



AGENDA
BOARD OF DIRECTORS MEETING
Wednesday, August 9, 2023, 6:00 pm
1st floor Community Room, Administrative office
138 S. Brandon Road., Fallbrook, CA 92028
**All meetings are hybrid unless otherwise noted.*

In accordance with California Government Code Section 54953 teleconferencing will be used for this meeting. Board members, staff and members of the public will be able to participate by webinar by using the following link:

<https://us02web.zoom.us/j/85092529608?pwd=Y21JN1lvVUc2T3pnditiS3pQNHkxZz09>

Meeting ID: 850 9252 9608. Passcode: 336866 Participants will need to download the Zoom app on their mobile device. Members of the public will also be able to participate by telephone using the following number: +1-669-900-6833 Meeting ID: 850 9252 9608. Passcode: 336866

A. CALL MEETING TO ORDER / ROLL CALL / ESTABLISH A QUORUM / PLEDGE OF ALLEGIANCE

B. APPROVAL OF THE AGENDA

C. PUBLIC COMMENTS - ANNOUNCEMENT

Members of the public may address the Board regarding any item listed on the Agenda at the time the item is being considered. Members of the public may also speak on any item not listed on the Agenda which falls within the subject matter jurisdiction of the District immediately prior to Board Comments & Items for Subsequent Meetings section below. Members of the public attending in-person need to fill-out a "Request to Speak" card and those attending by webinar need to raise their hand at this time and identify the Agenda item they would like to speak on. The Board has a policy limiting any speaker to not more than five minutes.

D. CONSENT ITEMS -

- D1. Minutes of July 5, 2023, Finance Meeting
- D2. Minutes of July 12, 2023, Board of Directors Meeting
- D3. Minutes of July 12, 2023, FRHD Foundation Meeting
- D4. Minutes of July 19, 2023, Strategic Planning Committee
- D5. Minutes of July 26, 2023, Governmental & Public Engagement Committee

E. PRESENTATION- FALLBROOK FOOD PANTRY- CEO, SHAE GAWLAK

F. REPORTS/POSSIBLE ACTION -

- F1. Finance Committee – Directors Brown and Jeffries
- F2. Facilities Committee – Directors Jeffries and Mroz
- F3. Strategic Planning Committee – Directors Leach and Mroz
- F4. Governmental & Public Engagement – Directors Stanicek and Leach
- F5. Community Health & Wellness Center – Theresa Geracitano
- F6. Chief Executive Officer – Rachel Mason
- F7. General Counsel – Jeffrey Scott

G. DISCUSSION/POSSIBLE ACTION ITEMS –

- G1. Mission Statement Revision
- G2. Review/Award Youth Fitness Grants

H. BOARD MEMBER COMMENTS & ITEMS FOR SUBSEQUENT MEETINGS -

Other Director/Staff discussion item. Item(s) for future board agendas

Announcements of upcoming events:

See the District website event calendar at <https://www.fallbrookhealth.org/community-health-wellness-center>

Facilities Committee - 3rd Wednesday, August 16, 2023, at 10:00 am. CANCELLED
Strategic Planning Committee - 3rd Wednesday, August 16, 2023, at 5:30 pm. CANCELLED
Governmental and Public Engagement Committee – 4th Wednesday, August 23, 2023, at 5:30 pm.
Finance Committee – 1st Wednesday, September 4, 2023, at 4:30 pm.
Next Board of Directors Meeting – 2nd Wednesday, September 13, 2023, at 6:00 pm. CANCELLED

I. CLOSED SESSION

II. Personal matter pursuant to Government Code Section 54957(b)(1) - CEO Evaluation

J. RETURN TO OPEN SESSION

J1. Report After Closed Session

K. ADJOURNMENT

NOTE: I certify that on Friday, August 4, 2023 I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of Fallbrook Regional Health District, said time being at least 72 hours in advance of the meeting. The American with Disabilities Act provides that no qualified individual with a disability shall be excluded from participation in, or denied the benefits of District business. If you need assistance to participate in this meeting, please contact the District office 24 hours prior to the meeting at 760-731-9187.

***Please contact the Board clerk for translation services 48 hours before the meeting.**



Executive Assistant / Board Clerk

**GRANTEE PRESENTATION:
FALLBROOK FOOD PANTRY
CEO, SHAE GAWLAK**



MINUTES FINANCE COMMITTEE

Wednesday, July 5, 2023, at 4:30 P.M.

Administrative Office, 1st Floor Community Room, 138 S. Brandon Rd., Fallbrook

In accordance with California Government Code Section 54953 teleconferencing will be used for this meeting. Board members, staff and members of the public will be able to participate by webinar by using the following link:

1. Call to Order/Roll Call

Committee Members: Chair Terry Brown & Member Jennifer Jeffries
CEO Rachel Mason, Community Health & Wellness Center Administrator Theresa Geracitano, Executive Assistant Raquel Williams, Administrative Officer Judith Oswald, Accountant Susan Woodward

2. Public Comments – Announcement

None

3. Review of Financial Statements for May 2023

Report 1 – Balance Sheet Comparison of **May 2023**

Report 2 – Income Statement for the Month Ended **May 2023 & Fiscal Year to Date**

Report 3 – Profit & Loss Actual vs YTD Budget – **May 2023**

Report 4 – Approved Annual Budget **July 2022 – June 2023**

Report 5 – Local Agency Investment Fund (LAIF) Statement - **May 2023**

Report 6 – CalTrust Statement – **May 2023**

FRHD Compliance Report

Report 7 – Property Tax Revenue – **July 2022 – May 2023**

Report 8 – Check Detail Report as of **May 2023**

Report 9 – VISA Credit Card Statement – **May 2023**

CEO Mason asked for an increase of the Visa card due to the subscriptions and other expenses causing the card to reach its limit. The Committee agrees to increase the card to twelve thousand dollars. Recommendations will go to the full Board of Directors in July.

Report 10 – Community Investment Fund Report as of **May 2023**

Committee Chair Brown reviewed the above May 2023 financial reports.

Disclosures: The investments of the District are following the District's 2022-23 Investment Policy. The balances in the District's investment accounts give the District the ability to meet its expenditure requirements for the next eighteen (18) months.

5. Discussion Items-

Chair Brown brought up his concerns about the staff breaks and lunch hour. He wants to prevent future litigation and is concerned about employees taking advantage of themselves.

6. Board Member Comments and Future Agenda Items-
None

7. Adjournment-

There being no further business the meeting was adjourned at 5:15pm.

A handwritten signature in blue ink that reads "August Wilbi". The signature is written in a cursive style with a large initial 'A'.

Executive Assistant/Board Clerk

DRAFT



MINUTES
BOARD OF DIRECTORS MEETING
Wednesday, July 12, 2023, 6:00 pm

Community Health & Wellness Center
1636 E. Mission Road., Fallbrook CA 92028

In accordance with California Government Code Section 54953 teleconferencing will be used for this meeting. Board members, staff and members of the public were able to participate in the webinar.

A. CALL MEETING TO ORDER / ROLL CALL / ESTABLISH A QUORUM / PLEDGE OF ALLEGIANCE

Chair Bill Leach called the meeting to order at 6:10 p.m. and led the Pledge of Allegiance.
In attendance: Directors Barbara Mroz, Jennifer Jeffries, and Mike Stanicek. CEO Rachel Mason, Accountant Susan Woodward, Legal Counsel Jeffrey Scott, and Property Manager Roy Moosa.
Staff members: Executive Assistant Raquel Williams, Administrative Officer Judith Oswald, Community Health & Wellness Center Administrator Theresa Geracitano, Outreach & Communications Coordinator Jasmine Thomas.

B. APPROVAL OF THE AGENDA

Action: It was moved by Director Leach seconded by Director Stanicek to approve the agenda as presented.

Motion carried (5-0)

Director Leach...Aye
Director Jeffries...Aye
Director Brown...Aye
Director Stanicek...Aye
Director Mroz...Aye

C. PUBLIC COMMENTS – ANNOUNCEMENT

Bonsall resident Joe Beyer shared his appreciation to the Board for having the meeting at the CH&WC he gives kudos to the Board and staff for all the great efforts that are taking place at the center.

D. CONSENT ITEMS -

- D1. Minutes of June 7, 2023, Finance Meeting
- D2. Minutes of June 14, 2023, Board of Directors Meeting
- D3. Minutes of June 21, 2023, Facilities Committee
- D4. Minutes of June 28, 2023, Governmental & Public Engagement

Action: It was moved by Director Jeffries seconded by Director Stanicek to approve the consent items as presented.

Motion carried (5-0)

Director Leach...Aye
Director Jeffries...Aye
Director Brown...Aye
Director Stanicek...Aye
Director Mroz...Aye

E. PRESENTATION- SITELOGIQ- Josh Steeber and Jonathon Brown- Power point presentation attached to the minutes.

F. PRESENTATION of FISCAL YEAR 23-24 COMMUNITY HEALTH CONTRACT GRANT AWARDS

List of Grantees and funds awarded attached.

G. REPORTS/POSSIBLE ACTION -

- G1. Finance Committee – Directors Brown and Jeffries- Public comment from Joe Beyer inquiring if the District’s investments are in alcohol and tobacco? Director Brown referenced that the District’s investments are pooled with other municipalities and are compliant with California law.
- G2. Facilities Committee – Directors Jeffries and Mroz- Director Jeffries shared that the committee is pleased with the completed projects and is looking forward to the ADA compliance on the House of Wellness and the solar project.
- G3. Strategic Planning Committee – Directors Leach and Mroz- Strategic Planning meeting was not held last month to facilitate the Youth Fitness Grant meeting.
- G4. Governmental & Public Engagement – Directors Stanicek and Leach- Mission| Vision| Values revision. Community Health & Wellness Center – Theresa Geracitano- Report attached to the minutes.
- G5. Chief Executive Officer – Rachel Mason- Report attached to the minutes.
- G6. General Counsel – Jeffrey Scott- No new business to report the Legislature is about to go on break.

H. DISCUSSION/POSSIBLE ACTION ITEMS -

H1. Updated Community Health Contract & Youth Fitness Grant policy

Action: It was moved by Director Jeffries seconded by Director Stanicek to approve the updated youth fitness policy as presented.

Motion carried (5-0)

Director Leach...Aye

Director Jeffries...Aye

Director Brown....Aye

Director Stanicek....Aye

Director Mroz...Aye

H2. Youth Fitness Grant Application- CEO Mason added to the packet for the Board as reference.

H3. SitelogIQ Letter of Agreement- Chair Leach asked for the opinion of General Counsel Jeff Scott. Counsel Scott gave his approval. Discussion ensued.

Action: It was moved by Director Jeffries seconded by Director Brown to approve the Letter of Agreement (LOA) provided by SitelogIQ.

Motion carried (5-0)

Director Leach...Aye

Director Jeffries...Aye

Director Brown....Aye

Director Stanicek....Aye

Director Mroz...Aye

H4. *Recommendation from the Finance Committee-* UMPQUA Bank Credit Limit Increase- No action required.

I. BOARD MEMBER COMMENTS & ITEMS FOR SUBSEQUENT MEETINGS -

None

J. ADJOURNMENT-

There being no further business the meeting was adjourned at 7:31 pm.



Executive Assistant / Board Clerk



Fallbrook Regional HEALTH DISTRICT

...foundation

MINUTES

BOARD OF DIRECTORS FOUNDATION MEETING

Wednesday, July 12, 2023,

Community Health & Wellness Center

1636 E. Mission Road., Fallbrook CA 92028

In accordance with California Government Code Section 54953 teleconferencing was used for this meeting. Board members, staff and members of the public will be able to participate in the webinar.

A. CALL MEETING TO ORDER-

Chair Bill Leach called the meeting to order at 7:35 p.m. In attendance: Directors Barbara Mroz, Jennifer Jeffries, and Mike Stanicek. CEO Rachel Mason, Accountant Susan Woodward, Legal Counsel Jeffrey Scott, Staff members: Executive Assistant Raquel Williams, Administrative Officer Judith Oswald, Community Health & Wellness Center Administrator Theresa Geracitano, Outreach & Communications Coordinator Jasmine Thomas.

B. APPROVAL OF THE AGENDA-

Action: It was moved by Director Leach seconded by Director Stanicek to approve the agenda as presented.

Motion carried (5-0)

Director Leach...Aye

Director Jeffries...Aye

Director Brown...Aye

Director Stanicek...Aye

Director Mroz...Aye

C. PUBLIC COMMENTS-

None

D. DISCUSSION ITEMS-

Non-Profit Status Update. There are no updates currently.

E. BOARD MEMBER COMMENTS & ITEMS FOR SUBSEQUENT MEETINGS

None

F. ADJOURNMENT

Board Clerk



MINUTES
STRATEGIC PLANNING COMMITTEE

Wednesday, July 19, 2023, at 5:30 P.M.

Administrative Office, 1st Floor Community Room, 138 S. Brandon Rd., Fallbrook

In accordance with California Government Code Section 54953 teleconferencing was used for this meeting. Board members, staff and members of the public were able to participate in the webinar.

1. CALL MEETING TO ORDER/ROLL CALL –

Committee Members: Chair Bill Leach and Member Barbara Mroz

Staff: Executive Assistant Raquel Williams, Community Health & Wellness Center Administrator

Theresa Geracitano, Administrative Officer Judith Oswald

Members of the public: Gail and Roger, Foundation for Senior Care

2. PUBLIC COMMENTS – ANNOUNCEMENT

None

3. DISCUSSION ITEMS-

On going Urgent Care discussion, Chair Leach was hoping for an update on the PACE or Palomar project. Unfortunately, there are no updates on the Urgent Care matter Administrative Officer Judith Oswald shared with the committee that CEO Mason had a meeting regarding clinical services for the district however, there is nothing to report currently. Director Mroz, asked if there is a possible timeframe that this project will be completed? Ninety days? Administrative Officer Judith Oswald informed the committee that six months to a year is more likely. Discussion ensued.

4. BOARD MEMBER COMMENTS AND FUTURE AGENDA ITEMS-

None

5. ADJOURNMENT-

There being no further business the meeting was adjourned to 6:02 pm.

A handwritten signature in blue ink, appearing to read 'Raquel Williams', is written over a horizontal line.

Board Secretary/Clerk



MINUTES

GOVERNMENTAL & PUBLIC ENGAGEMENT COMMITTEE

Wednesday, July 26, 2023, at 5:30 P.M.

Administrative Office, 1st Floor Community Room,
138 S. Brandon Rd., Fallbrook, CA 92028

In accordance with California Government Code Section 54953, teleconferencing was used for this meeting. Board members, staff and members of the public were able to participate in the webinar.

1. Call to Order/Roll Call

Committee Members in attendance: Chair Mike Stanicek & Director Bill Leach
Staff: CEO Rachel Mason, Executive Assistant Raquel Williams, Community Health & Wellness Center Administrator Theresa Geracitano, Outreach & Communications Coordinator Jasmine Thomas.

2. Public Comments – Announcement

None

3. Discussion Items-

- a. Review the draft version of the Mission and Vision statements.
The new version of the Mission and Vision statement is attached to the minutes.
- b. New Community Outreach & Communications Coordinator to provide an update on learnings and opportunities based on her 1st 30 days.
Director Stanicek enjoys hearing about the 1st 30 days of employment and he asked Outreach & Communications Coordinator Jasmine to share with the committee her Outreach and community interactions thus far. Jasmine has taken over all social media tasks to include newspaper press releases and Grantee Site visits.
- c. Report from Community Health & Wellness Center Administrator Theresa Geracitano
Report attached to the minutes.
- d. Review upcoming community events requiring Board participation.
CEO Mason responded that the only required events are Grantee Site visits, the others are community events and Directors aren't required to attend.
- e. Letter of opposition to AB 399
Letter of opposition is attached to the minutes.

4. Board Comments and Future Agenda Items-

None

5. Adjournment-

There being no further business the meeting was adjourned at 6:32 pm.

