed in service (mm/dd/yyyy)	(c) Cost or other basis	(d) Method of figuring depreciation	(e) Life or rate	Depreciation for this year	r (g) Code section	(h) Period or percentage	(7) Amortization for this year
1									
					_				
Add I	ine 1 column (f) and colum	ın (I) amounts. See	instructions				F-5 7	STATE OF THE PARTY	
Depr	eclation								
2	California depreciation for Be sure to make adjustme	ents for any basis o	Merences.						1000
3	Total California depreciati	on. Add line 1(1) an	d line 2 , , ,					3	125,085
	tization								
4	California amortization for Be sure to make adjustme	intangibles placed ants for any basis d	in service beginn Merences.	ning before the	2019 tex	able year		4	
6	Total California amortizati	on. Add fine 1(i) and	d line 4 , ,	* * * * * * * * * * * * * *				5 =	
6	Total depreciation and am	ortization. Add line	3 and line 5. See	instructions .	,,,,,,			6 =	125,085

# **General Information**

In general, for taxable years beginning on or after January 1, 2015, California law conforms to the Internal Revenue Code (IRC) as of January 1, 2015. However, there are continuing differences between California and federal law. When California conforms to federal tax law changes, we do not always adopt all of the changes made at the federal level. For more information, go to fitb.ca.gov and search for conformity. Additional information can be found in FTB Pub. 1001, Supplemental Guidelines to California Adhustments.

The instructions provided with California tax forms are a summary of California tax law and are only intended to aid taxpayers in preparing their state income tax returns. We include information that is most useful to the greatest number of taxpayers in the limited space available. It is not possible to include all requirements of the California Revenue and Taxation Code (R&TC) in the Instructions. Taxpayers should not consider the instructions as authoritative law.

# A Purpose

Use form FTB 3885F, Depreciation and Amortization, to compute depreciation and amortization allowed as a deduction on Form 541, California Fiduciary Income Tax Return, Form 199, California Exempt Organization Business Inscene Tax Return, or Form 199, California Exempt Organization Annual Information Return, Attach form FTB 3885F to Form 541, Form 109, or Form 199.

Depreciation is the annual deduction allowed to recover the cost or other basis of business or income producing property with a determinable useful life of more than one year. Land is not depreciable.

Amortization is an amount deducted to recover the cost of certain capital expenses over a fixed period.

# B Federal/State Differences

California law has not always conformed to federal law regarding depreciation methods, special credits, or accelerated write-offs. Consequently, the recovery periods and the basis on which the depreciation is calculated may be different from the amounts used for federal purposes. Reportable differences may occur if all or part of your assets were placed in service:

 Before January 1, 1987. Californie disaltowed depreciation under the federal Accelerated Cost Recovery System (ACRS). California depreciation is calculated in the same manner as in prior years for those seasts.

- On or after January 1, 1987. California provides special credits and accelerated write-offs that affect the California beals for qualifying assets. California does not conform to all the changes to federal law enacted in 1993. Therefore, the California basis or recovery periods may be different for some assets.
- On or either September 11, 2001. California has not conformed to the faderal Job Creation and Worker Assistance Act of 2002 which allows taxpayers to take an additional first year depreciation and Alternative Minimum Tax depreciation adjustment for property placed in service after September 10, 2001.

ne 7, Part II (CA 199) - Other Income Other Income	2,61
	-
7	
8	
Total 9	

1	Pension plans, employee benefits .	04.075
2	Legal fees	81,675
	Legal fees	0
		9,000
		10,933
		7.215
	ruiuisi ziio pupilettona	
	Special events direct expenses	0
	Office evinence	25,290
		57, 281
	Other expenses	132,460
	10	
	Tabe	
-	Total	323 854

STATE OF GALIPORNIA RRF-1 (Rev. 09/2017)

MAR. TO: Ragistry of Charlable Trurie P.O. Box 903447 Sacramento, CA 94203-4470

8TREET ADDRESS: 1300 | Street Secremento, CA 95814 (918) 210-8400

WEBSITE ADDRESS:

DEPARTMENT OF JUSTICE PAGE 1 of 8 **ANNUAL REGISTRATION RENEWAL FEE REPORT** TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code

11 Cal. Code Regs. sections 301-306, 309, 311, and 312
Failure to submit the report arrantly no later than four months and filteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or timp penalties. Revenue & Taxation Code section 23703; Government Code section 12888.1. IRS extensions will be honored.

