

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the **2019** calendar year, or tax year beginning and ending

<b>B</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	<b>C</b> Name of organization <b>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1085 LAGUNA CANYON ROAD</b> City or town, state or province, country, and ZIP or foreign postal code <b>LAGUNA BEACH, CA 92651</b>	<b>D</b> Employer identification number <b>95-1878822</b>
	<b>F</b> Name and address of principal officer: <b>PAMELA ESTES</b> <b>SAME AS C ABOVE</b>	<b>E</b> Telephone number <b>949-494-2535</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: ▶ <b>HTTP://BGCLAGUNABEACH.ORG/</b>	<b>G</b> Gross receipts \$ <b>2,558,140.</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <b>1968</b>	<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>M</b> State of legal domicile: <b>CA</b>		<b>H(c)</b> Group exemption number ▶

**Part I Summary**

	1 Briefly describe the organization's mission or most significant activities: <b>PROVIDE AFTER SCHOOL ACTIVITIES FOR CHILDREN.</b>	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
<b>Activities &amp; Governance</b>	3 Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b> 25
	4 Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b> 25
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) .....	<b>5</b> 67
	6 Total number of volunteers (estimate if necessary) .....	<b>6</b> 400
	7a Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b> 0.
	b Net unrelated business taxable income from Form 990-T, line 39 .....	<b>7b</b> 0.
	<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h) .....
9 Program service revenue (Part VIII, line 2g) .....		751,622. 821,214.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....		51,134. 42,802.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....		355,021. 326,404.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....		2,165,775. 2,109,597.
<b>Expenses</b>		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....
	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) .....	1,577,645. 1,666,861.
	16a Professional fundraising fees (Part IX, column (A), line 11e) .....	0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>349,014.</b>	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	714,615. 714,388.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	2,292,260. 2,381,249.
19 Revenue less expenses. Subtract line 18 from line 12 .....	-126,485. -271,652.	
<b>Net Assets or Fund Balances</b>	20 Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b> 3,755,771. <b>End of Year</b> 3,733,095.
	21 Total liabilities (Part X, line 26) .....	176,415. 271,842.
	22 Net assets or fund balances. Subtract line 21 from line 20 .....	3,579,356. 3,461,253.

**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.

<b>Sign Here</b>	▶ Signature of officer <b>PAMELA ESTES, EXECUTIVE DIRECTOR</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>TRITIA FOSTER</b>	Preparer's signature
	Firm's name ▶ <b>DAVIS FARR LLP</b>	Date
	Firm's address ▶ <b>2301 DUPONT DRIVE, SUITE 200 IRVINE, CA 92612</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P02164134</b>
		Firm's EIN ▶ <b>47-3535842</b>
		Phone no. <b>949-474-2020</b>

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 [X]

1 Briefly describe the organization's mission: TO ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS HEALTHY, CARING, AND RESPONSIBLE ADULTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

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 \$ 1,677,705. including grants of \$ ) (Revenue \$ 836,728. ) THE BOYS & GIRLS CLUB OF LAGUNA BEACH HAS BEEN IN THE FOREFRONT OF YOUTH DEVELOPMENT FOR 64 YEARS, WORKING WITH YOUNG PEOPLE FROM DISADVANTAGED ECONOMIC, SOCIAL AND FAMILY CIRCUMSTANCES. WE HAVE CONSISTENTLY PROVIDED CARING RELATIONSHIPS, HIGH EXPECTATIONS, AND AN OPPORTUNITY TO BELONG AND CONTRIBUTE FOR YOUTH IN SOUTH ORANGE COUNTY. OUR MISSION IS TO EMPOWER ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS HEALTHY, CARING RESPONSIBLE ADULTS.

OUR THREE CLUBS ANNUALLY SERVE APPROXIMATELY 2,000 CHILDREN DURING THEIR OUT-OF-SCHOOL HOURS, PRIMARILY FROM LAGUNA BEACH, ALISO VIEJO, LAKE FOREST AND SURROUNDING COMMUNITIES. OUR THREE CLUB SITES PROVIDE

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

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

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

4e Total program service expenses 1,677,705.

**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, 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 ID, Question Text, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 columns for line numbers, descriptions, and Yes/No checkboxes. Includes lines 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, and 9.

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

Table with columns for line numbers, descriptions, and Yes/No checkboxes. Includes lines 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, and 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.
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