Raquel Williams

Raquel Williams, Board Secretary/Clerk

DRAFT

Fallbrook Regional Health District
REPORT 1 - BALANCE SHEET COMPARISON
Comparison of June 2023 to May 2023

	Jun 30, 23	May 31, 23	\$ Change
ASSETS			
Current Assets			
Checking/Savings			
102.3 · Cash in Bank - Pacific Western	659,375.73	151,207.67	508,168.06
102.6 · Cash in Bank - LAIF	2,613,257.60	3,363,257.60	-750,000.00
102.9 · Cash in Bank - CalTRUST	5,647,767.81	5,666,737.25	-18,969.44
102.10 · Petty Cash	138.47	418.84	-280.37
Total Checking/Savings	8,920,539.61	9,181,621.36	-261,081.75
Other Current Assets			
104 · Prepaid Insurance	0.00	2,549.81	-2,549.81
107 · Tax Apportionment Receivable	24,874.81	14,777.15	10,097.66
110 · Reimbursement Rec'ble - CIF	-335.57	-335.57	0.00
Total Other Current Assets	24,539.24	16,991.39	7,547.85
Total Current Assets	8,945,078.85	9,198,612.75	-253,533.90
Fixed Assets			
121 · Equipment	85,471.17	80,346.93	5,124.24
121.2 · Equipment Depreciation	-55,188.00	-55,147.75	-40.25
122.0 · Assets			
122.0212 - Constr in Progress	0.00	93,772.00	-93,772.00
122.01 · S. Brandon Road	161,578.00	161,578.00	0.00
122.011 · S. Brandon Road Improvements	233,355.76	230,987.39	2,368.37
122.012 · S. Brandon Road Land	129,662.00	129,662.00	0.00
122.02 · E. Mission Road	1,441,539.86	1,441,539.86	0.00
122.021 · E. Mission Road Improvements	375,295.79	455,750.30	-80,454.51
122.022 · E. Mission Road Land	360,629.00	360,629.00	0.00
122.04 · Accum Depr - All Buildings	-247,241.00	-241,355.50	-5,885.50
Total 122.0 · Assets	2,454,819.41	2,632,563.05	-177,743.64
Total Fixed Assets	2,485,102.58	2,657,762.23	-172,659.65
Other Assets			
130 · Note Receivable - East Alvarado	359,748.27	361,591.39	-1,843.12
Total Other Assets	359,748.27	361,591.39	-1,843.12
TOTAL ASSETS	11,789,929.70	12,217,966.37	-428,036.67
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
140 · Accounts Payable	20,790.40	174,176.27	-153,385.87
Total Accounts Payable	20,790.40	174,176.27	-153,385.87
Other Current Liabilities			
203 - Accrued Payroll	21,568.83	20,998.75	570.08
204 · Accrued Vacation & Sick Leave	47,153.96	39,020.29	8,133.67
211 · Payroll Taxes Payable	8,177.29	7,928.24	249.05
213 · Simple Plan Payable	4,145.50	3,116.72	1,028.78
Total Other Current Liabilities	81,045.58	71,064.00	9,981.58
Total Current Liabilities	101,835.98	245,240.27	-143,404.29
Total Liabilities	101,835.98	245,240.27	-143,404.29
Equity			
302.2 · Community Investment Funds	8,792,578.12	8,792,578.12	0.00
300 · Unrestricted Operations Fund	2,465,936.08	2,465,936.08	0.00
Net Income	429,579.52	714,211.90	-284,632.38
Total Equity	11,688,093.72	11,972,726.10	-284,632.38

Fallbrook Regional Health District
REPORT 1 - BALANCE SHEET COMPARISON
Comparison of June 2023 to May 2023

	<u>Jun 30, 23</u>	<u>May 31, 23</u>	<u>\$ Change</u>
TOTAL LIABILITIES & EQUITY	<u>11,789,929.70</u>	<u>12,217,966.37</u>	<u>-428,036.67</u>

Fallbrook Regional Health District
REPORT 2 - INCOME STATEMENT
For the Month Ended June 2023 & Fiscal Year to Date

	Jun 23	Jul '22 - Ju...
Ordinary Income/Expense		
Income		
400 · District Income		
402 · Property Tax Revenue	24,874.81	2,333,422.67
403 · Interest / Dividends	15,938.59	159,470.75
Total 400 · District Income	40,813.40	2,492,893.42
460 · Lease Income		
570.00 · Wellness Center Income	0.00	1,324.50
Total 460 · Lease Income	0.00	1,324.50
Total Income	40,813.40	2,494,217.92
Expense		
500 · Administrative Expenses		
500.01 · Communications	1,613.92	9,186.53
500.02 · IT Services	600.00	5,843.76
500.03 · Refreshments	213.77	1,439.74
500.04 · Office Expenses	3,737.78	19,264.36
500.05 · Utilities	1,135.89	13,428.96
500.06 · Independent Contract Services	1,838.75	18,265.00
500.07 · Maintenance Services & Repairs	2,189.11	48,580.76
500.08 · Vehicle Expenses	1,228.22	2,157.74
500.10 · Salaries	34,709.16	392,140.75
500.12 · Payroll Taxes	2,844.02	36,471.52
500.14 · W/C Insurance	230.33	2,289.96
500.15 · Employee Health & Welfare	2,838.27	36,121.95
500.16 · Board Stipends	1,984.50	23,499.00
500.17 · Education & Conferences	3,946.50	29,556.22
500.18 · Dues & Subscriptions	826.54	27,708.40
500.19 · Insurance - General	1,712.96	20,554.53
500.20 · Independent Accounting Services	1,500.00	18,000.00
500.21 · Annual Independent Audit	0.00	22,068.96
500.22 · Medical Records Store & Service	2,642.48	31,822.37
500.23 · General Counsel	6,125.00	22,030.00
500.29 · Dist Promotions & Publications	1,676.00	19,509.70
500.30 · Simple IRA Expense	1,436.90	9,186.91
500.33 · Copier Lease	1,592.55	10,332.54
500.36 · Accrued Vacation & Sick Leave	6,099.41	11,828.17
500.40 · Office Equipment	0.00	3,186.91
500.50 · General Election	29,250.00	46,250.00
Total 500 · Administrative Expenses	111,972.06	880,724.74
570 · Comm. Health & Wellness Center		
570.32 · Vehicle Expenses	234.88	952.29
570.01 · Communications	635.91	5,924.35
570.02 · IT Services	640.00	640.00
570.03 · Refreshments	31.99	407.67
570.04 · Office Expenses	1,390.58	15,933.89
570.05 · Utilities	1,586.51	16,720.94
570.07 · Maintenance Services & Repairs	19,230.97	80,170.30
570.10 · Salaries	21,785.86	186,073.40
570.12 · Payroll Taxes	1,423.98	13,834.66
570.15 · Employee Health & Welfare	4,585.99	40,938.48
570.18 · Dues & Subscriptions	1,820.00	7,282.00
570.19 · Insurance - General	606.52	7,278.24
570.29 · Dist Promotions & Publications	4,376.26	10,651.86
570.30 · Simple IRA Expense	620.70	3,657.65
570.33 · Copier Lease	0.00	3,331.86
570.40 · Office Equipment	0.00	5,685.06
Total 570 · Comm. Health & Wellness Center	58,970.15	399,482.65

Fallbrook Regional Health District
REPORT 2 - INCOME STATEMENT
For the Month Ended June 2023 & Fiscal Year to Date

	Jun 23	Jul '22 - Ju...
600 · Community Health Contracts		
600.02 · Boys & Girls Clubs of North Cty	0.00	55,624.00
600.04 · D'Vine Path	0.00	47,148.00
600.05 · Fallbrook Food Pantry	0.00	150,400.00
600.07 · Fallbrook Senior Citizens Serv	0.00	40,679.12
600.10 · Foundation for Senior Care	0.00	122,004.84
600.11 · Hospice of the Valleys	0.00	17,844.44
600.12 · Michelle's Place Cancer Res Ctr	0.00	47,406.00
600.14 · Palomar Family Counseling Svc	0.00	60,000.00
600.50 · NC Fire JPA (Ambulance)	0.00	147,091.68
600.51 · NC Fire JPA (EMSO)	20,504.91	80,712.39
600.52 · NC Fire JPA (Public Comms)	9,579.63	37,218.56
Total 600 · Community Health Contracts	30,084.54	806,129.03
800 · District Direct Care Services		
800.01 · Health Services and Clinics	1,125.13	4,883.79
800 · District Direct Care Services - Other	0.00	534.05
Total 800 · District Direct Care Services	1,125.13	5,417.84
Total Expense	202,151.88	2,091,754.26
Net Ordinary Income	-161,338.48	402,463.66
Other Income/Expense		
Other Income		
812 · Other Income - Grants	96,827.00	96,827.00
Credit Card-Cash Rewards/Rebate	0.00	322.82
406 · Unearned Gain/Loss - CalTRUST	-34,908.03	-66,004.70
810 · Interest Income - Alvarado Str.	1,656.88	22,760.64
Total Other Income	63,575.85	53,905.76
Other Expense		
825 · Depreciation		
500.27 · Depreciation - Brandon Rd.	1,408.45	16,901.40
570.27 · Depreciation - Mission Rd.	185,461.30	226,549.60
Total 825 · Depreciation	186,869.75	243,451.00
835 · FRHD Foundation		
580 · FRHD Foundation Support		
580.17 · Education & Conferences	0.00	176.71
Total 580 · FRHD Foundation Support	0.00	176.71
Total 835 · FRHD Foundation	0.00	176.71
900 · Community Investment Fund Reimb	0.00	-216,837.81
Total Other Expense	186,869.75	26,789.90
Net Other Income	-123,293.90	27,115.86
Net Income	-284,632.38	429,579.52

Fallbrook Regional Health District
REPORT 3 - PROFIT & LOSS ACTUAL vs. YTD BUDGET
 July through June 2023

	Jul '22 - Jun 23	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
400 · District Income				
402 · Property Tax Revenue	2,333,422.67	2,059,227.52	274,195.15	113.3%
403 · Interest / Dividends	159,470.75	26,733.32	132,737.43	596.5%
Total 400 · District Income	2,492,893.42	2,085,960.84	406,932.58	119.5%
460 · Lease Income				
570.00 · Wellness Center Income	1,324.50	1,200.00	124.50	110.4%
Total 460 · Lease Income	1,324.50	1,200.00	124.50	110.4%
Total Income	2,494,217.92	2,087,160.84	407,057.08	119.5%
Expense				
500 · Administrative Expenses				
500.01 · Communications	9,186.53	9,756.00	(569.47)	94.2%
500.02 · IT Services	5,843.76	3,420.00	2,423.76	170.9%
500.03 · Refreshments	1,439.74	630.00	809.74	228.5%
500.04 · Office Expenses	19,264.36	11,400.00	7,864.36	169.0%
500.05 · Utilities	13,428.96	14,342.88	(913.92)	93.6%
500.06 · Independent Contract Services	18,265.00	17,004.00	1,261.00	107.4%
500.07 · Maintenance Services & Repairs	48,580.76	17,040.00	31,540.76	285.1%
500.08 · Vehicle Expenses	2,157.74	445.00	1,712.74	484.9%
500.10 · Salaries	392,140.75	331,450.08	60,690.67	118.3%
500.12 · Payroll Taxes	36,471.52	26,516.04	9,955.48	137.5%
500.14 · W/C Insurance	2,289.96	2,520.00	(230.04)	90.9%
500.15 · Employee Health & Welfare	36,121.95	44,173.20	(8,051.25)	81.8%
500.16 · Board Stipends	23,499.00	19,950.00	3,549.00	117.8%
500.17 · Education & Conferences	29,556.22	13,300.00	16,256.22	222.2%
500.18 · Dues & Subscriptions	27,708.40	29,795.00	(2,086.60)	93.0%
500.19 · Insurance - General	20,554.53	26,856.96	(6,302.43)	76.5%
500.20 · Independent Accounting Services	18,000.00	18,000.00	0.00	100.0%
500.21 · Annual Independent Audit	22,068.96	15,500.00	6,568.96	142.4%
500.22 · Medical Records Store & Service	31,822.37	26,616.12	5,206.25	119.6%
500.23 · General Counsel	22,030.00	36,369.55	(14,339.55)	60.6%
500.29 · Dist Promotions & Publications	19,509.70	12,500.00	7,009.70	156.1%
500.30 · Simple IRA Expense	9,186.91	9,943.56	(756.65)	92.4%
500.33 · Copier Lease	10,332.54	10,156.08	176.46	101.7%
500.36 · Accrued Vacation & Sick Leave	11,828.17	0.00	11,828.17	100.0%
500.40 · Office Equipment	3,186.91	5,700.00	(2,513.09)	55.9%
500.50 · General Election	46,250.00	0.00	46,250.00	100.0%
Total 500 · Administrative Expenses	880,724.74	703,384.47	177,340.27	125.2%
570 · Comm. Health & Wellness Center				
570.32 · Vehicle Expenses	952.29	0.00	952.29	100.0%
570.01 · Communications	5,924.35	2,640.00	3,284.35	224.4%
570.02 · IT Services	640.00	1,320.00	(680.00)	48.5%
570.03 · Refreshments	407.67	0.00	407.67	100.0%
570.04 · Office Expenses	15,933.89	6,000.00	9,933.89	265.6%
570.05 · Utilities	16,720.94	15,575.80	1,145.14	107.4%
570.06 · Independent Contract Services	0.00	1,386.00	(1,386.00)	0.0%
570.07 · Maintenance Services & Repairs	80,170.30	24,420.00	55,750.30	328.3%
570.10 · Salaries	186,073.40	155,581.62	30,491.78	119.6%
570.12 · Payroll Taxes	13,834.66	12,446.56	1,388.10	111.2%
570.15 · Employee Health & Welfare	40,938.48	34,686.42	6,252.06	118.0%
570.18 · Dues & Subscriptions	7,282.00	0.00	7,282.00	100.0%
570.19 · Insurance - General	7,278.24	9,000.00	(1,721.76)	80.9%
570.23 · General Counsel	0.00	24,000.00	(24,000.00)	0.0%
570.29 · Dist Promotions & Publications	10,651.86	20,050.04	(9,398.18)	53.1%
570.30 · Simple IRA Expense	3,657.65	4,665.84	(1,008.19)	78.4%
570.33 · Copier Lease	3,331.86	10,156.08	(6,824.22)	32.8%
570.40 · Office Equipment	5,685.06	6,000.00	(314.94)	94.8%
Total 570 · Comm. Health & Wellness Center	399,482.65	327,928.36	71,554.29	121.8%

Fallbrook Regional Health District
REPORT 3 - PROFIT & LOSS ACTUAL vs. YTD BUDGET
July through June 2023

	Jul '22 - Jun 23	Budget	\$ Over Budget	% of Budget
600 · Community Health Contracts				
600.02 · Boys & Girls Clubs of North Cty	55,624.00	25,156.00	30,468.00	221.1%
600.04 · D'Vine Path	47,148.00	11,787.00	35,361.00	400.0%
600.05 · Fallbrook Food Pantry	150,400.00	37,600.00	112,800.00	400.0%
600.07 · Fallbrook Senior Citizens Serv	40,679.12	10,169.78	30,509.34	400.0%
600.10 · Foundation for Senior Care	122,004.84	30,501.21	91,503.63	400.0%
600.11 · Hospice of the Valleys	17,844.44	4,461.11	13,383.33	400.0%
600.12 · Michelle's Place Cancer Res Ctr	47,406.00	11,851.50	35,554.50	400.0%
600.14 · Palomar Family Counseling Svc	60,000.00	15,000.00	45,000.00	400.0%
600.50 · NC Fire JPA (Ambulance)	147,091.68	105,000.00	42,091.68	140.1%
600.51 · NC Fire JPA (EMSO)	80,712.39	80,000.00	712.39	100.9%
600.52 · NC Fire JPA (Public Comms)	37,218.56	30,000.00	7,218.56	124.1%
Total 600 · Community Health Contracts	806,129.03	361,526.60	444,602.43	223.0%
800 · District Direct Care Services				
800.01 · Health Services and Clinics	4,883.79	208,000.04	(203,116.25)	2.3%
800 · District Direct Care Services - Other	534.05			
Total 800 · District Direct Care Services	5,417.84	208,000.04	(202,582.20)	2.6%
Total Expense	2,091,754.26	1,600,839.47	490,914.79	130.7%
Net Ordinary Income	402,463.66	486,321.37	(83,857.71)	82.8%
Other Income/Expense				
Other Income				
812 · Other Income - Grants	96,827.00			
Credit Card-Cash Rewards/Rebate	322.82			
406 · Unearned Gain/Loss - CalTRUST	(66,004.70)	0.00	(66,004.70)	100.0%
810 · Interest Income - Alvarado Str.	22,760.64	0.00	22,760.64	100.0%
Total Other Income	53,905.76	0.00	53,905.76	100.0%
Other Expense				
825 · Depreciation				
500.27 · Depreciation - Brandon Rd.	16,901.40	0.00	16,901.40	100.0%
570.27 · Depreciation - Mission Rd.	226,549.60	0.00	226,549.60	100.0%
Total 825 · Depreciation	243,451.00	0.00	243,451.00	100.0%
835 · FRHD Foundation				
580 · FRHD Foundation Support				
580.17 · Education & Conferences	176.71	0.00	176.71	100.0%
Total 580 · FRHD Foundation Support	176.71	0.00	176.71	100.0%
Total 835 · FRHD Foundation	176.71	0.00	176.71	100.0%
900 · Community Investment Fund Reimb	(216,837.81)	0.00	(216,837.81)	100.0%
Total Other Expense	26,789.90	0.00	26,789.90	100.0%
Net Other Income	27,115.86	0.00	27,115.86	100.0%
Net Income	429,579.52	486,321.37	(56,741.85)	88.3%

Fallbrook Regional Health District
REPORT 4 - APPROVED ANNUAL BUDGET
 July 2022 through June 2023