(For Registry Use Only)

Boys & Girls Club of North County		T			
Name of Organization		Chec	k if: Change of address		
155000000000		- 10			
List all DBAs and names the organization uses	or has used	-   🗆 .	Amended report		
445 E Ivy St					_
Address (Number and Street)		State	Charity Registration Number 0	437493	3
Fallbrook, CA 92028		- 1			_
City or Town, State, and ZIP Code		—   Согра	pration or Organization No. CT	04430	
(780) 728-5871 Telephone Number	Wisonb@bgcnorthcounty.org	- 1			
The state of the s	-mail Address	Fede	ral Employer I.D. No. 95-2241	1614	
	RENEWAL FEE SCHEDULE (11 Cal. C Make Check Payable to Departme	iode Regi int of Just	ice sections 301-307, 311, and 312)		
Gross Annual Revenue Fas	Gross Annual Revenue	Fee	Gross Annual Revenue	_	_
Lees than \$25,000	Between \$100,001 and \$250,000	_		_	Pee
Between \$25,000 and \$100,000 \$25	Between \$250,001 and \$1 million	\$50 \$75	Between \$1,000,001 and \$10 million Between \$10,000,001 and \$60 million	1 \$	\$150
ART A - ACTIVITIES			Greater than \$50 million		\$225 \$300
For your most recent full accounting p	period (beginning7/1/2019	endi	ing 6/30/2020 ) list:		
Gross Annual Revenue \$ 1,548,55	56 Noncesh Contributions \$		O Total Assets 8	000.00	_
Program Expenses \$	1,447,027 Total Ex		Total Added a	532,36	3
ART R - STATEMENTS DECARDING CO.	TOTAL TOTAL PARTY	chauses s	1,695,849		
ART B - STATEMENTS REGARDING ORGANIC ote: All questions must be answered. If you are providing an explanation and details for se	man Banalida a dat				
	an Jao (askolias' Lisiist is Jan Kill-") !!	Miruellone	for information regulated		-
During this reporting period, were there any on	ntrade loons loons			Yes	No
officer, director or trustee thereof, either directly	y or with an entity in which any such office	r, director	Of trustee had any financial interests		
During this reporting period, was there any that	. embezziament disamien er misuse et e		All has been sent to the sent	+	X
					x
During this reporting period, were any organization	tion funds used to pay any penalty, fine or	r Judament	?		1
During this reporting period, were the services of	of a commarcial fundrales, fundrales as	unani da			х
coventurer used?	a commission forterance, rungraming co	munei 10t C	narkable purposes, or commercial		
During this reporting period, did the organization	D Manchan and accommend to a			X	
A harred are an alfentivenor	ii iscerve any governmental funding?				6
During this reporting period, did the organization	n hold a raffie for charitable purposes?			X	-
					x
Does the organization conduct a vehicle donate					
Did the organization conduct an independent au	dit and prepare audited financial statemer	nts in ecco	rrience with		Х
generally accepted accounting principles for this	reporting period?	III WILL	idmics will	1 1	
At the end of this reporting period, did the organi	Eation hold restricted pat senate while an			X	_
Plane under maralle all met met and	TOTAL STATE OF THE PARTY OF THE	bound usi	juntive unrestricted net assets?		х
clare under penalty of perjury that I have exa belief, the contant is true, correct and comp	mined this report, including accompa	nying doc	currents, and to the best of my knowle	rine	
					- 1
Signature of Authorized Agent	Ailison Barclay	CE	<b>60</b>		
AND MAINTENANT MARIE	Printed Name	- 12	Title	Date	

Boys and Giris Club of North County State Charity Registration Number: CT-04430

FEIN: 95-2241614 CA Corp: 0437493 JUNE 30, 2020

# Responses to Form RRF-1

# Question 4

Gavel Group, 26439 Rancho Pkwy South #110 Lake Forest, CA 92630 (949) 900-2020

#### Question 5

State of CA Dept of Education Child Nutrition Program CACFP 1430 N Street
Sacramento, CA 95814
(916) 324-0085
Monica Ortega

# **Question 8**

The organization engaged a CPA firm to conduct an audit.