**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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(1) LINDA SAVILLE PRESIDENT	1.00	X		X				0.	0.	0.
(2) PHYLLIS PHILLIPS PAST PRESIDENT & BOARD GOVERNANCE CH	1.00	X		X				0.	0.	0.
(3) KIRK REIDINGER TREASURER	1.00	X		X				0.	0.	0.
(4) NANCY MYERS SECRETARY	1.00	X		X				0.	0.	0.
(5) WILLIAM DOLAN ENDOWMENT CHAIR	1.00	X		X				0.	0.	0.
(6) VITO FRANCONI SAFETY CHAIR	1.00	X						0.	0.	0.
(7) TERRY ANDERSON DIRECTOR	1.00	X						0.	0.	0.
(8) JIMMY AZADIAN DIRECTOR	1.00	X						0.	0.	0.
(9) BRAD BERBERIAN DIRECTOR	1.00	X						0.	0.	0.
(10) ERIC BOSTWICK DIRECTOR	1.00	X						0.	0.	0.
(11) JEFF CALVERT DIRECTOR	1.00	X						0.	0.	0.
(12) DAVE CARTER DIRECTOR	1.00	X						0.	0.	0.
(13) CARRIE CLICK DIRECTOR	1.00	X						0.	0.	0.
(14) DONNIE CREVIER DIRECTOR	1.00	X						0.	0.	0.
(15) ANNE MARIE DOYLE DIRECTOR	1.00	X						0.	0.	0.
(16) JULIE HILE DIRECTOR	1.00	X						0.	0.	0.
(17) MICHAEL IRVIN DIRECTOR	1.00	X						0.	0.	0.

**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 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(18) PAUL LAOS DIRECTOR	1.00	X						0.	0.	0.
(19) KELSEY LAROCHE DIRECTOR	1.00	X						0.	0.	0.
(20) DAN MARTIN DIRECTOR	1.00	X						0.	0.	0.
(21) ALINA PLAIA DIRECTOR	1.00	X						0.	0.	0.
(22) HANZ RADLEIN DIRECTOR	1.00	X						0.	0.	0.
(23) JOHN SHANAHAN DIRECTOR	1.00	X						0.	0.	0.
(24) ROBIN SHANAHAN DIRECTOR	1.00	X						0.	0.	0.
(25) BILL WOOD PAST PRESIDENT	1.00	X						0.	0.	0.
(26) PAMELA ESTES EXECUTIVE DIRECTOR	40.00			X				102,818.	0.	12,173.
<b>1b Subtotal</b>								102,818.	0.	12,173.
<b>c Total from continuation sheets to Part VII, Section A</b>								62,999.	0.	13,122.
<b>d Total (add lines 1b and 1c)</b>								165,817.	0.	25,295.

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 <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such person</i>		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
NONE		

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**

SEE PART VII, SECTION A CONTINUATION SHEETS



<b>Part VII</b> Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(27) CHRIS SWITZER FINANCE DIRECTOR	40.00			X				62,999.	0.	13,122.
Total to Part VII, Section A, line 1c .....								62,999.		13,122.

**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>						
	<b>c</b> Fundraising events	<b>1c</b>	227,000.					
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>	95,000.					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	597,177.					
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$					
	<b>h Total.</b> Add lines 1a-1f			919,177.				
Program Service Revenue	<b>2 a</b> PROGRAM ACTIVITES	Business Code						
		900099		727,744.	727,744.			
	<b>b</b> MEMBERSHIPS	900099		93,470.	93,470.			
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f			821,214.					
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			33,610.			33,610.	
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties			1,010.			1,010.	
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	12,685.				
			(ii) Personal					
	<b>b</b> Less: rental expenses	<b>6b</b>		0.				
	<b>c</b> Rental income or (loss)	<b>6c</b>		12,685.				
	<b>d</b> Net rental income or (loss)			12,685.			12,685.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	107,638.				
			(ii) Other					
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		98,446.				
<b>c</b> Gain or (loss)	<b>7c</b>		9,192.					
<b>d</b> Net gain or (loss)			9,192.			9,192.		
<b>8 a</b> Gross income from fundraising events (not including \$ 227,000. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		629,191.					
		<b>8b</b>	331,996.					
<b>c</b> Net income or (loss) from fundraising events			297,195.			297,195.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>							
		<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities								
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		33,615.					
		<b>10b</b>	18,101.					
		<b>c</b> Net income or (loss) from sales of inventory		15,514.	15,514.			
Miscellaneous Revenue	<b>11 a</b>	Business Code						
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions				2,109,597.	836,728.	0.	353,692.	