	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23	TOTAL Jul '22 - Ju...
Ordinary Income/Expense													
Income													
400 · District Income													
402 · Property Tax Revenue	25,753.04	24,975.91	35,041.36	115,749.67	638,174.56	322,447.93	81,478.01	62,990.89	435,413.06	269,885.67	29,301.03	18,016.39	2,059,227.52
403 · Interest / Dividends	1,611.97	751.65	1,464.55	2,789.91	1,822.64	2,041.04	3,510.81	2,410.08	2,792.81	3,984.36	1,681.01	1,872.49	26,733.32
Total 400 · District Income	27,365.01	25,727.56	36,505.91	118,539.58	639,997.20	324,488.97	84,988.82	65,400.97	438,205.87	273,870.03	30,982.04	19,888.88	2,085,960.84
460 · Lease Income													
460.03 · Lease Income	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.00 · Wellness Center Income	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	1,200.00
571.00 · Program Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 460 · Lease Income	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	1,200.00
Total Income	27,465.01	25,827.56	36,605.91	118,639.58	640,097.20	324,588.97	85,088.82	65,500.97	438,305.87	273,970.03	31,082.04	19,988.88	2,087,160.84
Expense													
600.99 · Returned Grant Money	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500 · Administrative Expenses													
500.01 · Communications	813.00	813.00	813.00	813.00	813.00	813.00	813.00	813.00	813.00	813.00	813.00	813.00	9,756.00
500.02 · IT Services	285.00	285.00	285.00	285.00	285.00	285.00	285.00	285.00	285.00	285.00	285.00	285.00	3,420.00
500.03 · Refreshments	40.00	40.00	40.00	40.00	40.00	190.00	40.00	40.00	40.00	40.00	40.00	40.00	630.00
500.04 · Office Expenses	950.00	950.00	950.00	950.00	950.00	950.00	950.00	950.00	950.00	950.00	950.00	950.00	11,400.00
500.05 · Utilities	1,435.60	1,568.40	1,442.30	1,217.91	1,105.39	872.90	1,009.62	1,054.57	1,213.33	1,185.55	1,137.69	1,099.62	14,342.88
500.06 · Independent Contract Services	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	1,417.00	17,004.00
500.07 · Maintenance Services & Repairs	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	1,420.00	17,040.00
500.08 · Vehicle Expenses	20.00	225.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00	445.00
500.10 · Salaries	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	27,620.84	331,450.08
500.12 · Payroll Taxes	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	2,209.67	26,516.04
500.14 · W/C Insurance	210.00	210.00	210.00	210.00	210.00	210.00	210.00	210.00	210.00	210.00	210.00	210.00	2,520.00
500.15 · Employee Health & Welfare	3,626.70	3,626.70	3,626.70	3,626.70	3,626.70	3,626.70	3,735.50	3,735.50	3,735.50	3,735.50	3,735.50	3,735.50	44,173.20
500.16 · Board Stipends	1,575.00	1,575.00	1,575.00	1,575.00	1,575.00	1,575.00	2,100.00	1,575.00	1,575.00	1,575.00	1,575.00	1,575.00	19,950.00
500.17 · Education & Conferences	1,000.00	3,800.00	0.00	0.00	0.00	0.00	0.00	3,500.00	0.00	2,500.00	2,500.00	0.00	13,300.00
500.18 · Dues & Subscriptions	10,250.00	2,100.00	675.00	8,700.00	850.00	850.00	720.00	2,100.00	750.00	750.00	1,200.00	850.00	29,795.00
500.19 · Insurance - General	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	2,238.08	26,856.96
500.20 · Independent Accounting Services	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	2,600.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	18,000.00
500.21 · Annual Independent Audit	0.00	5,000.00	1,000.00	3,500.00	2,500.00	2,500.00	1,000.00	0.00	0.00	0.00	0.00	0.00	15,500.00
500.22 · Medical Records Store & Service	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	2,218.01	26,616.12
500.23 · General Counsel	4,611.25	3,333.75	2,178.75	717.50	3,123.75	1,951.25	2,581.25	4,730.25	3,091.38	3,075.08	3,120.77	3,854.57	36,369.55
500.29 · Dist Promotions & Publications	625.00	625.00	625.00	625.00	625.00	3,125.00	625.00	625.00	625.00	625.00	625.00	625.00	12,500.00
500.30 · Simple IRA Expense	828.63	828.63	828.63	828.63	828.63	828.63	828.63	828.63	828.63	828.63	828.63	828.63	9,943.56
500.33 · Copier Lease	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	10,156.08
500.36 · Accrued Vacation & Sick Leave	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500.40 · Office Equipment	3,100.00	500.00	0.00	0.00	0.00	2,100.00	0.00	0.00	0.00	0.00	0.00	0.00	5,700.00
500.50 · General Election	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 500 · Administrative Expenses	68,740.12	64,850.42	53,639.32	64,978.68	55,922.41	60,467.42	54,287.94	59,836.89	53,506.78	56,487.70	56,410.53	54,256.26	703,384.47
570 · Comm. Health & Wellness Center													
570.32 · Vehicle Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.01 · Communications	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	2,640.00
570.02 · IT Services	110.00	110.00	110.00	110.00	110.00	110.00	110.00	110.00	110.00	110.00	110.00	110.00	1,320.00
570.03 · Refreshments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.04 · Office Expenses	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	6,000.00
570.05 · Utilities	1,690.34	1,252.36	1,160.47	1,167.64	1,538.17	1,436.91	1,284.01	1,199.91	1,207.97	1,181.49	1,209.57	1,246.96	15,575.80
570.06 · Independent Contract Services	115.50	115.50	115.50	115.50	115.50	115.50	115.50	115.50	115.50	115.50	115.50	115.50	1,386.00
570.07 · Maintenance Services & Repairs	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	2,035.00	24,420.00
570.10 · Salaries	12,677.20	12,677.20	12,677.20	12,989.70	12,989.70	12,989.70	12,989.70	12,989.70	13,150.38	13,150.38	13,150.38	13,150.38	155,581.62
570.12 · Payroll Taxes	1,014.18	1,014.18	1,014.18	1,039.18	1,039.18	1,039.18	1,039.18	1,039.18	1,052.03	1,052.03	1,052.03	1,052.03	12,446.56
570.14 · W/C Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.15 · Employee Health & Welfare	2,847.82	2,847.82	2,847.82	2,847.82	2,847.82	2,847.82	2,933.25	2,933.25	2,933.25	2,933.25	2,933.25	2,933.25	34,686.42
570.18 · Dues & Subscriptions	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.19 · Insurance - General	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00	750.00	9,000.00

Fallbrook Regional Health District
REPORT 4 - APPROVED ANNUAL BUDGET
 July 2022 through June 2023

	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23	TOTAL Jul '22 - Ju...
570.23 · General Counsel	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	24,000.00
570.29 · Dist Promotions & Publications	2,666.67	1,016.67	1,016.67	3,666.67	1,266.67	1,016.67	1,416.67	3,516.67	1,266.67	1,166.67	1,266.67	766.67	20,050.04
570.30 · Simple IRA Expense	388.82	388.82	388.82	388.82	388.82	388.82	388.82	388.82	388.82	388.82	388.82	388.82	4,665.84
570.33 · Copier Lease	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	846.34	10,156.08
570.40 · Office Equipment	3,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	1,000.00	0.00	0.00	0.00	0.00	6,000.00
Total 570 · Comm. Health & Wellness Center	30,861.87	25,773.89	25,682.00	29,676.67	26,647.20	27,295.94	26,628.47	29,644.37	26,575.96	26,449.48	26,577.56	26,114.95	327,928.36
600 · Community Health Contracts													
600.01 · Be Well Therapy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.02 · Boys & Girls Clubs of North Cty	25,156.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,156.00
600.03 · Champions for Health	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.04 · D'Vine Path	11,787.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,787.00
600.05 · Fallbrook Food Pantry	37,600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,600.00
600.06 · Fallbrook Land Conservancy	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.07 · Fallbrook Senior Citizens Serv	10,169.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,169.78
600.08 · Fallbrook Smiles Project	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.09 · Fallbrook Union High School	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.10 · Foundation for Senior Care	30,501.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,501.21
600.11 · Hospice of the Valleys	4,461.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,461.11
600.12 · Michelle's Place Cancer Res Ctr	11,851.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,851.50
600.13 · Neighborhood Healthcare	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.14 · Palomar Family Counseling Svc	15,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00
600.15 · REINS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.16 · SSNAAPE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.17 · Trauma Intervention Prog of SD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.50 · NC Fire JPA (Ambulance)	105,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105,000.00
600.51 · NC Fire JPA (EMSO)	0.00	20,000.00	0.00	0.00	0.00	20,000.00	0.00	0.00	20,000.00	0.00	0.00	20,000.00	80,000.00
600.52 · NC Fire JPA (Public Comms)	0.00	7,500.00	0.00	0.00	0.00	7,500.00	0.00	0.00	7,500.00	0.00	0.00	7,500.00	30,000.00
Total 600 · Community Health Contracts	251,526.60	27,500.00	0.00	0.00	0.00	27,500.00	0.00	0.00	27,500.00	0.00	0.00	27,500.00	361,526.60
800 · District Direct Care Services													
800.01 · Health Services and Clinics	16,916.67	16,916.67	21,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	208,000.04
800.02 · Urgent Care	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
800.03 · Women of Wellness	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 800 · District Direct Care Services	16,916.67	16,916.67	21,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	16,916.67	208,000.04
Total Expense	368,045.26	135,040.98	101,237.99	111,572.02	99,486.28	132,180.03	97,833.08	106,397.93	124,499.41	99,853.85	99,904.76	124,787.88	1,600,839.47
Net Ordinary Income	-340,580.25	-109,213.42	-64,632.08	7,067.56	540,610.92	192,408.94	-12,744.26	-40,896.96	313,806.46	174,116.18	-68,822.72	-104,799.00	486,321.37
Other Income/Expense													
Other Income													
406 · Unearned Gain/Loss - CalTRUST	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
810 · Interest Income - Alvarado Str.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
820 · Gain on Sale of Assets													
820.01 · Gain on Sale of Assets - Other	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 820 · Gain on Sale of Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Other Income	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other Expense													
825 · Depreciation													
500.27 · Depreciation - Brandon Rd.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
570.27 · Depreciation - Mission Rd.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 825 · Depreciation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Fallbrook Regional Health District
REPORT 4 - APPROVED ANNUAL BUDGET
 July 2022 through June 2023

	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23	TOTAL Jul '22 - Ju...
830 · Community Investment Funds Used													
830.01 · Consultants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
830.02 · Facility Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 830 · Community Investment Funds U...	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
835 · FRHD Foundation													
580 · FRHD Foundation Support													
580.01 · Communications	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.02 · I.T. Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.03 · Refreshments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.04 · Office Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.05 · Utilities	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.07 · Maintenance Services & Repairs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.10 · Salaries	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.12 · Payroll Taxes	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.14 · W/C Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.17 · Education & Conferences	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.18 · Dues & Subscriptions	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.19 · Insurance - General	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.20 · Independent Accounting Servic...	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.21 · Annual Independent Audit	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.23 · General Counsel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.33 · Copier Lease	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580.40 · Office Equipment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
580 · FRHD Foundation Support - Other	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 580 · FRHD Foundation Support	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total 835 · FRHD Foundation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
900 · Community Investment Fund Reimb	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Other Expense	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Other Income	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Income	-340,580.25	-109,213.42	-64,632.08	7,067.56	540,610.92	192,408.94	-12,744.26	-40,896.96	313,806.46	174,116.18	-68,822.72	-104,799.00	486,321.37

California State Treasurer *Fiona Ma, CPA*



Local Agency Investment Fund
P.O. Box 942809
Sacramento, CA 94209-0001
(916) 653-3001

July 05, 2023

[LAIF Home](#)
[PMIA Average Monthly Yields](#)

FALLBROOK REGIONAL HEALTH DISTRICT

DISTRICT ADMINISTRATOR
138 SOUTH BRANDON ROAD
FALLBROOK, CA 92028

[Tran Type Definitions](#)



Account Number: XXXXXXXXXX

June 2023 Statement

Effective Date	Transaction Date	Tran Type	Confirm Number	Web Confirm Number	Authorized Caller	Amount
6/16/2023	6/15/2023	RW	1730611	N/A	JENNIFER JEFFRIES	-750,000.00

Account Summary

Total Deposit:	0.00	Beginning Balance:	3,363,257.60
Total Withdrawal:	-750,000.00	Ending Balance:	2,613,257.60



CaITRUST
 PO Box 2709
 Granite Bay, CA 95746
 www.caltrust.org
 Email: admin@caltrust.org
 Fax: 402-963-9094
 Phone: 833-CALTRUST (225-8787)

Investment Account Summary

06/01/2023 through 06/30/2023

SUMMARY OF INVESTMENTS

Fund	Account Number	Total Shares Owned	Net Asset Value per Share on Jun 30 (\$)	Value on Jun 30 (\$)	Average Cost Amount (\$)	Cumulative Change in Value (\$)
FALLBROOK REGIONAL HEALTH DISTRICT						
CalTRUST Medium Term Fund		583,447.088	9.68	5,647,767.81	5,848,841.60	(201,073.79)
Portfolios Total value as of 06/30/2023				5,647,767.81		

DETAIL OF TRANSACTION ACTIVITY

Activity Description	Activity Date	Amount (\$)	Amount in Shares	Balance in Shares	Price per Share (\$)	Balance (\$)	Average Cost Amt (\$)	Realized Gain/(Loss) (\$)
		FALLBROOK REGIONAL HEALTH DISTRICT			Account Number: [REDACTED]			
Beginning Balance	06/01/2023			581,800.539	9.74	5,666,737.25		
Accrual Income Div Reinvestment	06/30/2023	15,938.59	1,646.549	583,447.088	9.68	5,647,767.81	0.00	0.00
Change in Value						(34,908.03)		
Closing Balance as of	Jun 30			583,447.088	9.68	5,647,767.81		

Please note that this information should not be construed as tax advice and it is recommended that you consult with a tax professional regarding your account.

LOCAL AGENCY INVESTMENT FUND (LAIF)

Through the Pooled Money Investment Account (PMIA), the State Treasurer invests taxpayers' money to manage the State's cash flow and strengthen the financial security of local governmental entities. PMIA policy sets as primary investment objectives safety, liquidity and yield. Total assets under LAIF Management at month-end were \$25.7 billion.

As of June 30, 2023, the PMIA's holdings included US Treasury Bills and Notes (63.08% of portfolio), Federal Agency Debentures and Discount Notes (21.77% of portfolio), CDs and Commercial Paper (11.84% of portfolio).

As of June 30, 2023, the District's balance was \$2,613,257.60. This represents 31.63% of the District's investment portfolio. The Average Monthly Effective Yield for the month of June, 2023 was 3.167%.

In June, 2023, the District reported \$0 in quarterly earnings.

CalTRUST

The CalTRUST Board works closely with the investment manager, BlackRock, to ensure that public dollars are managed securely and efficiently and are in full compliance with California Law. The primary objective is to safeguard the preservation of principal.

The District is invested in the CalTRUST Medium Term Fund which held, in part, the following sectors at June 30, 2023: Corporate Bonds (29.51% of portfolio), US Government and Agencies (48.70% of portfolio) and CDs (1.04% of portfolio). Total assets under CalTRUST Management at month-end were over \$3.0 billion.

As of June 30, the District's closing Net Asset Value was \$5,647,767.81. This represents 68.37% of the District's investment portfolio.

In June, 2023, the District earned \$15,938.59 in dividend income and reported an unrealized loss of \$34,908.03. The One Year Yield on the Medium-Term Fund was 2.56%

The investments of the District are in compliance with the District's 2022-2023 Investment Policy. The balances in the District's investment accounts give the District the ability to meet its expenditure requirements for the next eighteen (18) months.

Fallbrook Regional Health District
REPORT 7 - PROPERTY TAX REVENUE

June 2023

Type	Date	Name	Amount	Balance
400 · District Income				
402 · Property Tax Revenue				
General Journal	07/31/2022		33,039.59	33,039.59
General Journal	08/31/2022		19,112.02	52,151.61
General Journal	09/30/2022		38,254.42	90,406.03
General Journal	10/31/2022		101,462.22	191,868.25
General Journal	11/30/2022		748,316.37	940,184.62
General Journal	12/31/2022		372,825.47	1,313,010.09
General Journal	01/01/2023		54.00	1,313,064.09
General Journal	01/31/2023		86,736.33	1,399,800.42
General Journal	02/28/2023		59,693.30	1,459,493.72
General Journal	03/31/2023		692,696.24	2,152,189.96
General Journal	04/30/2023		141,580.75	2,293,770.71
General Journal	05/31/2023		14,777.15	2,308,547.86
General Journal	06/30/2023		24,874.81	2,333,422.67
Total 402 · Property Tax Revenue			2,333,422.67	2,333,422.67
Total 400 · District Income			2,333,422.67	2,333,422.67
TOTAL			2,333,422.67	2,333,422.67

Fallbrook Regional Health District REPORT 8 - CHECK DETAIL REPORT

June 2023

Date	Num	Name	Memo	Amount
102.3 - Cash in Bank - Pacific Western				
06/01/2023	263		Record May Simple Ira Payment	-4,145.52
06/05/2023	289		Record Payroll disbursement	-28,926.99
06/06/2023	13475	24 Hour Elevator Inc.	Elevator Maintenance	-238.11
06/06/2023	13476	Amazon Capital Servi...		-1,766.87
06/06/2023	13477	Culligan of San Diego	WC - Water delivery	-62.50
06/06/2023	13478	Fallbrook Chamber of ...	Newsletter	-25.00
06/06/2023	13479	Fallbrook Local Locks...	WC - CIF Door Sweeps	-928.15
06/06/2023	13480	Fallbrook Printing Cor...	Admin - Office Expenses	-139.00
06/06/2023	13481	Fallbrook Waste & Re...	WC - utilities	-283.38
06/06/2023	13482	Fallbrook Waste & Re...	Admin - utilities	-89.00
06/06/2023	13483	Fowler Pest Control, L...		-240.00
06/06/2023	13484	FPUD - 7720-001	7720-001	-163.18
06/06/2023	13485	FPUD - 7720-002 - E. ...	WC - utilities	-52.09
06/06/2023	13486	FPUD - 7720-003 - E. ...	WC - utilities	-330.61
06/06/2023	13487	Iron Mountain	Admin - medical records	-2,845.93
06/06/2023	13488	Jim's Sign Shop	VOID:	0.00
06/06/2023	13489	JK Drywall and Constr...	WC - CHWC-ED BLDG Painting CIF	-9,425.00
06/06/2023	13490	Juana Diaz	Office Cleaning	-470.00
06/06/2023	13491	Judith Oswald	Admin - office expenses	-34.09
06/06/2023	13492	Katia Elizondo Marquez	WC - Mileage	-76.83
06/06/2023	13493	Knight Security & Fire ...	Admin - Maintenance	-44.00
06/06/2023	13494	North County Fire Prot...	E-450-G Ambulance	-147,091.68
06/06/2023	13495	Pitney Bowes - Purch...	8000-9090-0976-9550	-150.00
06/06/2023	13496	SDG&E - 5971 - E. Mi...	WC - utilities	-692.26
06/06/2023	13497	SDG&E - 6994 - Bran...	Admin-utilities	-578.13
06/06/2023	13498	SDRMA	Health Benefits	-568.11
06/06/2023	13499	Spectrum - Mission	8448 20 899 0060354	-464.91
06/06/2023	13500	Spectrum Business-Br...	8448 20 899 0060321	-382.91
06/06/2023	13501	Springston Design LLC	IT Maintenance	-600.00
06/06/2023	13502	T-Mobile	WC Communications	-10.47
06/06/2023	13503	Uline	WC - CIF Picnic Table	-1,567.61
06/06/2023	13504	Woodward, Susan		-1,500.00
06/06/2023	13505	Jim's Sign Shop	WC - Signs CIF	-611.03
06/06/2023	13506	JK Drywall and Constr...	Admin - Raquel's Office - CIF	-3,975.00
06/06/2023	13507	North County Fire Prot...	NCFPD-MSO	-20,504.91
06/06/2023	13508	North County Fire Prot...	NCFPD-Social Media	-9,579.63
06/06/2023	13509	UMPQUA Bank		-3,860.25
06/06/2023			Deposit	3,500.00
06/06/2023	264		Record June Go Daddy Charge	-119.88
06/09/2023	265		Record ADP Processing Fees	-130.70
06/13/2023	13510	Access Professional S...	CIF - Admin - Video Entry System upgrade	-2,978.00
06/13/2023	13511	Ace Striping & Sealing...	CIF CHWC - Maintenance	-1,050.00
06/13/2023	13512	Amazon Capital Servi...		-315.86
06/13/2023	13513	Culligan of Escondido	Admin - Water delivery	-60.26
06/13/2023	13514	Fallbrook Rooter & Dr...	Wc - Maintenance	-127.09
06/13/2023	13515	Juana Diaz	Office Cleaning	-440.00
06/13/2023	13516	Konica Minolta	Admin - Copier Lease	-1,592.55
06/13/2023	13517	LDC Always Green La...		-1,795.00
06/13/2023	13518	Patty Taylor	WC - Office Expense	-34.92
06/13/2023	13519	Rachel Mason	Admin - Furniture for small conf space	-636.77
06/13/2023	13520	Rotary Club of Fallbro...	Admin - Dues	-83.00
06/13/2023	13521	Sun Realty		-1,387.50
06/13/2023	13522	Access Professional S...	CIF - Admin - Video Entry System upgrade	-2,978.00
06/13/2023			Deposit	232.32
06/15/2023	267		Transfer to Pac Western Bank	750,000.00
06/20/2023	269		Record payment of wages and taxes payable	-27,013.80
06/21/2023	268		Record Apportionment received	14,777.15
06/23/2023	13523	Amazon Capital Servi...		-1,222.71
06/23/2023	13524	Brand Assasins	VOID: WC - Promos & Pubs	0.00
06/23/2023	13525	CalPERS	ID 1559595490	-7,557.79
06/23/2023	13526	Casebook PBC	WC - Dues & Subs	-1,593.00
06/23/2023	13527	DMV	Registration Toyota Truck	-182.00
06/23/2023	13528	Geracitano-reimburse,...	Mileage Reimbursement	-152.62
06/23/2023	13529	JK Drywall and Constr...	Balance of Project - CIF	-9,425.00
06/23/2023	13530	Juana Diaz		-910.00
06/23/2023	13531	Key, Darren	WC - Maintenance	-180.00
06/23/2023	13532	Raquel Williams	Admin - supplies	-76.56