2020-2021 Fiscal Year

# Monthly Financial Statement Month Ending June 30, 2021

Balance Sheet
Aging Summary
Income and Expense
Profit and Loss

# Boys & Girls Clubs of North County Balance Sheet

As of June 30, 2021

	Jun 30, 21	Jun 30, 20
ASSETS Current Assets	714,540	727,287
Fixed Assets	1,021,704	1,105,077
TOTAL ASSETS	1,736,244	1,832,363
LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable		
2000 · Payables	1,334	10,066
Total Accounts Payable	1,334	10,066
Credit Cards	8,007	3,492
Other Current Liabilities	50,779	280,905
<b>Total Current Liabilities</b>	60,119	294,463
Total Liabilities	60,119	294,463
Equity	1,676,124	1,537,900
TOTAL LIABILITIES & EQUITY	1,736,244	1,832,363

2:28 PM 08/03/21

# Boys & Girls Clubs of North County A/R Aging Summary As of June 30, 2021

	Current	1 - 30	31 - 60	61 - 90	> 90	TOTAL
Fallbrook Union Elementary School Dist.	0	0	20,000	0	0	20,000
TOTAL	0	0	20,000	0	0	20,000

# Boys & Girls Club of North County Profit & Loss Budget Overview July 2020 through June 2021

	Jul	'20 - Jun 21	1	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense Income						
4000 · Contributions	\$	10,638	\$	19,500	\$ (8,862)	55%
4200 · Foundation Income	\$	21,671	\$	30,000	\$ (8,329)	72%
4300 · Fundraising Gross	\$	244,981	\$	305,000	\$ (60,019)	80%
4500 · Grants-Corp	\$	187,436	\$	110,000	\$ 77,436	170%
4600 · Grants-Govt	\$	1,029,981	\$	922,806	\$ 107,175	112%
4625 · PPP Loan Forgiveness - Pending	\$	233,000				
4650 · Grants-Foundation	\$	79,085	\$	61,600	\$ 17,485	128%
4700 · Investment Income	\$	91	\$	500	\$ (409)	18%
4800 · Membership Dues	\$	5,820	\$	18,000	\$ (12,180)	32%
4900 · Miscellaneous/other	\$	-	\$	2,000	\$ (2,000)	0%
4950 · Program Fees	\$	195,106	\$	96,585	\$ 98,521	202%
Total Income	\$	2,007,808	\$	1,565,991	\$ 441,817	128%
Gross Profit	\$	2,007,808	\$	1,565,991	\$ 441,817	128%
Expense						104%
6000 ⋅ 1a Salaries	\$	1,294,776	\$	1,242,420	\$ 52,356	
6010 ⋅ 1b Payroll Tax & Fees	\$	90,063	\$	104,363	\$ (14,300)	86%
6020 · 1c Employee Ben	\$	89,750	\$	80,000	\$ 9,750	112%
6080 ⋅ Conf/Mtgs	\$	2,836	\$	3,750	\$ (914)	76%
6100 · Contributions EXPENSE	\$	-	\$	-	\$ -	0%
6120 · Dues	\$	9,646	\$	13,344	\$ (3,698)	72%
6150 · Equip R & M	\$	12,003	\$	13,000	\$ (997)	92%
6156 · Fundraising Expense	\$	26,756	\$	58,000	\$ (31,244)	46%
6170 · Insurance	\$	37,052	\$	34,200	\$ 2,852	108%
6180 · Gov. Snack Program	\$	14,151	\$	25,000	\$ (10,849)	57%
6200 · Legal & Accounting	\$	16,590	\$	13,600	\$ 2,990	122%
6230 · Marketing/Advertising	\$	6,908	\$	4,000	\$ 2,908	173%
6250 · Occupancy	\$	59,996	\$	59,030	\$ 966	102%
6260 · Personnel	\$	26,042	\$	7,000	\$ 19,042	372%
6300 · Prof Fees	\$	6,306	\$	4,120	\$ 2,186	153%
6330 · Supplies	\$	62,678	\$	84,000	\$ (21,322)	75%
6340 · Telephone	\$	10,886	\$	10,500	\$ 386	104%
6350 · Transportation	\$	-	\$	-	\$ -	0%
6360 · Vehicles	\$	8,086	\$	10,000	\$ (1,914)	81%
Total Expense	\$	1,774,525	\$	1,766,327	\$ 8,198	100%
Net Ordinary Income	\$	233,283	\$	(200,336)	\$ 433,619	116%
•				<u> </u>		
Net Income	\$	233,283	\$	(200,336)	\$ 433,619	116%
					 · .	