Fallbrook Regional Health District
REPORT 8 - CHECK DETAIL REPORT
June 2023

<u>Date</u>	<u>Num</u>	<u>Name</u>	<u>Memo</u>	<u>Amount</u>
06/23/2023	13533	Rotary Club of Fallbrook		-212.00
06/23/2023	13534	Scott, Jeffrey G., Esq...	Admin - Legal	-1,785.00
06/23/2023	13535	Uline	Office Expenses	-457.98
06/23/2023	13536	Brand Assasins	WC - Promos & Pubs	-314.52
06/26/2023			Deposit	96,827.00
06/27/2023	13537	Amazon Capital Servi...	WC - Office Expense	-37.00
06/27/2023	13538	Blue Miles Construction	CIF - Benches CHWC	-1,950.00
06/27/2023	13539	California Special Dist...	Conference registration	-2,700.00
06/27/2023	13540	Fallbrook Rooter & Dr...	WC - maintenance	-513.48
06/27/2023	13541	Fowler Pest Control, I...	Pest Control - Admin	-155.00
06/27/2023	13542	Impact Marketing & D...		-3,996.85
06/27/2023	13543	Key, Darren	Admin - Maintenance	-80.00
06/27/2023	13544	Low Voltage	CIF - WC - Fire Alarm panel replacement	-4,878.00
06/27/2023	13545	Pitney Bowes - Lease	0018137865	-77.29
06/27/2023	13546	Portero Services	Admin - bookkeeping	-1,838.75
06/27/2023	13547	National Demographic...	Admin - Redistricting basic project elements	-29,250.00
06/30/2023	13617	Scott, Jeffrey G., Esq...		-4,340.00
06/30/2023	266		Record ADP Processing fees	-116.38
Total 102.3 - Cash in Bank - Pacific Western				508,168.06
TOTAL				508,168.06



UMPQUA BANK

BL ACCT 00002840-20000001
FALLBROOK REG HEALTH DIST
Account Number: ####-####-####-7117
Page 1 of 4



Account Summary




Billing Cycle		06/30/2023
Days In Billing Cycle		30
Previous Balance		\$3,860.25
Purchases	+	\$5,212.34
Cash	+	\$0.00
Balance Transfers	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$3,860.25-
Other Charges	+	\$21.00
Finance Charges	+	\$0.00

NEW BALANCE \$5,233.34

Credit Summary

Total Credit Line	\$6,000.00
Available Credit Line	\$766.66
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

-  Call us at: (866) 777-9013
Lost or Stolen Card: (866) 839-3485
-  Go to www.umpquabank.com
-  Write us at PO BOX 35142 - LB1181, SEATTLE, WA 98124-5142

Payment Summary

NEW BALANCE	\$5,233.34
MINIMUM PAYMENT	\$5,233.34
PAYMENT DUE DATE	07/25/2023

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$3,860.25-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
06/12	06/12	0000000LBX2306126510021	PAYMENT - THANK YOU	\$3,860.25-

Cardholder Account Summary

LINDA BANNERMAN #### #### #### 7133	Payments & Other Credits \$0.00	Purchases & Other Charges \$1,888.85	Cash Advances \$0.00	Total Activity \$1,888.85
--	---------------------------------------	--	-------------------------	------------------------------

Cardholder Account Detail

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
06/04	06/04	PPLN01	24492153155713809723599	ADOBE *ACROPRO SUBS 408-536-6000 CA	\$97.46
06/08	06/09	PPLN01	24692163159104500453061	WWW COSTCO COM 800-955-2292 WA	\$82.95
06/09	06/11	PPLN01	24692163160105456103730	VBS*VONAGE BUSINESS 866-901-0242 GA	\$3.38

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

UMPQUA BANK
PO BOX 35142 - LB1181
SEATTLE WA 98124-5142



Account Number

7117

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
06/30/23	\$5,233.34	\$5,233.34	07/25/23

\$



BL ACCT 00002840-20000001
FALLBROOK REG HEALTH DIST
138 SOUTH BRANDON ROAD
FALLBROOK CA 92028

MAKE CHECK PAYABLE TO:

UMPQUA BANK COMMERCIAL CARD OPS
PO BOX 35142 - LB1181
SEATTLE WA 98124-5142

09 0004 7117 0000 0000 00000000 00000000 0

Cardholder Account Detail Continued					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
06/12	06/13	PPLN01	24765013164400002426486	FALLBROOK ACE HARDWARE FALLBROOK CA	\$17.19
06/17	06/18	PPLN01	24055233168083729157094	WALMART.COM 800-966-6546 AR	\$63.57
06/16	06/18	PPLN01	24445003168100317023425	WALMART.COM 8009666546 800-966-6546 AR	\$117.12
06/20	06/21	PPLN01	24137463172001459373557	USPS PO 0525920028 FALLBROOK CA	\$8.13
06/21	06/22	PPLN01	24765013173839000197715	EL TORO MARKET FALLBROOK CA	\$11.28
06/22	06/22	PPLN01	24492153173713536810030	WF WAYFAIR3544423946 866-263-8325 MA	\$85.11
06/21	06/22	PPLN01	24692163173105273302056	TST* Estrellas Restaura Fallbrook CA	\$174.51
06/23	06/25	PPLN01	24492153174852432461370	FULL SOURCE LLC 8009750986 FL	\$50.23
06/23	06/27	PPLN01	74579163177523902540640	BLS*TOMEDES LTD8777748914 LONDON	\$1,050.00
06/23	06/27	PPLN01	74579163177523902540640	INTERNATIONAL TRANS FEE	\$21.00
06/27	06/28	PPLN01	24906413178177037092501	EIG*CONSTANTCONTACT.COM 855-2295506 MA	\$95.00
06/29	06/30	PPLN01	24692163180101500338337	VBS*VONAGE BUSINESS 866-901-0242 GA	\$11.92

Cardholder Account Summary					
RACHEL MASON ##### 2600		Payments & Other Credits \$0.00	Purchases & Other Charges \$2,332.76	Cash Advances \$0.00	Total Activity \$2,332.76

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
06/01	06/02	PPLN01	24793383152000093217625	Indeed Jobs 512-4595300 TX	\$207.00
06/05	06/07	PPLN01	24801973157726862577426	DOMINICK'S DELICATESSEN FALLBROOK CA	\$27.98
06/12	06/13	PPLN01	24492163163000031986437	NATW NATW.ORG HTTPSNATW.ORG PA	\$1,007.25
06/15	06/15	PPLN01	24492153166713455525097	ICANVAS 800-980-1089 IL	\$316.75
06/14	06/15	PPLN01	24436543166020413857088	SOCIETYFORHUMANRESOURCE 800-2837476 VA	\$244.00
06/18	06/20	PPLN01	24943003170750010438990	HYATT EVERLINE RESORT 5304127034 CA	\$482.36
06/19	06/20	PPLN01	24204293170309453889762	Etsy.com - WoodGears 718-8557955 NY	\$4.28
06/21	06/22	PPLN01	24055223173083737045186	SMARTSIGN 718-797-1900 NY	\$43.14

Cardholder Account Summary					
THERESA GERACITANO ##### 9073		Payments & Other Credits \$0.00	Purchases & Other Charges \$1,011.73	Cash Advances \$0.00	Total Activity \$1,011.73

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
06/08	06/09	PPLN01	24204293159000129923557	FACEBK ZKTXXR3TF2 650-5434800 CA	\$64.89
06/13	06/14	PPLN01	24011343164000045441881	CALENDLY HTTPSCALENDLY GA	\$15.00
06/13	06/14	PPLN01	24692163164108229955275	AMZN Mktp US*AQ5Q32643 Amzn.com/bill WA	\$51.71
06/13	06/15	PPLN01	24427333165710042517552	DANIEL'S MARKET BONSAI CA	\$31.99
06/16	06/18	PPLN01	24943003168750010433409	HYATT EVERLINE RESORT 5304127034 CA	\$280.62
06/16	06/18	PPLN01	24943003168750010433433	HYATT EVERLINE RESORT 5304127034 CA	\$483.52
06/20	06/21	PPLN01	24692163171103920793266	Amazon.com*KE6225AV3 Amzn.com/bill WA	\$84.00

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases									
PPLN01 001	PURCHASE	E	\$0.00	0.06024%(D)	21.9900%	\$0.00	\$0.00	0.0000%	\$5,233.34
Cash									
CPLN01 001	CASH	A	\$0.00	0.06572%(D)	23.9900%	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily							Days In Billing Cycle: 30		
** includes cash advance and foreign currency fees							APR = Annual Percentage Rate		
¹ FCM = Finance Charge Method									
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

**Fallbrook Regional Health District
Uses of Community Investment Funds**

Community Investment Fund Beginning Balance as of 04/01/2023 **\$ 8,474,030.32**

	Date	Name	Memo	Amount
122.021 · E. Mission Road Improvements				
	04/03/2023	Fallbrook Rooter & Drain Service	CIF - Edu CHWC	449.90
	04/03/2023	Jim's Sign Shop	WC - Signs	299.53
	04/11/2023	3 Day Blinds, LLC	WC - CIF Window Coverings	2,065.18
	04/13/2023	North County Window and Door	Balance for Windows - WC	10,394.15
	04/14/2023	Springston Design LLC	WC - IT Svcs CHWC CIF	640.00
	04/20/2023	3 Day Blinds, LLC	CHWC - EDU Bldg CIF	1,984.14
	04/30/2023	UMPQUA Bank	April Statement	644.34
				16,477.24
570.07 · Maintenance Services & Repairs				
	04/06/2023	Key, Darren	WC - CHWC - CIF	95.00
	04/20/2023	Taylor Design	WC - CIF	475.00
	04/24/2023	Jim's Sign Shop	50% payment for Parking Sign	70.04
	04/30/2023	LDC Always Green Landscape	WC - Landscaping	3,325.00
				3,965.04

Community Investment Fund Ending Balance as of 04/30/2023 **\$ 8,453,588.04**

122.011 · S. Brandon Road Improvements				
	05/31/2023	Access Professional Systems, Inc.	CIF - Admin - Video Entry System upgrade	5,956.00
				5,956.00
122.021 · E. Mission Road Improvements				
	05/31/2023	Jim's Sign Shop	WC - Signs CIF	1,222.07
	05/31/2023	Jim's Sign Shop	WC - Signs CIF - Balance	299.53
	05/31/2023	Jim's Sign Shop	WC - Signs CIF Balance	70.04
	05/31/2023	Uline	WC - CIF Picnic Table	1,567.61
				3,159.25
570.07 · Maintenance Services & Repairs				
	05/16/2023	Kent Bandy	Campus Repairs	3,225.00
	05/19/2023	Fallbrook Rooter & Drain Service	WC - CIF	1,389.76
				4,614.76

Community Investment Fund Ending Balance as of 05/31/2023 **\$ 8,439,858.03**

122.011 · S. Brandon Road Improvements				
	06/06/2023	JK Drywall and Construction	Admin - Raquel's Office - CIF	3,975.00
				3,975.00
122.021 · E. Mission Road Improvements				
	06/06/2023	JK Drywall and Construction	WC - CHWC-ED BLDG Painting CIF	9,425.00
	06/23/2023	Blue Miles Construction	CIF - Benches CHWC	1,950.00
	06/30/2023		Reclass CIP to Improvements	93,772.00
				93,772.00

**Fallbrook Regional Health District
Uses of Community Investment Funds**

<u>Date</u>	<u>Name</u>	<u>Memo</u>	<u>Amount</u>
			105,147.00
570.07 - Maintenance Services & Repairs			
06/01/2023	Low Voltage	CIF - WC - Fire Alarm panel replacement	4,878.00
06/01/2023	Jim's Sign Shop	This is a supplement to original invoice with change order- CIF	243.22
06/06/2023	Ace Striping & Sealing, Inc.	CIF CHWC - Maintenance	1,050.00
06/23/2023	JK Drywall and Construction	Balance of Project - CIF	9,425.00
06/30/2023	UMPQUA Bank	CIF - CHWC	4.28
			15,600.50

Community Investment Fund Ending Balance as of 06/30/2023	\$ 8,315,135.53
--	------------------------

Total Community Funds used 4th Quarter FY 2022-2023 -	\$ 158,894.79
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**Wellness Center Administrator
Board Report- August 2023
*Data from June***

Community Health & Wellness Center:

- July events total 85- 66 public and 19 private. August event total 94- 73 public and 21 private.
 - New events include Fun-Fu self-defense, evening Chi Gong class, Healthy Aging series with CSU San Marcos School of Nursing, FFSC Computer Classes, Nutrition to Grow On (year 2), Tai Chi.
- June was our highest attendance to date, just under 1,000.
- AC is out in Building A and groups are being moved to other locations.
- Planning is going strong for Eye on Health Youth Festival on Sept 30th. Featured events include- Eye exams & glasses, vaccinations, dental screenings, STEM zone, entertainment, art zone. Marketing is scheduled including- A-frame signage at Major Market, social media campaign, email campaign, partner marketing, banners, press release.
- FUESD has hired 5 new social workers and requested a tour of the Community Health & Wellness Center as part of the new hires onboarding.
- FRHD is on the agenda to present on our Lifestyle Change program at the Be There San Diego Summit.
- Lifestyle Change program is having an impact:

SUCCESS

“As my cardiologist told me, by addressing my overall health, I have the opportunity to not let my heart get any worse and to even improve it. This Lifestyle Change Program is definitely helping me achieve this goal!

At my last visit he let me know that all my blood panels have come into normal range and asked exactly what I was doing different.”

E.C. – Fallbrook Lifestyle Change Program



Wellness Center Events 2023	JAN	FEB	MAR	APRIL	MAY	JUNE
Mental Health First Aid	13		9	19	13	15
CCHW	14		21	21	13	13
Wellness Wednesday- Health Screening, workshop, resources	28	8	9	7	17	36
Cultivate Health Workshops	10	2	14	9	2	2
DPP / Lifestyle Change Program				17	63	55
Partner Health & Wellness activities	107	138	223	298	234	204
Support Groups	53	73	55	63	92	83
Michelle's Place office hours	32	43	74	32	51	50
Yoga	232	233	302	257	269	261
Foundation for Senior Care- Fix It Fridays/Computer Classes	24	61	20	10	10	11
Blood Drive with San Diego Blood Bank	24		24		19	
COVID-19 PCR Testing	29	17				
Club/ Organizational meetings	181	203	205	179	136	195
Youth Activity					9	63
Tours	7	3	7	3	11	4
Total Wellness Center Visits (approximate)	754	781	963	915	939	992
Rental Events Visits- Private or class	105	0	0	8	5	0

Number of Events 2023	JAN	FEB	MAR	APR	MAY	JUNE
Private events	9	14	19	17	19	27
Public Events	63	76	61	71	87	66
Total Events	72	90	80	88	106	93
Events held by Grantees	6	27	16	11	16	18
Private Health Event/Rental	0	1	1	1	0	0

Flyer Distribution:

- Printed flyers were distributed at the following:
 - 4 grocery stores (including 3 Hispanic markets)
 - Chamber of Commerce, library, and community center
 - 1 pharmacy
 - 4 physician offices
 - 2 physical therapists
 - 3 grantees – FFSC, Senior Center, Food Pantry
 - Store bulletin boards such as Feed Stores, etc.
- Digital flyers were provided directly to Boys & Girls Club, Fallbrook High School District, Fallbrook Elementary School District, Vallecitos School District, Bonsall School District, Bonsall Chamber, Fallbrook Forum, Fallbrook Chamber for community calendar, community housing works, head start program, WIC and 3 grantees- this is in addition to receiving the constant contact email.
- Digital flyers are in Fallbrook Features, the monthly newsletter of the Fallbrook Chamber.
- Event dates are provided to the Village News for the calendar monthly.

Marketing:

Press (Village News):

- Press Release: 7/21/23 “FRHD presents Wellness Wednesday with a focus on cultivating resilient teens in the digital age”.
- Press Release: 7/27/23 “FRHD community grant funds healthy life skills lessons at D’Vine Path”

Email Marketing & Constant Contact Overview:

EMAIL MARKETING 2023	JAN	FEB	MAR	APR	MAY	JUNE
Total Contacts	3883	3943	4013	4034	4067	4,166
New Contacts Added	105	72	108	69	77	100
Net New Contacts		41	77	33	60	80
Number of emails sent	6,071	8077	12,636	17,864	4626	9,153
Number of emails opened	2,873	3806	5581	8,659	2148	4,316
Open rate	52%	52%	48%	53%	51%	52%
Open rate over industry average	16%	17%	13%	19%	17%	18%
# of Clicks	208	230	203	263	150	338
Click rate	4%	3%	4%	3%	7%	8%
Click rate over industry average	1%	0	-3%	-2%	2%	3%

Social Media:

- We have been a lot more active on social media and sharing more to local Facebook Groups thanks to Jasmine and we are seeing increased engagement.