# Boys & Girls Clubs of North County Balance Sheet

As of June 30, 2021

	Jul 31, 20	Aug 31, 20	Sep 30, 20	Oct 31, 20	Nov 30, 20	Dec 31, 20	Jan 31, 21	Feb 28, 21	Mar 31, 21	Apr 30, 21	May 31,	Jun 30, 21
ASSETS Current Assets Checking/Savings	711,589	649,842	527,868	395,893	355,261	315,036	696,567	607,126	535,342	814,239	705,895	687,301
Accounts Receivable	1,800	1,800	1,800	483,850	485,650	485,650	1,800	187,204	365,404	3,600	95,961	20,000
Other Current Assets	0	0	0	0	0	0	0	0	0	0	20	7,239
<b>Total Current Assets</b>	713,389	651,642	529,668	879,742	840,910	800,685	698,367	794,329	900,745	817,839	801,877	714,540
Fixed Assets	1,097,581	1,090,084	1,082,588	1,075,092	1,067,596	1,060,099	1,052,603	1,045,107	1,037,611	1,030,115	1,020,065	1,021,704
TOTAL ASSETS	1,810,970	1,741,727	1,612,257	1,954,834	1,908,506	1,860,785	1,750,970	1,839,436	1,938,356	1,847,954	1,821,941	1,736,244
LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable	3,116	1,638	6,963	4,068	5,823	6,487	4,705	2,296	4,841	1,080	3,163	1,334
Credit Cards	4,955	2,283	0	0	0	1,050	1,050	0	0	0	536	8,007
Other Current Liabiliti	281,921	281,921	281,921	281,921	281,921	281,921	281,921	281,921	283,779	283,779	50,779	50,779
<b>Total Current Liabilities</b>	289,992	285,842	288,884	285,989	287,743	289,457	287,676	284,217	288,620	284,859	54,478	60,119
Total Liabilities	289,992	285,842	288,884	285,989	287,743	289,457	287,676	284,217	288,620	284,859	54,478	60,119
Equity	1,520,978	1,455,884	1,323,372	1,668,845	1,620,763	1,571,328	1,463,294	1,555,220	1,649,736	1,563,094	1,767,463	1,676,124
TOTAL LIABILITIES & EQU	1,810,970	1,741,727	1,612,257	1,954,834	1,908,506	1,860,785	1,750,970	1,839,436	1,938,356	1,847,954	1,821,941	1,736,244

# Boys & Girls Clubs of North County Profit & Loss

July 2020 through June 2021

	Jul 20	Aug 20	Sep 20	Oct 20	Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	TOTAL
Ordinary Income/Expense													
Income 4000 · Contributions	2,049	45	0	0	140	2,040	4,852	584	873	0	56	0	10,638
4200 · Foundation Income 4300 · Fundraising Gross	0 10,147	0 44,910	0 1,320	0 13,245	0 4,748	0 18,085	21,671 19,040	0 39,595	0 46,459	0 36,346	0 10,112	0 975	21,671 244,981
4500 · Grants-Corp	31,250	0	400	0	93,286	40,000	0	11,250	0	0	11,250	0	187,436
4600 · Grants-Govt	0	0	0	493,250	24,577	11,400	1,859	192,844	180,000	2,884	94,255	28,911	1,029,981
4625 · PPP Loan Forgiveness - Pending 4650 · Grants-Foundation 4700 · Investment Income	0 31,185 2	0 4,300 67	0 1,800 2	0 1,800 2	0 1,800 2	0 11,800 3	0 1,800 2	0 1,800 2	0 5,000 3	7,600 2	233,000 1,800 2	0 8,400 2	233,000 79,085 91
4800 · Membership Dues	180	1,440	690	720	60	0	120	0	(120)	30	1,200	1,500	5,820
4950 · Program Fees	11,218	11,763	10,626	16,825	13,830	10,870	11,625	13,790	17,965	14,340	21,055	41,199	195,106
Total Income	86,031	62,525	14,838	525,841	138,443	94,199	60,968	259,864	250,180	61,202	372,729	80,988	2,007,808
Gross Profit	86,031	62,525	14,838	525,841	138,443	94,199	60,968	259,864	250,180	61,202	372,729	80,988	2,007,808
Expense 6000 · 1a Salaries 6010 · 1b Payroll Tax & Fees	72,023 4,577	89,086 6,966	106,318 8,018	125,400 10,331	129,151 10,443	104,903 5,064	117,023 753	122,584 9,804	113,547 8,625	96,418 8,001	112,816 8,721	105,507 8,762	1,294,776 90,063
6020 · 1c Employee Ben	7,461	6,373	6,293	8,208	10,863	3,121	10,008	6,816	8,461	6,351	7,774	8,020	89,750
6080 · Conf/Mtgs	0	0	0	220	50	180	1,755	50	200	0	332	49	2,836
6110 · Depreciation 6120 · Dues	7,496 0	7,496 665	7,496 0	7,496 25	7,496 3,787	7,496 0	7,496 1,099	7,496 1,036	7,496 150	7,496 333	10,050 675	10,050 1,875	95,062 9,646
6150 · Equip R & M	987	998	1,033	1,038	1,000	980	977	974	988	987	956	1,085	12,003
6156 · Fundraising Expense	0	176	0	160	50	0	0	0	(1,007)	8,689	8,999	9,688	26,756
6170 · Insurance	4,955	2,697	0	3,926	3,400	3,427	3,553	2,511	2,706	3,139	899	5,836	37,052
6180 · Gov. Snack Program	0	306	1,536	1,633	1,378	1,158	223	1,456	1,089	1,619	2,123	1,629	14,151
6200 · Legal & Accounting	321	557	429	544	529	5,547	3,533	543	1,972	803	578	1,232	16,590
6230 · Marketing/Advertising	0	0	0	620	256	549	1,625	321	960	0	1,040	1,537	6,908
6250 · Occupancy	4,054	5,992	5,067	4,594	5,261	3,974	6,262	6,156	1,269	6,662	5,347	5,358	59,996
6260 · Personnel	0	641	3,649	4,675	5,401	1,217	2,863	175	3,094	861	560	2,907	26,042
6300 · Prof Fees	238	235	235	1,703	730	1,131	246	205	240	257	263	823	6,306
6330 · Supplies	216	3,707	5,633	7,769	5,535	3,558	10,537	5,334	4,508	4,057	5,372	6,453	62,678
6340 · Telephone	624	842	816	797	929	867	890	1,377	876	878	917	1,071	10,886
6360 · Vehicles	0	879	828	1,229	265	461	159	1,100	489	1,292	941	443	8,086
Total Expense	102,953	127,618	147,350	180,369	186,525	143,634	169,002	167,939	155,665	147,844	168,360	172,327	1,869,584
Net Ordinary Income	(16,922)	(65,093)	(132,512)	345,473	(48,082)	(49,435)	(108,034)	91,926	94,516	(86,641)	204,369	(91,339)	138,224
Net Income	(16,922)	(65,093)	(132,512)	345,473	(48,082)	(49,435)	(108,034)	91,926	94,516	(86,641)	204,369	(91,339)	138,224

# MUNGER & COMPANY, CPAs

2170 S. El Camino Real, Suite 217 Oceaside, CA 92054 (760) 730-8020 www.mungercpa.com

# **Boys and Girls Clubs of North County**

Audited Financial Statements June 30, 2020

# **Table of Contents**

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INDEPENDENT AUDITOR'S REPORT	1
FINANCIAL STATEMENTS	
Statement of Financial Position	2
Statement of Activities	3
Statement of Functional Expenses	4
Statement of Cash Flows	5
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# MUNGER & COMPANY, CPAs

2170 S. El Camino Real, Suite 217 Oceaside, CA 92054 (760) 730-8020 www.mungercpa.com

# INDEPENDENT AUDITOR'S REPORT

To the Board of Directors and Audit Committee of Boys and Girls Clubs of North County

We have audited the accompanying financial statements of Boys and Girls Clubs of North County, a nonprofit organization, which comprise the statement of financial position as of June 30, 2020, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

# 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.

# Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with accounting principles generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the corporation's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the corporation's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

# **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Boys and Girls Clubs of North County as of June 30, 2020, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