Social Media Metrics 2023	Jan	Feb	March	Apr	May	June
Total number of posts & Stories (Instagram & Facebook)	42	47	55	57	41	142
Instagram Followers	505	514	527	532	543	565
Facebook Likes	919	928	935	947	1061	976
Facebook Followers						1,094
Post Reach Instagram	11.30%	44.40%	-5%	3.40%	8.60%	3.7K
Post Reach Facebook	156.40%	56.65	26.80%	29.10%	111.90%	1.9K
Audience Growth Instagram	2.17%	1.75%	2.66%	2.40%	30%	14 New
Audience Growth Facebook	1.20%	0.97%	1.18%	1.16%	21.40%	12 New
Engagement rate Instagram	51.70%	17.70%	11.50%	1.60%	3%	645
Engagement rate Facebook	500%	-45%	26%	28%	22.20%	316
Profile Visits Instagram						92
Profile Visits Facebook						497
Website Views	34,269	39,906	44,014	32,133	51,579	49,244

Instagram - Published Wednesday, June 21st

- Post Reach: 854
- Likes: 73



Facebook - Published Thursday, June 29th [Boosted Post]

- Post Reach - 2,338
- o Paid: 2,196
- o Organic - 168
- Likes - 21
- Link Clicks - 226



Example of PSA/ Health Tips/Awareness Month posts that are scheduled for each month.

August will include tip for sun exposure- skin cancer, heat stroke, etc.

CHIEF EXECUTIVE OFFICER'S REPORT - AUGUST

Community Health & Wellness Center:

- Facility construction updates
 - It's hot in Bldg A. As I mentioned in my email to you all, we need to develop a Strategic Plan specific to how the property can be utilized/designed and or remodeled to incorporate the growth and services you are interested in offering. We are also still developing new partnerships. And we are still awaiting information from some interested partners so I'm afraid I can't advise a solution at this point.
- The lease agreement with the Communications tower provider has been sent over to us for review. Jeff is reviewing and we'll have it for review by Facilities before it comes back to the Board.
- Still reviewing the details regarding services and rotation schedule from Gary & Mary West PACE. Will bring these back to Strategic Planning committee once we have a more detailed proposal.

Community Partnerships:

- We met with the Fallbrook Food Pantry and have begun outlining a new MOU for them to have garden plot space outside of Building C- House. This project will be part of their Nutrition to Grow On and Diabetes education programs.

Administrative Projects:

- FY22.23 Annual Report – I will begin drafting out our report within the upcoming month. Once we have our final year-end financials, I should be able to have the report ready to send out by early October.
- New Updated FRHD District Policy Manual: this project will ensure that our policies are current and inline with our actual operations and not referenced back to the hospital. This will also include policies for employee driving or District vehicles, email and social media polices, and several other policies that get us in compliance with many HR best practices.
- Still in progress for the FY24.25: Ongoing grant protocols and procedures – process will move to committees for expanded conversation:
 - Grant to revenue proportion – Finance Committee
 - Expectations of service provision – Strategic Planning
 - Moving regular partnered programming from grants to MOUs – Strategic Planning
 - Michelle's Place, Palomar Family Counseling, Foundation for Senior Care

Board Education/Conferences: I will register all so we receive group discount, but each attendee should make their own hotel arrangements.

- August 23-31: CSDA Annual Meeting – Monterey:
 - Bill, Terry, Jennifer, Mike and I will be in attendance at this event.
- September 13-15: ACHD Annual meeting – Tahoe. Registration is due by Aug. 15
 - Currently I have Bill, Theresa, Raquel and I planning to attend.

As a reminder I will be on vacation and OUT OF THE COUNTRY on August 11th through the 21st. I will not have access to email, voicemail, telepathy, or text messaging. Judith and Raquel will be fully capable of handling anything in my absence.



Please note that there will not be:

- August - Facilities or Strategic Planning committee meetings
- September - Board, Facilities or Strategic Planning committee meetings

I'll finish my final vacation on September 18-21st at Hobson Beach in Santa Barbara. I'll have used all my vacation time and hope that many of the seedlings we've planted will be ready to "pluck and we can move some ideas forward for October.





Mission | Vision | Values

Mission: The Fallbrook Regional Health District assists residents to lead healthy lives, supporting a greater life span and independence.

Vision: Fallbrook Regional Health District will offer and support services and programs that measurably improve physical and mental health, social engagement and increased life span and independence.

Values: The Fallbrook Regional Health District values dedication, efficiency, integrity, objectivity, prudence, respect, and transparency for all members of our community. Our efforts support our commitment to being an inclusive entity as we continually seek to strengthen our institution as a place for personal and social development.

A Tax Supported Public Agency Serving Fallbrook, Bonsall, Rainbow and De Luz.

Revised by Fallbrook Regional Health District Board of Directors on September 9, 2020



Mission | Vision | Values

Mission: By directing resources to community nonprofits and engaging highly skilled staff, partners and passionate volunteers, the Fallbrook Regional Health District is able to offer health and wellness services to our served communities in Bonsall, De Luz, Fallbrook and Rainbow.

Vision:

A California recognized Health District that delivers the highest quality health and wellness programs and services to support a greater life span for the local community.

Values:

The Fallbrook Regional Health District values dedication, efficiency, integrity, objectivity, prudence, respect, and transparency for all members of our community. Our efforts support our commitment to being an inclusive entity as we continually seek to strengthen our institution as a place for personal and social development.

Organization Name

Legal Name

Bonsall Fallbrook Little League

Tax Exempt Status

YES

What is your EIN/Tax Exempt 501(c)3 designation ID#?

330933730

Brief Program Description

Youth Baseball Program for ages 4-14

Program Information - Type

Ongoing

Funding Amount Being Requested

5000

Organization's Mission Statement

Bonsall Fallbrook Little League prides itself in providing a safe and supportive environment for the children of the community. Our volunteers are passionate and committed to helping any aspiring ball player regardless of their skill level or financial status.

What year was this Organization or program started?

2001

Will you be able to document that 100% of the grant program recipients live within the communities of Fallbrook, Rainbow, Bonsall or De Luz?

YES

Organization History & Accomplishments

Bonsall Fallbrook Little League has grown from a small 80-90 member club to a 200 plus member club in the past 5 years. We were also one of the few youth sports activities that opened it's doors to the children of our community during the pandemic and we did it by carefully planning, distancing teams and monitoring players and volunteers health. We set boundaries and stuck to them and were able to keep our fields running without any outbreaks within our teams.

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

25

Target Population - Age

	Percent of program participants	Estimated number of participants
Children (infants to 12)	100	200
Young Adults (13-17)		
Adults (18-60)		

Target Population - Gender

	Percent of program participants
Female	30
Male	70
Non-binary	
Unknown*	

Anticipated Acknowledgment

Anticipated Acknowledgment

Social Media Postings

Website Display

Anticipated Acknowledgment

We will post to our website, facebook and instagram accounts

Contact Information

Contact Name

Daniela Ramirez

Title

President

Primary Contact Phone

7604681560

Email Address

president@bfill.org

Organization Mailing Address

PO Box 2734
fallbrook , ca, 92088

Board of Directors



2023 - 2024 BFLL Board.xlsx

Financial Documents - P&L and Balance Sheet



Company Overview 22.07.20... .pdf

Financial Documents - 990



BONSALL FALLBROOK LITTL... .pdf

Program Budget



23_24 FRHD Youth Fitness B...xlsx

Terms and Conditions

Accepted

President	Daniela Ramirez	president@bfill.org
Vice President	Brian Cully	VP@bfill.org
Secretary	Angie Mesa	secretary@bfill.org
Treasurer	Veronica Becknell	Treasurer@bfill.org
Safety Officer	Shaun Davis	safetyofficer@bfill.org
Team Parent Coordinator	Jody Bostok	teamparent@bfill.org
Marketing	Brittnie Boyd	marketing@bfill.org
Player Agent	AJ Garcia	playeragent@bfill.org
Coaching Coordinatnator	Daniela Ramirez	Coachingcoordinator@bfill.org
Purchasing	Sara Davis	Snackshack@bfill.org
Umpire in Chief	Jorge Hernandez	Umpire@bfill.org

Management Report

BFLL

For the period ended September 30, 2022



Prepared on

July 22, 2023

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Statement of Activity

October 2021 - September 2022

	Total
REVENUE	
Padres Storm	1,673.69
Registration Fees	
Fall Registration	16,471.92
Spring Registration	19,629.00
Total Registration Fees	36,100.92
Sales of Product Revenue	3,075.00
Snack Shack	8,809.45
Sponsorships	913.53
Total Revenue	50,572.59
COST OF GOODS SOLD	
Concessions	2,732.46
Storm Padres	2,815.00
Total Cost of Goods Sold	5,547.46
GROSS PROFIT	45,025.13
EXPENDITURES	
Advertising & Marketing	999.00
Fun Committee	758.85
Christmas Parade	290.22
Opening Carnival	1,278.10
Total Fun Committee	2,327.17
Total Advertising & Marketing	3,326.17
Ask My Accountant	-0.01
Bank Charges & Fees	1,166.49
League Expenses	25.00
Coaches	300.00
District Fees	832.00
Little League Charter	1,907.13
Photographer	1,499.88
Player Equipment	7,447.26
Safety	137.91
Uniforms	9,570.81
Fall Uniforms	826.12
Spring Uniforms	6,349.71
Total Uniforms	16,746.64
Total League Expenses	28,895.82
Legal & Professional Services	500.00
Meals & Entertainment	188.50
Office Supplies & Software	226.17
Other Business Expenses	71.05
PO BOX	166.00
Rent & Lease	2,800.00
Repairs & Maintenance	7,810.60
Taxes & Licenses	25.00

	Total
Utilities	441.00
Portable Toilets	7,412.90
Total Utilities	7,853.90
Total Expenditures	53,029.69
NET OPERATING REVENUE	-8,004.56
OTHER EXPENDITURES	
Live Scan Fees (Little League Required)	104.00
Website (Registration) Service Fees	24.00
Total Other Expenditures	128.00
NET OTHER REVENUE	-128.00
NET REVENUE	\$ -8,132.56

Statement of Financial Position

As of September 30, 2022

	Total
ASSETS	
Current Assets	
Bank Accounts	
Checking - 5241 - 2	12,601.60
Total Bank Accounts	12,601.60
Total Current Assets	12,601.60
TOTAL ASSETS	\$12,601.60
LIABILITIES AND EQUITY	
Liabilities	
Total Liabilities	
Equity	
Opening Balance Equity	55,458.13
Retained Earnings	-34,723.97
Net Revenue	-8,132.56
Total Equity	12,601.60
TOTAL LIABILITIES AND EQUITY	\$12,601.60

Organization Name **Bonsall Fallbrook Little League**
INSTRUCTIONS:

In the boxes below please identify the categories in which the grant funds will be allocated. Provide a description of the costs and why the grant funding will be used to cover this expenses. Please be sure your budget is in compliance with the District's grant policies - see <https://www.fallbrookhealth.org/youth-fitness-grants>

What is the registration cost for this program per youth per season/cycle

\$125-\$200
A. DIRECT SCHOLARSHIPS:

Total amount of Scholarship funds to be allocated?	100%
What percentage of the participation fee is covered by the scholarship?	50%
What percentage of the participation equipment is covered by the scholarship?	50%

B. Narrative - If funding is to be used for anything other than participant registration or equipment cost scholarships, please explain below:

Umpire fees, field maintenance, insurance, landscaping, field lights and rentals for smaller fields are all averaged out and taken into account when we are setting our prices for the season.

Organization Name

Legal Name

Boys & Girls Clubs of North County

Tax Exempt Status

YES

What is your EIN/Tax Exempt 501(c)3 designation ID#?

952241614

Brief Program Description

Boys & Girls Clubs of North County provides recreational leagues for basketball and indoor soccer, serving the youth in the Fallbrook, Bonsall, Rainbow and De Luz communities. Focusing on skills and sportsmanship, our leagues reach nearly 200 youth participants each year. This grant request would fund our basketball program.

Program Information - Type

Time Bound

Funding Amount Being Requested

5000

Organization's Mission Statement

To inspire and enable all young people, especially those who need us most, to reach their full potential as productive, caring, and responsible citizens.

What year was this Organization or program started?

1962

Will you be able to document that 100% of the grant program recipients live within the communities of Fallbrook, Rainbow, Bonsall or De Luz?

YES

Organization History & Accomplishments

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, and later changed its name 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 added 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 apartments, in collaboration with Community Housing Works and Better World Foundation. In 2020 two sites were established at Camp Pendleton schools, May Fae Pendleton, and San Onofre. In 2022 we expanded our partnership with FUESD by significantly increasing the numbers of youth we could serve at each site and adding a wider variety of program offerings, including specialized programs with outside vendors. Boys & Girls Clubs of North County has been recognized by BGCA with numerous awards of youth attendance, marketing and board strength. In addition, we have offered a community-based sports program for many years. Our current sports include basketball and indoor soccer. These recreational based sports are available for youth in our community, as well as surrounding areas.

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

100

Target Population - Age

	Percent of program participants	Estimated number of participants
Children (infants to 12)	95	95
Young Adults (13-17)	5	5
Adults (18-60)	0	0
100	100	

Target Population - Gender

	Percent of program participants
Female	40
Male	60
Non-binary	
Unknown*	

Anticipated Acknowledgment

Anticipated Acknowledgment

- Social Media Postings
- Signage at Service Sites
- Print Materials to Service Recipients
- Website Display

Anticipated Acknowledgment

The Fallbrook Regional Health District will be promoted through our Facebook and Instagram posts about our sports program. They will also be acknowledged on our sports flyer, on our website and through a banner hanging in our gym, where the programs take place.

Contact Information

Contact Name

Allison Barclay

Title

CEO

Primary Contact Phone

7607285871

Email Address

allisonb@bgcnorthcounty.org

Organization Mailing Address

445 E. Ivy Street
Fallbrook, CA, 92028

Board of Directors



Board List with affiliations 20....pdf

Financial Documents - P&L and Balance Sheet



BGCNC ELECTRONIC AUDITpdf

Financial Documents - 990



BGCNC TAX RETURNS.pdf

Program Budget



23 24 FRHD Youth Fitness B... .xlsx

Terms and Conditions

Accepted



BOYS & GIRLS CLUBS
OF NORTH COUNTY

Board of Directors 2022-2023

Governing Board	Chet Bierbrauer	3M, retired
2 nd Vice President	Chris Catania	Sales Manager/VP of Mortgage Lending, Guaranteed Rate
Immediate Past President	Mike Edelstein	Restaurateur, retired
1 st Vice President	Steve Grimm	Accountant, retired
President	Dale Mitchell	High School Superintendent, retired
Treasurer	Paul Norberg	Tax Accountant, retired
Governing Board	Donna Reisbeck-Stoewer	Education Administrator, retired
Governing Board	Steven Schindler	TV Writer/Producer, retired
Governing Board	Mike Schulte	Director of Operations, Core-Mac, retired
Governing Board	Jim Short	Software Developer, retired
Secretary	Louise Small	Community volunteer
Governing Board	Siegrid Stillman	FUESD School Board member/Educator, retired
Governing Board	Dale Tattersall	SDG&E
Executive Committee	Deborah Zoller	Attorney at Law

MUNGER & COMPANY, CPAs

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

Boys and Girls Clubs of North County Audited Financial Statements June 30, 2022

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INDEPENDENT AUDITOR'S REPORT

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

Opinion

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, 2022, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

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, 2022, 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.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Boys and Girls Clubs of North County and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Boys and Girls Clubs of North County's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 Boys and Girls Clubs of North County's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Boys and Girls Clubs of North County's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

January 24, 2023



Munger & Company, CPAs

BOYS AND GIRLS CLUBS OF NORTH COUNTY
STATEMENT OF FINANCIAL POSITION
June 30, 2022

ASSETS

OPERATING ASSETS:

Cash	\$ 1,224,530
Accounts receivable	227,213
Prepaid Expense	5,003
Total Operating Assets	<u>1,456,746</u>

FIXED ASSETS:

Land	47,000
Buildings and improvements	2,153,764
Furnishings and equipment	126,873
Vehicles	305,868
Timeshares	12,300
Construction in Process	29,405
Less: accumulated depreciation	<u>(1,745,346)</u>
Total Fixed Assets	<u>929,864</u>

TOTAL ASSETS	<u>\$ 2,386,610</u>
--------------	---------------------

LIABILITIES AND NET ASSETS

LIABILITIES:

Accounts payable	\$ 44,288
Accrued liabilities	58,525
Deferred revenue	23,250
Total Liabilities	<u>126,063</u>

NET ASSETS:

Without donor restrictions	
Undesignated	2,253,187
With donor restrictions	
Purpose restrictions	7,360
	<u>7,360</u>
Total Net Assets Without Donor Restrictions	<u>2,260,547</u>

TOTAL LIABILITIES AND NET ASSETS	<u>\$ 2,386,610</u>
----------------------------------	---------------------

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, 2022

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUES AND SUPPORT:			
Grants	\$ 1,470,239	\$	\$ 1,470,239
Special events, net of expense of \$89,706	166,670		166,670
Contributions	139,067	25,000	164,067
Youth program and league fees	213,119		213,119
Interest income	1,623		1,623
Net assets released from restrictions:	17,640	(17,640)	-
Total Revenues and Support	2,008,358	7,360	2,015,718
EXPENSES:			
Program Services:			
Club	572,877		572,877
Leagues	71,378		71,378
After School	1,049,764		1,049,764
Total Program Services	1,694,019	-	1,694,019
Supporting Services:			
Management and General	326,577		326,577
Total Supporting Services	326,577	-	326,577
Total Expenses	2,020,596	-	2,020,596
Change in Net Assets	(12,238)	7,360	(4,878)
Net Assets - Beginning of Year	2,265,425		2,265,425
Net Assets - End of Year	\$ 2,253,187	\$ 7,360	\$ 2,260,547

The Accompanying Notes are an Integral Part of the Financial Statements

BOYS AND GIRLS CLUBS OF NORTH COUNTY
STATEMENT OF FUNCTIONAL EXPENSES
For the Year Ended June 30, 2022

EXPENSES:	Program Services				Supporting Services		
	Club	Leagues	After School	Total	Management and General	Fund Raising	Total
Conferences and meetings	\$ 572	\$	\$ 1,690	\$ 2,262	\$ 4,207	\$	\$ 6,469
Depreciation	80,551			80,551	7,579		88,130
Dues and subscriptions	1,431	72	10,979	12,482	7,298		19,780
Equipment repair & maintenance	2,505		14,879	17,384	2,367		19,751
Special event expense				-		89,706	89,706
Insurance	2,257	753	24,048	27,058	3,006		30,064
Marketing	813		26	839	4,281		5,120
Occupancy	70,251	1,626	32	71,909	8,964		80,873
Personnel expenses	4,919	868	17,537	23,324	2,149		25,473
Professional fees	4,998		38,889	43,887	48,773		92,660
Salaries and related benefits	336,219	61,299	862,560	1,260,078	229,222		1,489,300
Snack program	43,228		850	44,078			44,078
Supplies	8,097	6,247	72,505	86,849	5,085		91,934
Telephone	1,071	513	5,769	7,353	3,646		10,999
Vehicle costs	15,965			15,965			15,965
Total expense by function	<u>572,877</u>	<u>71,378</u>	<u>1,049,764</u>	<u>1,694,019</u>	<u>326,577</u>	<u>89,706</u>	<u>2,110,302</u>
Less expenses included with revenues on the statement of activities							
Special event expenses	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>(89,706)</u>	<u>(89,706)</u>
Total expenses included in the expense section on the statement of activities	<u>\$ 572,877</u>	<u>\$ 71,378</u>	<u>\$ 1,049,764</u>	<u>\$ 1,694,019</u>	<u>\$ 326,577</u>	<u>\$ -</u>	<u>\$ 2,020,596</u>

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, 2022

CASH FLOWS FROM OPERATING ACTIVITIES:	
Change in Net Assets	\$ (4,878)
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:	
Depreciation	88,130
Changes in operating assets and liabilities:	
Accounts receivable	424,220
Prepaid Expense	2,236
Accounts payable	34,940
Accrued liabilities	2,637
Deferred revenue	23,250
Net cash provided by operating activities	<u>570,535</u>
CASH FLOWS FROM INVESTING ACTIVITIES:	
Purchases of fixed assets	<u>(33,608)</u>
Net cash (used) in investing activities	<u>(33,608)</u>
Net Change in Cash	536,927
Cash at Beginning of Year	<u>687,603</u>
Cash at End of Year	<u>\$ 1,224,530</u>

The Accompanying Notes are an Integral Part of the Financial Statements

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2022

Note 1. Nature of Organization

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. Summary of Significant Accounting Policies

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, 2022.

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2022

Note 2. Summary of Significant Accounting Policies (continued)

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. Gifts of long-lived assets and gifts of cash restricted for the acquisition of long-lived assets are recognized as revenue when the assets are placed in service.

Contributions restricted by donors are reported as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

Revenue and Revenue Recognition

Revenue and Revenue Recognition (Financial Assets)

Accountings Standards Update ASU 2014-09

Revenue from Exchange Transactions: The Organization recognizes revenue in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Updated (ASU) 2014-09, Revenue from Contracts with Customers, as amended. ASU 2014-09 applies to exchange transactions with customers that are bound by contracts or similar agreements and establishes a performance obligation approach to revenue recognition. The Organization adopted this policy for the year ending June 30, 2021, and records the following exchange transaction revenue in the statement of activities for the year ending June 30, 2022:

Youth program and league fees are recognized during the period in which the related performance obligation is met. The performance obligation of providing youth programs and leagues is simultaneously received and consumed by the customer unless the customer pays for program and leagues in a future period.

Special events revenue is net of the cost of direct benefits to donors, contribution revenue for the difference. The direct cost of special events, which ultimately benefit the donor rather than the Organization. The performance obligation is delivery of the event.

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2022

Note 2. Summary of Significant Accounting Policies (continued)

Accounting Standards Update ASU 2018-08

In June 2018, FASB issued ASU No. 2018-08, *Clarifying the Scope and Accounting Guidance for Contributions received and Contributions Made* (ASC Topic 958). This standard applies to all entities that receive or make contributions and was issued to clarify and improve the scope and the accounting guidance for contributions received and contributions made. The amendments in the standard should assist entities in (1) evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions) within the scope of ASC Topic 958, Not for Profit Entities, or as exchange (reciprocal) transactions subject to other guidance and (2) determining whether a contribution is conditional. This standard was effective for June 30, 2020. The adoption of this standard did not result in any cumulative change to the Organization's financial statements.

Contributions are recognized 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. 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 (Non-financial Assets)

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. There were no significant contributions of such goods or services were received during the years ended June 30, 2022. Management will adopt a monetization policy, if and, when it receives donated goods or services.

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.

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 in IRC Section 501(c)(3). Boys and Girls Clubs of North County did not have any unrelated business income tax during the year.

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2022

Note 2. Summary of Significant Accounting Policies (continued)

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. At times, amounts on deposit may exceed insured limits. 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.

Note 3. Liquidity and Availability

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	\$1,224,530
Accounts receivable	227,213
Less: Donor restrictions	<u>(7,360)</u>
	<u>\$1,448,383</u>

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

Note 4. Employee Benefit Plan

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, 2022 was approximately \$48,000.

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2022

Note 5. Accumulated Paid Time Off (PTO)

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, 2022, the liability was approximately \$42,000.

Note 6. Net Assets With Donor Restrictions

Net assets with donor restrictions for program purposes totaled \$7,360 for the year ended June 30, 2022. There were \$17,640 in net assets with donor restrictions for programs that were released during the year ended June 30, 2022.

Note 7. Revenue From Contracts with Customers

Deferred program and league fees, beginning of year	\$ -
Increase in deferred revenue during the year	23,250
Deferred program and league fees, end of year	<u>\$ 23,250</u>

Note 8. Functionalized Expenses

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 9. 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 some common board members. During the year ended June 30, 2022, Boys and Girls Clubs of North County received approximately \$37,000 from the Foundation.

Note 10. Concentrations of Revenues and Receivables

A substantial amount of Boys and Girls Clubs of North County's support is received from a local school district representing approximately 75% of total revenues and support for the year ended June 30, 2022. Two funders contributed for 78% of total accounts receivable as of June 30, 2022. 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 11. Subsequent Events

We have evaluated subsequent events through January 24, 2023, the date the financial statements were available to be issued. Management is not aware of any subsequent events that would require disclosure in, or adjustment to, the financial statements.

Return of Organization Exempt From Income Tax

2021

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 7/1/2021, and ending 6/30/2022

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization Boys & Girls Club of North County
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
445 E Ivy St
 City or town State ZIP code
Fallbrook CA 92028
 Foreign country name Foreign province/state/county Foreign postal code

D Employer identification number
95-2241614

E Telephone number
(760) 728-5871

F Name and address of principal officer:
Allison Barclay 445 E Ivy St, Fallbrook, CA 92028

G Gross receipts \$ 2,105,713

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: bgnorthcounty.org

K Form of organization: Corporation Trust Association Other

L Year of formation 1962 **M** State of legal domicile: CA

H(c) Group exemption number

Part I Summary

		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To promote health, social, educational, vocational, and character development of boys and girls through group activities, sports, and other programs.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	100
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,331,986	1,634,306
	9 Program service revenue (Part VIII, line 2g)	195,106	213,119
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	91	1,912
	11 Other revenue (Part VIII, column (A), lines 5, 6a, 8c, 9c, 10c, and 11e)	85,514	166,670
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,612,697	2,016,007
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,479,706	1,489,300
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	405,768	531,296
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,885,474	2,020,596	
19 Revenue less expenses. Subtract line 18 from line 12	727,223	-4,589	
Net Assets or Fund Balances	20 Total assets (Part X, line 26)	Beginning of Current Year 2,330,661	End of Year 2,386,610
	21 Total liabilities (Part X, line 26)	65,236	126,063
	22 Net assets or fund balances. Subtract line 21 from line 20	2,265,425	2,260,547

Part II Signature Block

Under penalties of perjury, 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 preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: Allison Barclay Date: _____
 Type or print name and title: Executive Director

Paid Preparer Use Only

Print/Type preparer's name: Roland W Munger Preparer's signature: [Signature] Date: 2/7/2023 Check if self-employed PTIN: P01871456

Firm's name: Munger & Company, CPAs Firm's EIN: 47-3342732

Firm's address: 2170 South El Camino Real, Suite 217, Oceanside, CA 92054 Phone no.: 760-730-8020

May the IRS discuss this return with the preparer shown above? See instructions. Yes No

Part III

Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

To promote health, social, educational, vocational, and character development of boys and girls through group activities, sports, and other programs.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,694,019 including grants of \$) (Revenue \$ 213,119)

Improve the health, social, vocational, and character development of boys and girls through group activities, sports, and other programs.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

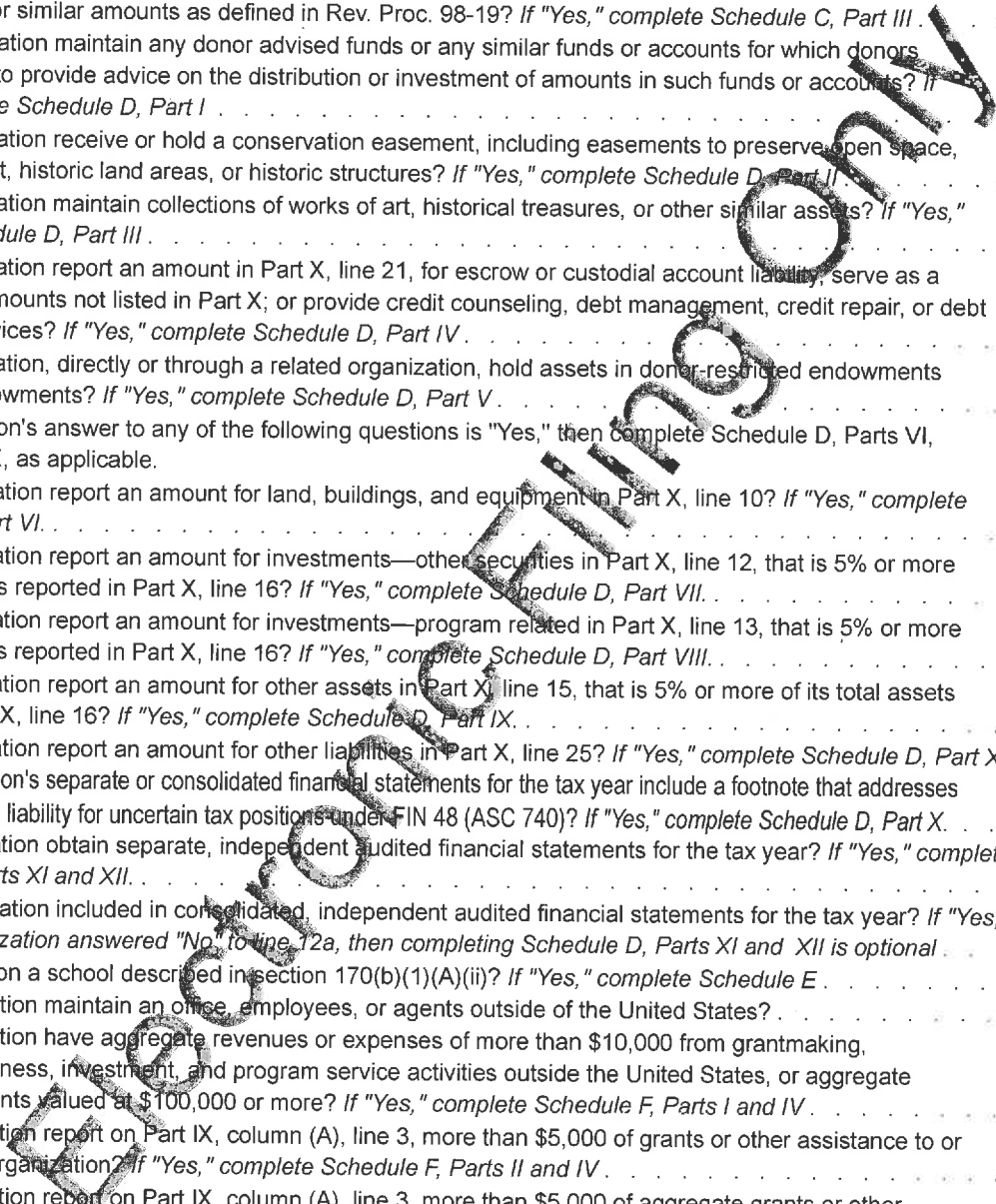
4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 1,694,019

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		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		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X



Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Description, and Yes/No columns. Rows 22-38 cover various IRS requirements like grants, compensation, bond issues, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Description, and Yes/No columns. Rows 1a-1c cover Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	100		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

Part VI

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

X

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (13), 1b (13), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
Allison Barclay
445 E Ivy St, Fallbrook, CA 92028
(760) 728-5871

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual director or trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Allison Barclay Executive Director	40.00 0.00			X			101,758		2,042	
(2) Chet Bierbrauer Director	1.00 0.00	X								
(3) Chris Catania Second VP	2.00 0.00	X		X						
(4) Steve Grimm Director	1.00 0.00	X								
(5) Mike Edelstein Immediate Past President	2.00 0.00	X		X						
(6) Dale Mitchell Board President	2.00 0.00	X		X						
(7) Paul Norberg Treasurer	2.00 0.00	X		X						
(8) Roy Quinn Director	1.00 0.00	X								
(9) Donna Reisbeck-Stoewer Director	1.00 0.00	X								
(10) Jim Short Director	1.00 0.00	X								
(11) Louise Small Director	1.00 0.00	X								
(12) Siegrid Stillman Secretary	2.00 0.00	X		X						
(13) Dale Tattersall Director	1.00 0.00	X								
(14) Deborah Zoller Director	1.00 0.00	X								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal							101,758	0	2,042	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							101,758	0	2,042	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	0				
	1b	Membership dues	24,269				
	1c	Fundraising events	0				
	1d	Related organizations	0				
	1e	Government grants (contributions)	1,336,720				
	1f	All other contributions, gifts, grants, and similar amounts not included above	273,317				
	1g	Noncash contributions included in lines 1a-1f	\$ 3,151				
	1h	Total. Add lines 1a-1f	1,634,306				
	Program Service Revenue			Business Code			
2a		Youth Program and League Fees	900099	213,119	213,119		
b				0			
c				0			
d				0			
e				0			
f		All other program service revenue		0			
g	Total. Add lines 2a-2f		213,119				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,912		1,912	
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
	6a	Gross rents	(i) Real				
			(ii) Personal				
			6a				
	6b	Less: rental expenses					
	6c	Rental income or (loss)	0	0			
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			7a	0	0		
			7b	0	0		
	7c	Gain or (loss)	0	0			
	d	Net gain or (loss)		0			
8a	Gross income from fundraising events (not including \$ of contributions reported on line 10. See Part IV, line 18)						
8a		256,376					
8b	Less: direct expenses		89,706				
c	Net income or (loss) from fundraising events		166,670		166,670		
9a	Gross income from gaming activities. See Part IV, line 19		0				
9a			0				
9b	Less: direct expenses		0				
c	Net income or (loss) from gaming activities		0				
10a	Gross sales of inventory, less returns and allowances						
		10a	0				
		10b	0				
b	Less: cost of goods sold		0				
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
	11a			0			
	b			0			
	c			0			
	d	All other revenue		0			
e	Total. Add lines 11a-11d		0				
12	Total revenue. See instructions		2,016,007	213,119	0	168,582	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
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, trustees, and key employees	101,758	89,541	12,211	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	1,197,158	1,069,450	187,708	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	48,297	40,863	7,434	
9	Other employee benefits	44,890	37,981	6,909	
10	Payroll taxes	97,197	82,237	14,960	
11	Fees for services (nonemployees):				
a	Management	0			
b	Legal	0			
c	Accounting	66,931	8,158	48,773	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	35,729	35,729		
12	Advertising and promotion	5,120	839	4,281	
13	Office expenses	91,934	86,849	5,085	
14	Information technology	10,999	7,353	3,646	
15	Royalties	0			
16	Occupancy	80,873	71,909	8,964	
17	Travel	15,965	15,965		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	6,469	2,262	4,207	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	88,130	80,551	7,579	0
23	Insurance	30,064	27,058	3,006	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	Dues and Subscriptions	19,780	12,482	7,298	
b	Equipment Repair and Maintenance	19,751	17,384	2,367	
c	Personnel Expenses	25,473	23,324	2,149	
d	Snack Program	44,078	44,078		
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	2,020,596	1,694,019	326,577	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	494,439	1	1,020,079
	2 Savings and temporary cash investments	193,164	2	204,451
	3 Pledges and grants receivable, net	631,433	3	227,213
	4 Accounts receivable, net	20,000	4	0
	5 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	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	
	9 Prepaid expenses and deferred charges	7,239	9	5,003
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,675,210		
	b Less: accumulated depreciation	10b 1,745,346	984,386	10c 929,864
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 33)		2,330,661	16	2,386,610
Liabilities	17 Accounts payable and accrued expenses	65,236	17	102,813
	18 Grants payable	0	18	
	19 Deferred revenue	0	19	23,250
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25		65,236	26
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,265,425	27	2,253,187
	28 Net assets with donor restrictions	0	28	7,360
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	
	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		2,265,425	32	2,260,547
33 Total liabilities and net assets/fund balances		2,330,661	33	2,386,610

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,016,007
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,020,596
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,589
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,265,425
5	Net unrealized gains (losses) on investments	5	-289
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,260,547

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b 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.		

Depreciation and Amortization

Form **4562**

(Including Information on Listed Property)

2021

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

Attachment
Sequence No. **179**

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

Name(s) shown on return Boys & Girls Club of North County	Business or activity to which this form relates 990	Identifying number 95-2241614
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	0
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29		
		7
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7		8
		0
9 Tentative deduction. Enter the smaller of line 5 or line 8		9
		0
10 Carryover of disallowed deduction from line 13 of your 2020 Form 4562.		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 2022. Add lines 9 and 10, less line 12		13
		0

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II 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 during the tax year. See instructions	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2021	17	87,830
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 <input type="checkbox"/>		

Section B - Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property		4,203	7	FM	SL	300
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

20 a Class life					
b 12-year			12 yrs.		S/L
c 30-year			30 yrs.	MM	S/L
d 40-year			40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
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	22	88,130
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

2021

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 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 government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations: 0
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,709,857	1,691,763	1,545,530	2,639,152	2,105,713	9,692,015
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	1,709,857	1,691,763	1,545,530	2,639,152	2,105,713	9,692,015
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						9,692,015

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	1,709,857	1,691,763	1,545,530	2,639,152	2,105,713	9,692,015
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	227	361	515	91	1,912	3,106
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		1,465	2,611			4,076
11 Total support. Add lines 7 through 10						9,699,197
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	99.93%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.82%
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.).