January 20, 2021

Munger & Company, CPAs

# BOYS AND GIRLS CLUBS OF NORTH COUNTY STATEMENT OF FINANCIAL POSITION June 30, 2020

# ASSETS

OPERATING ASSETS:		
Cash	\$	719,767
Restricted cash		5,720
Accounts receivable		1,800
Total Operating Assets	-	727,287
FIXED ASSETS:		
Land		47,000
Buildings and improvements		2,122,544
Furnishings and equipment		153,890
Vehicles		305,868
Timeshares		12,300
Less: accumulated depreciation		(1,536,526)
Total Fixed Assets		1,105,076
TOTAL ASSETS	¢	1 922 262
101111111111111111	\$=	1,832,363
LIABILITIES AND NET ASSETS		
LIABILITIES:		
Accounts payable and accrued liabilities	\$	61,463
PPP Loan		233,000
Total Liabilities		294,463
NET ASSETS:		
Without donor restrictions		
Undesignated		427,104
Invested in fixed assets, net		1,105,076
,		1,532,180
		, ,
With donor restrictions		
Purpose restrictions		5,720
		5,720
Total Net Assets Without Donor Restrictions		1,537,900
TOTAL LIABILITIES AND NET ASSETS	\$	1,832,363
		-,002,000

The Accompanying Notes are an Integral Part of the Financial Statements

# BOYS AND GIRLS CLUBS OF NORTH COUNTY STATEMENT OF ACTIVITIES

For the Year Ended June 30, 2020

REVENUES AND SUPPORT:		Without Donor Resrictions	With Donor Restrictions		Total
Grants	Φ	1 101 700 0	5.500	Ф	4 400 500
	\$	1,121,788 \$	5,720	\$	1,127,508
Special events, net of expense of \$25,290 Contributions		62,241			62,241
		39,501			39,501
Special event contributions		98,418			98,418
Youth program and league fees		154,191			154,191
Membership dues		38,281			38,281
Interest and other income	_	3,126		_	3,126
Total Revenues and Support		1,517,546	5,720		1,523,266
EXPENSES: Program Services: Club Leagues		579,752 73,013			579,752 73,013
After School	_	794,262		_	794,262
Total Program Services		1,447,027	-		1,447,027
Supporting Services:  Management and General  Fundraising	_	248,822			248,822
Total Supporting Services		248,822	-		248,822
Total Expenses	_	1,695,849	-	_	1,695,849
Change in Net Assets		(178,303)	5,720		(172,583)
Net Assets - Beginning of Year	_	1,710,483	<u>-</u>	_	1,710,483
Net Assets - End of Year	\$_	1,532,180 \$	5,720	\$_	1,537,900

BOYS AND GIRLS CLUBS OF NORTH COUNTY STATEMENT OF FUNCTIONAL EXPENSES For the Year Ended June 30, 2020

		Total	7.215	125,085	16,287	11,057	25,290	31,103	5,090	57,141	5,988	19,933	1.296,734	42,605	57,281	11,473	8,857	1,721,139	(25.290)	\$ 1,695,849
Services	Find	Raising	\$				25.290											25,290	(25,290)	<del>∽</del>
Supporting Services	Management	and General	\$ 5,796 \$	10,440	9,417	1,322		4,189	5,090	4,075	571	15,493	183,528		3,989	4,912		248,822	1	\$ 248,822 \$
		Total	1,419	114,645	6,870	9,735		26,914	ľ	53,066	5,417	4,440	1,113,206	42,605	53,292	6,561	8,857	1,447,027		794,262 \$ 1,447,027
	After	School	965 \$		5,791	7,458		20,448			3,504	3,983	718,731		29,489	3,656	237	794,262	•	794,262 \$
Program Services		Leagues	40 \$		271			629		2,056	59		61,430		8,022	909		73,013		73,013
		Club	414 \$	114,645	808	2,277		5,837		51,010	1,854	457	333,045	42,605	15,781	2,399	8,620	579,752	-	579,752
		EXPENSES:	Conferences and meetings \$	Depreciation	Dues and subscriptions	Equipment repair & maintenance	Special event expense	Insurance	Marketing	Occupancy	Other expense	Professional fees	Salaries and related benefits	Snack program	Supplies	Telephone	Vehicle costs	Total expense by function	Less expenses included with revenues on the statement of activities Special event expenses	Total expenses included in the expense section on the statement of activities

The Accompanying Notes are an Integral Part of the Financial Statements

# BOYS AND GIRLS CLUBS OF NORTH COUNTY STATEMENT OF CASH FLOWS For the Year Ended June 30, 2020

CASH FLOWS FROM OPERATING ACTIVITIES: Change in Net Assets Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:	\$	(172,583)
Depreciation		125,085
Changes in operating assets and liabilities:		ŕ
Accounts receivable		35,306
Accounts payable and accrued liabilities		1,625
Net cash provided by (used in ) operating activities		(10,567)
CASH FLOWS FROM FINANCING ACTIVITIES: Proceeds from PPP Loan		222 000
	_	233,000
Net cash provided by (used) in financing activities		233,000
Net Change in Cash		222,433
Cash at Beginning of Year		503,054
	_	
Cash at End of Year	\$_	725,487
Supplementary Information:	_	· · · · · · · · · · · · · · · · · · ·
Cash		719,767
Restricted Cash		5,720
Total Cash	_	725,487
	_	