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, and 12.); 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, Percentage. Rows: 15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) - 15 - 0.00%; 16 Public support percentage from 2020 Schedule A, Part III, line 15 - 16 - 0.00%

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, Percentage. Rows: 17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) - 17 - 0.00%; 18 Investment income percentage from 2020 Schedule A, Part III, line 17 - 18 - 0.00%

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons (as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2)))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on line 11a above?		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
	11a		
	11b		
	11c		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
	2		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
	1		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
	3a		
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.		
	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	0
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	0
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	0
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0
6	Multiply line 5 by 0.035.	6	0
7	Recoveries of prior-year distributions	7	0
8	Minimum Asset Amount (add line 7 to line 6)	8	0

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	0
2	Enter 0.85 of line 1.	2	0
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	0
4	Enter greater of line 2 or line 3.	4	0
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7 0
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9 0
10	Line 8 amount divided by line 9 amount	10 0.000

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		0
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016 0		
b	From 2017 0		
c	From 2018 0		
d	From 2019 0		
e	From 2020 0		
f	Total of lines 3a through 3e	0	
g	Applied to underdistributions of prior years		0
h	Applied to 2021 distributable amount		0
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f	0	
4	Distributions for 2021 from Section D, line 7: \$ 0		
a	Applied to underdistributions of prior years		0
b	Applied to 2021 distributable amount		0
c	Remainder. Subtract lines 4a and 4b from line 4	0	
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		0
7	Excess distributions carryover to 2022. Add lines 3j and 4c.	0	
8	Breakdown of line 7		
a	Excess from 2017 0		
b	Excess from 2018 0		
c	Excess from 2019 0		
d	Excess from 2020 0		
e	Excess from 2021 0		

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II Section B Line 10 This amount of other income is from miscellaneous revenue.

Electronic Filing Only

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

2021

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

Organization type (check one):

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 covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing 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 cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

Name of organization Boys & Girls Club of North County	Employer identification number 95-2241614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Zable Foundation 10731 Treena St. Suite 102 San Diego CA 92131 Foreign State or Province: _____ Foreign Country: _____	\$ 30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Fallbrook Regional Health District 138 S. Brandon Rd. Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 1,103	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Rite Aid Foundation Kid Cents 30 Hunter Lane Camp Hill PA 17011 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Samuel H. French & Katherine Weaver French Fund 550 S 4TH ST Minneapolis MN 55415 Foreign State or Province: _____ Foreign Country: _____	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	US Bank Foundation PO BOX 0634 Milwaukee WI 93201 Foreign State or Province: _____ Foreign Country: _____	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	David C. Copley Foundation 12636 High Bluff Dr STE 400 San Diego CA 92103 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization: Boys & Girls Club of North County
 Employer identification number: 95-2241614

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	San Diego Gas & Electric PO Box 129007 San Diego CA 92112 Foreign State or Province: Foreign Country:	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Community Housing Works 3111 Camino del Rio North Suite 800 San Diego CA 92108 Foreign State or Province: Foreign Country:	\$ 21,300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Angel Society of Fallbrook P.O. Box 1408 Fallbrook CA 92088 Foreign State or Province: Foreign Country:	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Chris Catania 19620 Mount Israel Pl Escondido CA 92029 Foreign State or Province: Foreign Country:	\$ 5,328	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Del Rey Avocado 1260 S. Main St. Fallbrook CA 92028 Foreign State or Province: Foreign Country:	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Wicker Gamble 3575 W Sandia Creek Ter Fallbrook CA 92028 Foreign State or Province: Foreign Country:	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Boys & Girls Club of North County	Employer identification number 95-2241614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Tony Godfrey 3508 Olive Hill Rd Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	Linda Heald 3501 Tierra Linda Ln. Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	John Kister 3636 Luneta Ln Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	Donny Lucy 1260 S. Main Ave. Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	Robert Lucy 3705 Fire Rd Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 11,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	Beth Reed 2221 Vista Valle Verde Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Boys & Girls Club of North County	Employer identification number 95-2241614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	RS Growers PO Box 58 Fallbrook CA 92088 Foreign State or Province: _____ Foreign Country: _____	\$ 10,260	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	Jim Short 3033 Via Loma Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 6,060	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	Fallbrook Union Elementary School District PO Box 698 Fallbrook Fallbrook CA 92088 Foreign State or Province: _____ Foreign Country: _____	\$ 1,034,136	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	California Department of Social Services 744 P Street Sacramento CA 95814 Foreign State or Province: _____ Foreign Country: _____	\$ 119,093	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	Internal Revenue Service 1111 CONSTITUTION AVE., NW Washington DC CA 20224 Foreign State or Province: _____ Foreign Country: _____	\$ 84,903	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	Department of Housing and Community Development 3989 Ruffin Rd. San Diego CA 92123 Foreign State or Province: _____ Foreign Country: _____	\$ 28,931	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Boys & Girls Club of North County	Employer identification number 95-2241614
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	Governor's Office of Business and Economic Developn 1325 J St Suite 1800 Sacramento CA 95814 Foreign State or Province: _____ Foreign Country: _____	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	County of San Diego Department of Parks and Recrea 5500 Overland Avenue, Suite 410 San Diego CA 92123 Foreign State or Province: _____ Foreign Country: _____	\$ 12,950	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	Office of Juvenile Justice and Delinquency Prevention 810 Seventh Street NW Washington DC CA 20531 Foreign State or Province: _____ Foreign Country: _____	\$ 22,681	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization
Boys & Girls Club of North County

Employer identification number
95-2241614

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

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

ELECTRONIC FILING ONLY

Name of organization Boys & Girls Club of North County	Employer identification number 95-2241614
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ 0
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
For. Prov. Country			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

Boys & Girls Club of North County

95-2241614

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | 0 |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0	0	0	0

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | |
| (ii) Related organizations | | |
| b If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	47,000		47,000
b Buildings	0	1,419,624	904,487	515,137
c Leasehold improvements	0	702,920	380,552	322,368
d Equipment	0	432,742	416,788	15,954
e Other	0	72,924	43,519	29,405
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				929,864

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	0	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	0

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	0
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		0

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . . .

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 The Gavel Group 26439 Rancho Pk Lake Forest CA 92630	Event Auction		*	196,999	18,000	178,999
2				0	0	0
3				0	0	0
4				0	0	0
5				0	0	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
Total				196,999	18,000	178,999

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
		Golf	Auction	NONE	(add col. (a) through col. (c))		
		(event type)	(event type)	(total number)			
Revenue	1	Gross receipts	59,377	196,999	0	256,376	
	2	Less: Contributions			0	0	
	3	Gross income (line 1 minus line 2)	59,377	196,999	0	256,376	
Direct Expenses	4	Cash prizes			0	0	
	5	Noncash prizes			0	0	
	6	Rent/facility costs			0	0	
	7	Food and beverages			0	0	
	8	Entertainment			0	0	
	9	Other direct expenses	22,736	66,970	0	89,706	
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(89,706)
	11	Net income summary. Subtract line 10 from line 3, column (d)					166,670

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
		1	Gross revenue			
Direct Expenses	2	Cash prizes				0
	3	Noncash prizes				0
	4	Rent/facility costs				0
	5	Other direct expenses				0
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				(0)
8	Net gaming income summary. Subtract line 7 from line 1, column (d)					0

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

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a		%
b	An outside facility	13b		%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ 0 and the amount of gaming revenue retained by the third party ▶ \$ 0
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 0

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE O
(Form 990)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization

Employer identification number

Boys & Girls Club of North County

95-2241614

Form 990, Part VI, Section B, 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 approval prior to filing.

Form 990, Part VI, Section B, Line 12c: The conflict of interest policy as well as situations
and positions of the policy have taken place.

Form 990, Part VI, Section C, Line 19: The Organization's governing documents and tax 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.

Form 990, Part VI, Section B, Line 15b: The Executive Director in conjunction with Board
approval establishes the pay for the staff.

Electronic Filing Only

California Exempt Organization Annual Information Return

2021

199

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) 07/01/2021, and ending (mm/dd/yyyy) 06/30/2022

Corporation/Organization name BOYS & GIRLS CLUB OF NORTH COUNTY		California corporation number 0437493
Additional information. See instructions.		FEIN 95-2241614
Street address (suite or room) 445 E IVY ST		PMB no.
City FALLBROOK	State CA	Zip code 92028
Foreign country name	Foreign province/state/county	Foreign postal code

<p>A First return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>B Amended return <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>C IRC Section 4947(a)(1) trust <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>D Final information return? <input checked="" type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized Enter date: (mm/dd/yyyy) <input type="checkbox"/></p> <p>E Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other</p> <p>F Federal return filed? (1) <input checked="" type="checkbox"/> 990T (2) <input type="checkbox"/> 990PF (3) <input type="checkbox"/> Sch H (990) (4) <input checked="" type="checkbox"/> Other 990 series</p> <p>G Is this a group filing? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>H Is this organization in a group exemption <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," what is the parent's name? _____</p>	<p>I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>K Is the organization exempt under R&TC Section 23701g? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," enter the gross receipts from nonmember sources \$ _____</p> <p>L Is the organization a limited liability company? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>M Did the organization file Form 100 or Form 109 to report taxable income? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>N Is the organization under audit by the IRS or has the IRS audited in a prior year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>O Is federal Form 1023/1024 pending? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date filed with IRS _____</p>
---	--

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	471,407	00
	2 Gross dues and assessments from members and affiliates	2	24,269	00
	3 Gross contributions, gifts, grants, and similar amounts received.	3	1,610,037	00
	4 Total gross receipts for filing 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	2,105,713	00
	5 Cost of goods sold	5		00
	6 Cost or other basis, and sales expenses of assets sold	6		00
	7 Total costs. Add line 5 and line 6	7		00
	8 Total gross income. Subtract line 7 from line 4	8	2,105,713	00
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18	9	2,110,302	00
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-4,589	00
Filing Fee	11 Total payments	11		00
	12 Use tax. See General Information K	12		00
	13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15 Penalties and interest. See General Information J	15		00
	16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result	16		00

Sign Here	Under penalties of perjury, 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 preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Title EXECUTIVE DIRECT	Date	Telephone (760) 728-5871
Paid Preparer's Use Only	Preparer's signature	Date 02/07/2023	Check if self-employed <input type="checkbox"/>	PTIN P01871456
	Firm's name (or yours, if self-employed) and address	Firm's FEIN 47-3342732		
	MUNGER & COMPANY, CPAS 2170 SOUTH EL CAMINO REAL, SUITE 217, OCEANSIDE, CA	Telephone 760-730-8020		
	May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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 substitute information.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	469,495	00
	2	Interest	2	1,912	00
	3	Dividends	3		00
	4	Gross rents	4		00
	5	Gross royalties	5		00
	6	Gross amount received from sale of assets (See instructions)	6		00
	7	Other income. Attach schedule	7		00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	471,407	00
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule	9		00
	10	Disbursements to or for members	10		00
	11	Compensation of officers, directors, and trustees. Attach schedule	11	101,758	00
	12	Other salaries and wages	12	1,197,158	00
	13	Interest	13		00
	14	Taxes	14	97,197	00
	15	Rents	15	80,873	00
	16	Depreciation and depletion (See instructions)	16	88,130	00
	17	Other expenses and disbursements. Attach schedule	17	545,186	00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	2,110,302	00

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		687,603		1,224,530
2 Net accounts receivable		651,433		227,213
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	2,594,602		2,628,210	
b Less accumulated depreciation	(1,657,216)	937,386	(1,745,346)	882,864
11 Land		47,000		47,000
12 Other assets. Attach schedule		7,239		5,003
13 Total assets		2,330,661		2,386,610
Liabilities and net worth				
14 Accounts payable		65,236		102,813
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule				23,250
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		2,265,425		2,260,547
22 Total liabilities and net worth		2,330,661		2,386,610

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000

1	Net income per books	●	-4,589	7	Income recorded on books this year not included in this return. Attach schedule	●	
2	Federal income tax	●		8	Deductions in this return not charged against book income this year. Attach schedule	●	
3	Excess of capital losses over capital gains	●		9	Total. Add line 7 and line 8		
4	Income not recorded on books this year. Attach schedule	●		10	Net income per return. Subtract line 9 from line 6		-4,589
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●					
6	Total. Add line 1 through line 5		-4,589				

2021 Depreciation and Amortization

3885F

Attach to Form 541, Form 109, or Form 199.

Name as shown on tax return BOYS & GIRLS CLUB OF NORTH COUNTY	FEIN 95-2241614
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Tangible and intangible assets placed in service during the 2021 taxable year:			Depreciation			Amortization		
(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	(f) Depreciation for this year	(g) Code section	(h) Period or percentage	(i) Amortization for this year
1 EQUIPMENT	12/20/2021	4,203	SL	7	300			
Add line 1 column (f) and column (i) amounts. See instructions					1	300		

Depreciation

- 2 California depreciation for assets placed in service beginning before the 2021 taxable year 2 87,830
Be sure to make adjustments for any basis differences.
- 3 Total California depreciation. Add line 1(f) and line 2 3 88,130

Amortization

- 4 California amortization for intangibles placed in service beginning before the 2021 taxable year 4 _____
Be sure to make adjustments for any basis differences.
- 5 Total California amortization. Add line 1(i) and line 4 5 _____
- 6 Total depreciation and amortization. Add line 3 and line 5. See instructions 6 88,130

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 ftb.ca.gov and search for **conformity**. Additional information can be found in FTB Pub. 1001, Supplemental Guidelines to California Adjustments.

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 109, California Exempt Organization Business Income 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.** California disallowed depreciation under the federal Accelerated Cost Recovery System (ACRS). California depreciation is calculated in the same manner as in prior years for those assets.
- **On or after January 1, 1987.** California provides special credits and accelerated write-offs that affect the California basis 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 after September 11, 2001.** California has not conformed to the federal Job Creation and Worker Assistance Act of 2002 which allows taxpayers to take an additional first year depreciation deduction and Alternative Minimum Tax depreciation adjustment for property placed in service after September 10, 2001.

Line 17, Part II (CA 199) - Other Deductions

1	Pension plans, employee benefits	1	93,187
2	Legal fees	2	0
3	Accounting fees	3	56,931
4	Other professional fees	4	35,729
5	Travel, conferences, and meetings	5	22,434
6	Printing and publications	6	0
7	Special events direct expenses	7	89,706
8	Office expenses	8	91,934
9	Other expenses	9	155,265
10		10	
11		11	
12	Total	12	545,186

Line 12, Sch L (CA 199) - Other Assets

	Beginning	End
1	0	0
2	7,239	5,003
3		
4		
5		
6		
7		
8		
9		
10	7,239	5,003

Line 18, Sch L (CA 199) - Other Liabilities

	Beginning of Year	End of Year
1	0	0
2	0	23,250
3		
4		
5		
6		
7		
8		
9		
10	0	23,250

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS:
www.oag.ca.gov/charities

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 this report annually no later than four months and fifteen 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 filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

(For Registry Use Only)

Boys & Girls Club of North County Name of Organization List all DBAs and names the organization uses or has used 445 E Ivy St Address (Number and Street) Fallbrook, CA 92028 City or Town, State, and ZIP Code (760) 728-5871 Telephone Number allisonb@bgcnorthcounty.org E-mail Address	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report State Charity Registration Number <u>0437493</u> Corporation or Organization No. <u>CT04430</u> Federal Employer I.D. No. <u>95-2241614</u>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
 Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

PART A - ACTIVITIES

For your most recent full accounting period (beginning 7/1/2021 ending 6/30/2022) list:

Total Revenue \$ (including noncash contributions) <u>2,016,007</u>	Noncash Contributions \$ <u>3,151</u>	Total Assets \$ <u>2,386,610</u>
Program Expenses \$ <u>1,694,019</u>	Total Expenses \$ <u>2,020,596</u>	

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?	X	
5. During this reporting period, did the organization receive any governmental funding?	X	
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	X	
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete.

_____ Signature of Authorized Agent	Allison Barclay Printed Name	Executive Director Title	_____ Date
--	---------------------------------	-----------------------------	---------------

Boys and Girls Club of North County
State Charity Registration Number: CT-04430
FEIN: 95-2241614
CA Corp: 0437493
JUNE 30, 2022

Responses to Form RRF-1

Question 4

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

Question 5

California Department of Social Services
744 P Street, Sacramento, CA 95814
Kimberly Johnson
(800) 952-5253

Internal Revenue Service
1111 Constitution Avenue, SW, Washington DC, 20224
Douglas O'Donnell
(800) 829-1040

Department of Housing and Community Development
3989 Ruffin Road, San Diego, CA 92123
Gustavo Velasquez
(800) 952-8356

Governor's Office of Business and Economic Development
1325 J Street, Suite 1800, Sacramento, CA 95814
Dee Dee Myers
(916) 322-0694

County of San Diego Department of Parks and Recreation
5500 Overland Avenue, Suite 410, San Diego, CA 92123
Brian Albright
(877) 565-3600

Office of Juvenile and Delinquency Prevention
810 Seventh Street NW, Washington DC 20531
Liz Ryan
(202) 307-0703

Question 8

The organization engaged a CPA firm to conduct an audit.

Organization Name **Boys & Girls Clubs of North County**
INSTRUCTIONS:

In the boxes below please identify the categories in which the grant funds will be allocated. Provide a description of the costs and why the grant funding will be used to cover this expenses. Please be sure your budget is in compliance with the District's grant policies - see <https://www.fallbrookhealth.org/youth-fitness-grants>

What is the registration cost for this program per youth per season/cycle

\$70
A. DIRECT SCHOLARSHIPS:

Total amount of Scholarship funds to be allocated?	\$	5,000.00
What percentage of the participation fee is covered by the scholarship?		100%
What percentage of the participation equipment is covered by the scholarship?		0

B. Narrative - If funding is to be used for anything other than participant registration or equipment cost scholarships, please explain below:

Participants can be granted up to a full \$70 scholarship, or a partial scholarship if requested. Participant fee covers all participant costs and includes a game shirt. No other equipment is required for participation.

Organization Name

Legal Name

Boys Warriors Soccer Booster, Inc.

Tax Exempt Status

YES

What is your EIN/Tax Exempt 501(c)3 designation ID#?

873034703

Brief Program Description

We wish to develop the feeling of being a part of "one program" among players, coaches, and parents. Our hope is that this inclusive mindset will grant every individual rewarding experiences and personal growth on and off the pitch.