NOTES TO FINANCIAL STATEMENTS
June 30, 2020

# Note 1. <u>Nature of Organization</u>

Boys and Girls Clubs of North County is a California non-profit agency established in 1962. Our mission is to provide a safe, caring environment in which youth can develop self-esteem, leadership skills, and enjoy educational and recreational activities under supervised programs. Boys and Girls Clubs of North County's main facility is located in Fallbrook, California.

# Note 2. <u>Summary of Significant Accounting Policies</u>

# **Basis of Presentation**

Boys and Girls Clubs of North County's financial statements have been prepared on the accrual basis of accounting.

# Cash and Cash Equivalents

Boys and Girls Clubs of North County has defined cash and cash equivalents as cash in banks and highly liquid investments with an original maturity of three months or less.

# Receivables and Credit Policies

Accounts receivable consist primarily of noninterest-bearing amounts due for program services. Boys and Girls Clubs of North County determines the allowance for uncollectable accounts receivable based on historical experience, an assessment of economic conditions, and a review of subsequent collections. Accounts receivable are written off when deemed uncollectable. Management determined that no allowance for doubtful accounts was necessary as all items were received subsequent to year end.

### **Property and Equipment**

Property and equipment additions are recorded over \$2,500 at cost, or if donated, at fair value on the date of donation. Depreciation and amortization are computed using the straight-line method over the estimated useful lives of the assets ranging from 3 to 40 years, or in the case of capitalized leased assets or leasehold improvements, the lesser of the useful life of the asset or the lease term. When assets are sold or otherwise disposed of, the cost and related depreciation or amortization are removed from the accounts, and any resulting gain or loss is included in the statements of activities. Costs of maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed currently.

Carrying values of property and equipment are reviewed for impairment whenever events or circumstances indicate that the carrying value of an asset may not be recoverable from the estimated future cash flows expected to result from its use and eventual disposition. When considered impaired, an impairment loss is recognized to the extent carrying value exceeds the fair value of the asset. There were no indicators of asset impairment during the year ended June 30, 2020.

NOTES TO FINANCIAL STATEMENTS
June 30, 2020

# Note 2. <u>Summary of Significant Accounting Policies (continued)</u>

# **Net Assets**

Net assets, revenues, gains, and losses are classified based on the existence or absence of donor or grantor imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Net Assets Without Donor Restrictions – Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions.

Net Assets With Donor Restrictions – Net assets subject to donor- (or certain grantor-) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

# Revenue and Revenue Recognition

Revenue is recognized revenue from services when the services are provided. We record special events revenue equal to the cost of direct benefits to donors, and contribution revenue for the difference. All services are transferred at a point in time.

Revenue is recognized as contributions when cash, securities or other assets, an unconditional promise to give, or notification of a beneficial interest is received. Conditional promises to give, that is, those with a measurable performance or other barrier, and a right of return, are not recognized until the conditions on which they depend have been substantially met. Our federal and state contracts and grants are conditioned upon certain performance requirements and the incurrence of allowable qualifying expenses.

# **Donated Services and In-Kind Contributions**

Volunteers contribute significant amounts of time to our program services, administration, and fundraising and development activities; however, the financial statements do not reflect the value of these contributed services because they do not meet recognition criteria prescribed by generally accepted accounting principles. Contributed goods and services are recorded at fair value at the date of donation. No significant contributions of such goods or services were received during the years ended June 30, 2020.

# **Advertising Costs**

Advertising costs are expensed as incurred.

# **Functional Allocation of Expenses**

The costs of program and supporting services activities have been summarized on a functional basis in the statements of activities. The statements of functional expenses present the natural classification detail of expenses by function. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

NOTES TO FINANCIAL STATEMENTS
June 30, 2020

# Note 2. <u>Summary of Significant Accounting Policies (continued)</u>

### **Income Taxes**

Boys and Girls Clubs of North County is organized as a California nonprofit corporation and has been recognized by the IRS as exempt from federal income taxes under IRC Section 501(a) as an organization described in IRC Section 501(c)(3), qualify for the charitable contribution deduction under IRC Section 170(b)(1)(A)(vi), and has been determined not to be a private foundation under IRC Sections 509(a)(1). Boys and Girls Clubs of North County is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS and California (Forms 199 and RRF-1). In addition, Boys and Girls Clubs of North County is subject to income tax on net income that is derived from business activities that are unrelated to their exempt purposes. Boys and Girls Clubs of North County is not subject to unrelated business income tax and have not filed an Exempt Organization Business Income Tax Return (Form 990-T) with the IRS or (Form 109) with California.