Program Information - Type

Time Bound

Funding Amount Being Requested

5000

Organization's Mission Statement

The purpose of this organization is to promote and support FHS soccer in Fallbrook, California.

From FHS Soccer Student Handbook: Our program's mission is to provide a healthy and competitive atmosphere for our student-athletes to learn, athletically and academically grow, and perform. Our qualified coaching staff works hard in providing every student-athlete the skills to participate at the varsity level. Our mission is to provide every student-athlete in our soccer program, a program funded on equity, diversity, inclusion and belonging, with a challenging, fun and once of a lifetime experience of high school soccer in the pursuit of excellence.

What year was this Organization or program started?

2021

Will you be able to document that 100% of the grant program recipients live within the communities of Fallbrook, Rainbow, Bonsall or De Luz?

YES

Organization History & Accomplishments

This new BSWB Boosters was established as of 2021. That being said, we can place the following on the history and accomplishments:

A) Supported over 120 students participating in FHS Soccer Activities

B) Supported events that are essential to FHS Soccer programming

C) Assisted in hosting a soccer tournament at our school site

D) Assisted in providing nutritional services to over 100 students participating in FHS Soccer Activities

... any others that you can think of.

From FHS Soccer Program: Our boys' soccer program continues to thrive in promoting student-athlete performance and development. In the previous eleven seasons, our boys' soccer program has participated in six CIF San Diego Section Playoffs, seven tournament Finals, and attained the school's first ever CIF Championship! Additionally, more alumni players continue to represent our programs at college than ever before. Our soccer program has served as a platform for students to transition their athletic participation at NJCAA, CCCAA, NCAA, and NAIA collegiate level programs.

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

66

Target Population - Age

	Percent of program participants	Estimated number of participants
Children (infants to 12)		
Young Adults (13-17)	90	60
Adults (18-60)	10	6

Target Population - Gender

	Percent of program participants
Female	
Male	100
Non-binary	
Unknown*	

Anticipated Acknowledgment

Anticipated Acknowledgment

- Social Media Postings
- Signage at Service Sites
- Print Materials to Service Recipients
- Website Display

Anticipated Acknowledgment

Social Media

Instagram and Facebook

Soccer Handouts

During announcements at games

Contact Information

Contact Name

Eren Melendez

Title

President

Primary Contact Phone

760-622-1644

Email Address

carimelendez15@gmail.com

Organization Mailing Address

231 N Pasadena Ave
Fallbrook, CA, 92028

Board of Directors



Fallbrook Boys Soccer Boo... .docx

Financial Documents - P&L and Balance Sheet



Financial Report.xlsx

Financial Documents - 990



990 Form.pdf

Program Budget



23_24 FRHD Youth Fitness B... .pdf

Terms and Conditions

Accepted

Fallbrook High School Boys Soccer



Financial Report

November 2022-April 2023

Operating Funds available as of November 10, 2022

\$19.43

Operating Funds:

Angel Society	\$700.00
Local Businesses Donations	\$750.00
Jacket Purchases	\$9,085
Additional Jackets	\$535.00
Snap Raise	\$5,839.20
Tournament Reimbursement	\$1,200
Snack Bar/Alumni Game	\$1,790

Total Operating Income

\$19,899.20

Operating Expenses:

Soccer Meeting	\$520.00
Deanna Grant (gray shirts)	\$65.00
Jackets/Pressed & Blessed	\$5,681
Ultra Graphix	\$1,244.86
Refs	\$1,190
Uniform Reimbursement (Jorge Rojas)	\$3,557.37
Soccer Tournament	\$2,285.00
Ultra Graphix	\$122.50 (Check #1019)
Ref Payment	\$66 (Check #1020)
Ace Party Rental	\$57 (Check #1023)
Fallbrook Awards	\$156.78 (Check #1025)
Alumni Ref Fees	\$350.00
Stamps	\$12.00
Brothers Flowers	\$95.00

Total Operating Expense

\$15,402.99

Operating Funds Available as of April 18th, 2023

\$4,496.21

**Fallbrook Boys Soccer Boosters
2022-2023**

Eren Melendez

Board President
Fallbrook, CA

Yesica Penaloza

Vice President
Fallbrook, CA

Veronica Hernandez

Treasurer
Fallbrook, CA

Silvia Ortega

Secretary
Fallbrook, CA

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2021

Open to Public Inspection

A For the **2021** Calendar year, or tax year beginning **2021-05-01** and ending **2022-04-30****B** Check if available Terminated for Business Gross receipts are normally \$50,000 or less**C** Name of Organization: **PARENT BOOSTER USA INC****231 N Pasadena Ave,****Fallbrook, CA, US, 92028****D** Employee IdentificationNumber **87-3034703****E** Website:**F** Name of Principal Officer: **Veronica Hernandez****231 N Pasadena Ave,****Fallbrook, CA, US, 92028**

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

Organization Name **Boys Warriors Soccer Booster Inc**
INSTRUCTIONS:

In the boxes below please identify the categories in which the grant funds will be allocated. Provide a description of the costs and why the grant funding will be used to cover this expenses. Please be sure your budget is in compliance with the District's grant policies - see <https://www.fallbrookhealth.org/youth-fitness-grants>

 What is the registration cost for this program per youth per season/cycle \$ **15,000.00**
A. DIRECT SCHOLARSHIPS:

Total amount of Scholarship funds to be allocated?	100%
What percentage of the participation fee is covered by the scholarship?	0%
What percentage of the participation equipment is covered by the scholarship?	100%

B. Narrative - If funding is to be used for anything other than participant registration or equipment cost scholarships, please explain below:

Organization Name

Legal Name

Fallbrook Band Boosters, Inc.

Tax Exempt Status

YES

What is your EIN/Tax Exempt 501(c)3 designation ID#?

710918424

Brief Program Description

While Marching Warriors is a music program it also provides a rigorous exercise routine. This rigor continues through the marching band season with our students accumulating 170+ hours of physical exercise in August-November. For Winter Drumline and Guard an additional 170+ hours are accumulated in January-May.

Program Information - Type

Ongoing

Funding Amount Being Requested

5000

Organization's Mission Statement

The Fallbrook High School band is committed to creating a positive difference in the lives of the band members by providing musical experiences and performances, and to assist them in achieving their potential as they develop confidence, cooperation, leadership, responsibility, life skills, and high standards of excellence and character.

What year was this Organization or program started?

Fallbrook High School is the second oldest School in San Diego County and the music program has been servicing the community since the 1920's

Will you be able to document that 100% of the grant program recipients live within the communities of Fallbrook, Rainbow, Bonsall or De Luz?

YES

Organization History & Accomplishments

The Fallbrook High School band is a growing program in a Title 1 community who is creating a large impact within the community through music. The music program in the last 5 years has grown from 28 students to now 90+. It is the fastest growing program within our school with many accolades within the marching band world. Most recently the band has qualified in SCSBOA championships and placed top 12. In 2019 the band program was selected to perform for a Veterans Day event in Hawaii and had the honor of performing for the Fallbrook Community in a number of events throughout the year. Our program is also separated into two other groups which are Color Guard and Drumline. Our Color Guard have won 4 gold medals at State championships as well as 3 silver medals and 3 bronzes. Our Drumline has qualified for ADLA championships and have most recently placed 4th.

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

92

Target Population - Age

	Percent of program participants	Estimated number of participants
Children (infants to 12)		
Young Adults (13-17)	100	92
Adults (18-60)		

Target Population - Gender

	Percent of program participants
Female	52
Male	35
Non-binary	5
Unknown*	

Anticipated Acknowledgment

Anticipated Acknowledgment

Social Media Postings

Website Display

Anticipated Acknowledgment

The logo of the School is tied into our program's music logo. We will promote to Instagram and Facebook

Contact Information

Contact Name

Angela

Title

Leonardo

Primary Contact Phone

808-379-7816

Email Address

fhswarriorsband@gmail.com

Organization Mailing Address

PO BOX 1604
Fallbrook, CA, 92088

Board of Directors



23_24 Band Booster Board M....pdf

Financial Documents - P&L and Balance Sheet



FBB Statement of Activities 2....pdf

Financial Documents - 990



FALLBROOK BAND BOOSTER....pdf

Program Budget



FHS Boosters Budget 2023-2... .pdf

Terms and Conditions

Accepted

Fallbrook Band Booster, Inc.			
Tax ID 7109188424			
Board of Directors			
Full Name	Board Position	Professional Affiliation/Industry	Contact Email
Cyndy Guerrettaz	President	Education	cgurrettaz@romoland.net
Angela Leonardo	Vice President	Education	angelaleonardo09@gmail.com
Julissa Pizano	Secretary	Medical Field	jjjulissa@gmail.com
Amy Otto	Treasurer	Clothing Boutique Owner	amy0525@hotmail.com
Lisa Bellamy	Communications	Real Estate	lisbnew22@gmail.com

Fallbrook Band Booster Statement of Activities 2022-2023

Revenues		
Individual Donations	\$32,950.00	parent contributions
Gear/uniforms	\$8,000.00	competition shirts, guard uniforms, shoes
Fundraising	\$25,780.00	ticket sales, concessions, restaurant nights, blast, bingo, bunco, christmas trees, candy
Total:	\$66,730.00	
Expenses		
Program Services	\$57,961.00	Band camp, Marching season, winter drumline, winter guard, Coaches, end of year banquet
Administrative	\$1,632.00	office essentials, program printing
Equipment Maintenance	\$5,800.00	Gas, truck maintenance, instrument repairs
Total:	\$65,393.00	
Assets Beginning 06/22	\$7,178.02	
Assets Ending 06/23	\$11,612.57	

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form, as it may be made public.

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning _____, **2021, and ending** _____, **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization _____ Number and street (or P.O. box if mail is not delivered to street address) _____ Room/suite _____ City or town, state or province, country, and ZIP or foreign postal code _____	D Employer identification number _____ E Telephone number _____ F Group Exemption Number ▶ _____
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G Accounting Method: Cash Accrual Other (specify) ▶ _____ **H** Check if the organization is **not** required to attach Schedule B (Form 990).

I Website: ▶ _____

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ _____

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9		
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	
17	Total expenses. Add lines 10 through 16 ▶	17		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions		
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text"/>		
b	Did the organization file Form 1120-POL for this year?		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved <input type="text"/>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 <input type="text"/>		
b	Gross receipts, included on line 9, for public use of club facilities <input type="text"/>		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		
41	List the states with which a copy of this return is filed <input type="text"/>		
42a	The organization's books are in care of <input type="text"/> Telephone no. <input type="text"/> Located at <input type="text"/> ZIP + 4 <input type="text"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text"/> See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Yes	No
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country <input type="text"/>		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text"/>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		
c	Did the organization receive any payments for indoor tanning services during the year?		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions		

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ **Yes** **No**

Under penalties of perjury, 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 preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here		Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no.	

May the IRS discuss this return with the preparer shown above? See instructions ▶ **Yes** **No**

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

Employer identification number

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 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 government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vii).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)			<input type="checkbox"/>	<input type="checkbox"/>		
(B)			<input type="checkbox"/>	<input type="checkbox"/>		
(C)			<input type="checkbox"/>	<input type="checkbox"/>		
(D)			<input type="checkbox"/>	<input type="checkbox"/>		
(E)			<input type="checkbox"/>	<input type="checkbox"/>		
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

- 12** Gross receipts from related activities, etc. (see instructions) **12**
- 13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

- 14** Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) **14** %
- 15** Public support percentage from 2020 Schedule A, Part II, line 14 **15** %
- 16a 33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage for 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<input type="checkbox"/>	<input type="checkbox"/>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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)? <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<input type="checkbox"/>	<input type="checkbox"/>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	<input type="checkbox"/>	<input type="checkbox"/>
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	<input type="checkbox"/>	<input type="checkbox"/>
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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)? <i>If "Yes," answer line 10b below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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.)	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
	11a	<input type="checkbox"/>	<input type="checkbox"/>
b	A family member of a person described on line 11a above?		
	11b	<input type="checkbox"/>	<input type="checkbox"/>
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
	11c	<input type="checkbox"/>	<input type="checkbox"/>

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	<input type="checkbox"/>	<input type="checkbox"/>
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
	2	<input type="checkbox"/>	<input type="checkbox"/>

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	<input type="checkbox"/>	<input type="checkbox"/>

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	<input type="checkbox"/>	<input type="checkbox"/>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	<input type="checkbox"/>	<input type="checkbox"/>
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	<input type="checkbox"/>	<input type="checkbox"/>

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
	2a	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
	2b	<input type="checkbox"/>	<input type="checkbox"/>
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
	3a	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	<input type="checkbox"/>	<input type="checkbox"/>

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Employer identification number

2023-2024 Budget			
EXPENSES			
Category	Item	Notes	Budget Amount
Band Camp	Dinners - BBQ & Pizza Parties		\$500.00
	Coaches	3 coaches at \$350	\$1,050.00
	Lifeguards	2 lifeguards for 2 hours @ \$15/hour	\$60.00
	Red Binders & Sheet Protectors	check snack shack for inventory before ordering	\$250.00
	Dot Books	100 books @ \$7.50 each - check snack shack for inventory	\$750.00
Leadership Camp		6 kids @ \$300 each	\$1,800.00
Marching Band	Hoodies, hats, sweats		\$800.00
	Drillmasters & gloves		\$1,200.00
	Tuba players: hats and gloves	5 tuba players	\$150.00
	Competition Shirts		\$1,200.00
	Red Shirts		\$1,000.00
	Dri Fit		\$1,600.00
	Dry Cleaning		\$2,000.00
	Competition Music		\$3,400.00
	Competition Fees		\$2,000.00
	DCI Show		\$40.00
	Drill Routine		\$1,600.00
	Props	fences, saloon door	\$2,000.00
	Gas for Trucks	\$150 every two comps	\$600.00
	Uniforms	90 hats @ \$16 each	\$1,500.00
	Senior Dinner/Circle		\$1,000.00
	Senior Night (Football Game)	roses for parents, sashes for seniors & senior banners	\$400.00

	Audio Equipment		\$700.00
	Comp Food		\$1,500.00
Guard	Flags - Practice	purchased Spring 2023	\$0.00
	Flags - Competition	60 flags @ \$40 each	\$2,400.00
	Rifles	5 rifles @ \$45 each	\$225.00
	Numbered Flag Bags	purchased Spring 2023	\$0.00
	Guard Costumes - Marching Season	\$250 deposit made on 15 costumes @ \$175 each	\$2,625.00
TOTAL for Fall Season:			\$32,350.00
Coaches	Coaches		\$9,000.00
Winter Drumline	Competition Entry Fees		\$1,200.00
	Show Music		\$800.00
	Show Drill & Design		\$500.00
	Truck - Gas		\$600.00
	Props		\$300.00
	Winter Drumline Costumes		\$2,000.00
			\$5,400.00
Winter Guard	Show Entry		\$775.00
	Show Design & Staging		\$1,200.00
	Winter Guard Costumes & Shoes		\$1,800.00
	Misc		\$200.00
			\$3,975.00

Concert Band	Program Printing		\$200.00
	Misc		\$500.00
			\$700.00
Equipment	Box Truck Maintenance		\$500.00
	Uhaul rental for new marimba etc	\$200 each comp	\$1,200.00
	Trailer Maintenance (Little Red)		\$500.00
	Drum Major Podium	metal shop to fix platform in storage or build new	\$1,500.00
	Golf Cart Maintenance		\$200.00
	Repair for Instruments		\$1,500.00
Instruments	New Instruments		\$1,500.00
	Harbor Freight Membership		\$44.00
			\$6,944.00
Misc	Hair / Feminine /Hygeine Supplies		\$25.00
	First Aid Kit Restock		\$100.00
	Disneyland		\$2,800.00
	Parties / Pizza		\$500.00
	Snack Shack		\$1,000.00
	Fundraising Expenses		\$1,400.00
	Gifts - coaches etc		\$600.00
			\$6,425.00
Office	Website Fee		\$336.00

	Band Phone		\$180.00
	Printing & Band Picture		\$250.00
	Office Supplies		\$100.00
	PO Box Rental		\$176.00
			\$1,042.00
Community	Christmas Parade Entry Fee		\$20.00
	Community Center Vending Fee		\$20.00
	Chamber Events		\$400.00
	Chamber Membership		\$100.00
	Potter Day		\$70.00
			\$610.00
Awards Banquet	Invites		\$150.00
	Awards & Engraving		\$175.00
	Certificates & Folders		\$50.00
	Letters & Pins		\$500.00
	Decorations		\$160.00
	Food		\$3,200.00
	Dessert		\$220.00
	Facility		\$2,500.00
	Senior Gifts		\$1,000.00
	Misc		\$50.00
			\$8,005.00
Scholarships	Bud Roberds Scholarship		\$1,000.00

	Music Scholarship		\$1,000.00
	Guard Scholarship		\$500.00
			\$2,500.00
TOTAL EXPENSES:			\$76,951.00
INCOME			
	Item		
Student Fees	Band Camp Payments		\$2,500.00
	Marching Season Payments		\$15,000.00
	Winter Drumline Payments		\$1,500.00
	Winter Guard Payments		\$1,200.00
TOTAL STUDENT FEES			\$20,200.00
Gear/Uniforms	Marching: dri-fit, comp shirts, red shirts		\$3,400.00
	Color Guard Shoes & Uniforms		\$900.00
	Winter Drumline costumes		\$900.00
	Winter Guard costumes		\$0.00
			\$5,200.00
Banquet	Ticket Sales		\$4,000.00

Concerts	Opportunity Drawings		\$1,200.00
	Concessions		\$1,200.00
			\$2,400.00
FUNDRAISERS	Football Game Sales / Parent Performance		\$400.00
	Restaurant Nights		\$2,000.00
	Sip N Paint	2 events / year - 50 people total @ \$25 profit each	\$1,250.00
	See's Candy		\$500.00
	Blast Athletics		\$10,000.00
	Major Market Receipts		\$120.00
	Snack Shack		\$2,000.00
	Trees & Wreaths		\$1,800.00
	Tree Lighting		\$300.00
	Major Market Table / Air freshener sales		\$500.00
	SD Youth Symphony		\$200.00
	Letter Writing Campaign		\$1,500.00
	Bingo @ Firehouse		\$1,200.00
	Bunco		\$300.00
			\$22,070.00
TOTAL INCOME:			\$53,870.00
	Deficit:		\$23,081.00