Boys and Girls Clubs of North County has reviewed its position for all open tax years and believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.

Boys and Girls Clubs of North County's federal and state Exempt Organization Tax Returns are subject to examination, generally for three years after they were filed for federal returns and four years for state returns.

#### **Estimates**

The preparation of financial statements in conformity with generally accepted accounting principles requires us to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates, and those differences could be material.

# Financial Instruments and Credit Risk

Boys and Girls Clubs of North County manages deposit concentration risk by placing cash with financial institutions believed by Boys and Girls Clubs of North County to be creditworthy. At times, amounts on deposit may exceed insured limits or include uninsured investments in money market mutual funds. To date, Boys and Girls Clubs of North County has not experienced losses in any of these accounts. Credit risk associated with accounts receivable is considered to be limited due to high historical collection rates and because substantial portions of the outstanding amounts are due from governmental agencies supportive of our mission.

#### **Subsequent Events**

We have evaluated subsequent events through January 20, 2021, the date the financial statements were available to be issued.

# NOTES TO FINANCIAL STATEMENTS

June 30, 2020

# Note 3. <u>Liquidity and Availability</u>

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

Cash and cash equivalents	\$ 725,487
Accounts receivable	1,800
Less donor restricted cash	(5,720)
	\$ 721,567

As part of the liquidity management plan, cash in excess of daily requirements are invested in savings accounts.

# Note 4. <u>Employee Benefit Plan</u>

Boys and Girls Clubs of North County has a 401(k) plan for its employees. In order to participate, an employee must be 21 years of age and must have completed one year of service. Boys and Girls Clubs of North County contributes an amount equal to three percent of each eligible employee's compensation. Boys and Girls Clubs of North County may also elect to provide a matching contribution for participants who make elective contributions. If made, the matching contribution is equal to the employees' contributions up to two percent of salary. The pension expense for the year ended June 30, 2020 was approximately \$40,000.

# Note 5. <u>Accumulated Paid Time Off (PTO)</u>

Accumulated PTO is recognized as a liability. Employees are allowed to accumulate up to the amount they would accrue in one year and seven months of employment. At termination, employees are compensated for any accrued PTO. As of June 30, 2020, the liability was \$37,134.

# Note 6. Net Assets With Donor Restrictions

Net assets with donor restrictions for programs totaled \$5,720 for the year ended June 30, 2020.

There were no net assets with donor restrictions that were released during the year ended June 30, 2020.

# Note 7. <u>Functionalized Expenses</u>

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include salaries and related benefits, occupancy, office, insurance, depreciation, and other, which are allocated on the basis of estimates of time and effort.

# Note 8. Related Party Transactions

Boys and Girls Clubs of North County periodically receives contributions from the Boys and Girls Club of Fallbrook Foundation (the Foundation). The Foundation was formed to help fund Boys and Girls Clubs of North County. The two organization share common board members. During the year ended June 30, 2020 received \$28,275 from the Foundation.

NOTES TO FINANCIAL STATEMENTS
June 30, 2020

# Note 9. <u>Concentrations of Revenues and Receivables</u>

A substantial amount of Boys and Girls Clubs of North County's support is received from local school district grants and contracts. Loss of this funding could have a significant impact on Boys and Girls Clubs of North County's ability to provide its program services.

# Note 10. PPP Loan

In May 2020, Boys and Girls Clubs of North County received a Paycheck Protection Program (PPP) Loan from the Small Business Administration through a bank totaling \$233,000. The loan has a fixed interest rate of 1.00%. The loan will become forgivable if the Boys and Girls Clubs of North County incurs sufficient qualifying expenses. Management believes that is has sufficient qualifying expenses for this loan to become fully forgivable. If the Boys and Girls Clubs of North County did not have sufficient expenses to qualify for the debt forgiveness, the loan would have required monthly payments of \$13,047 every month from the seventh month through the two year note term.