**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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	191,106.	38,328.	95,419.	57,359.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	1,265,596.	927,672.	126,397.	211,527.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	37,151.	21,988.	10,407.	4,756.
9 Other employee benefits .....	51,149.	30,276.	14,324.	6,549.
10 Payroll taxes .....	121,859.	92,137.	10,776.	18,946.
11 Fees for services (nonemployees):				
a Management .....				
b Legal .....				
c Accounting .....				
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....	11,442.		11,442.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	53,059.	28,636.	24,423.	
12 Advertising and promotion .....	1,082.	1,082.		
13 Office expenses .....	12,003.	12,003.		
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....	95,019.	71,515.	9,516.	13,988.
17 Travel .....	14,114.	14,114.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings .....				
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	110,294.	79,971.	12,277.	18,046.
23 Insurance .....	58,509.	42,773.	6,241.	9,495.
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 <b>PROGRAM SUPPLIES</b>	190,025.	189,629.	396.	
b <b>REPAIRS AND MAINTENANCE</b>	68,297.	64,425.		3,872.
c <b>MISCELLANEOUS</b>	64,530.	30,860.	31,407.	2,263.
d <b>TRAINING</b>	22,205.	22,205.		
e All other expenses _____	13,809.	10,091.	1,505.	2,213.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>2,381,249.</b>	<b>1,677,705.</b>	<b>354,530.</b>	<b>349,014.</b>
26 <b>Joint costs.</b> 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	117,573.	<b>1</b>	62,185.
	<b>2</b> Savings and temporary cash investments .....	72,388.	<b>2</b>	132,271.
	<b>3</b> Pledges and grants receivable, net .....	115,937.	<b>3</b>	50,410.
	<b>4</b> Accounts receivable, net .....	91,693.	<b>4</b>	49,053.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	28,090.	<b>9</b>	40,578.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 3,875,715.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,038,417.	1,938,914.	<b>10c</b> 1,837,298.
	<b>11</b> Investments - publicly traded securities .....	1,391,176.	<b>11</b>	1,561,300.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	3,755,771.	<b>16</b>	3,733,095.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	137,313.	<b>17</b>	160,786.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	33,898.	<b>19</b>	35,148.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	70,000.
	<b>25</b> 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 .....	5,204.	<b>25</b>	5,908.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	176,415.	<b>26</b>	271,842.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	2,517,917.	<b>27</b>	2,278,093.
	<b>28</b> Net assets with donor restrictions .....	1,061,439.	<b>28</b>	1,183,160.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	3,579,356.	<b>32</b>	3,461,253.
<b>33</b> Total liabilities and net assets/fund balances .....	3,755,771.	<b>33</b>	3,733,095.	

**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	2,109,597.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,381,249.
3	Revenue less expenses. Subtract line 2 from line 1	3	-271,652.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,579,356.
5	Net unrealized gains (losses) on investments	5	220,276.
6	Donated services and use of facilities	6	-66,727.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,461,253.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in 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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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.
- 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? .....
- 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 .....

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2019)



**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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1364084.	1494975.	989,880.	1007998.	919,177.	5776114.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....	92,960.	100,960.	109,685.	90,995.	66,727.	461,327.
<b>4 Total.</b> Add lines 1 through 3 .....	1457044.	1595935.	1099565.	1098993.	985,904.	6237441.
<b>5</b> 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) .....						304,188.
<b>6 Public support.</b> Subtract line 5 from line 4.						5933253.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b> Amounts from line 4 .....	1457044.	1595935.	1099565.	1098993.	985,904.	6237441.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	48,080.	40,788.	49,451.	47,215.	47,305.	232,839.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	395.					395.
<b>11 Total support.</b> Add lines 7 through 10						6470675.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	6,597,627.
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	91.69 %
<b>15</b> Public support percentage from 2018 Schedule A, Part II, line 14 .....	<b>15</b>	92.40 %
<b>16a 33 1/3% support test - 2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2018.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2019.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2018.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> 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>18 Private foundation.</b> 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**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five 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**

<b>15</b> Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2018 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2018 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2019.** 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 - 2018.** 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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 10b below.</i>		
<b>b</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
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <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 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>		
<b>2</b> 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>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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>Provide details in Part VI.</i>		
<b>b</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>		

**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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<b>Distributable Amount.</b> 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 A (Form 990 or 990-EZ) 2019

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2019 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2019</b>	<b>(iii) Distributable Amount for 2019</b>
<b>1</b> Distributable amount for 2019 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<b>i</b> Carryover from 2014 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2019 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2015			
<b>b</b> Excess from 2016			
<b>c</b> Excess from 2017			
<b>d</b> Excess from 2018			
<b>e</b> Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019



Schedule A

Identification of Excess Contributions  
Included on Part II, Line 5

2019

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
THEDA & TAMBLIN CLARK SMITH FAMILY FOUNDATION	170,000.	40,586.
WILLIAM AND SUE GROSS FAMILY FOUNDATION	350,000.	220,586.
CLICK FAMILY FOUNDATION	133,250.	3,836.
DAVE AND HOLLY WILSON	148,008.	18,594.
MASSEN GREENE FOUNDATION	150,000.	20,586.
Total Excess Contributions to Schedule A, Part II, Line 5 .....		304,188.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

**BOYS & GIRLS CLUB OF LAGUNA BEACH**

Employer identification number

**95-1878822**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

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**

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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization <b>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</b>	Employer identification number <b>95-1878822</b>
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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	CITY OF LAGUNA BEACH 505 FOREST AVE. LAGUNA BEACH, CA 92651-2332	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MASSEN GREENE FOUNDATION 32974 DANATEAK DANA POINT, CA 92652-1628	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	THEDA & TAMBLIN CLARK SMITH FAMILY FOUNDATION 501 SILVERSIDE ROAD WILMINGTON, DE 19809-1374	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	O.L. HALSELL FOUNDATION P.O. BOX 6300 SANTA ANA, CA 92706-0300	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	JIM CLICK 6403 E. MIRAMAR DRIVE TUCSON, AZ 85715	\$ 61,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	SUBARU OF AMERICAN FOUNDATION 2235 ROUTE 70 WEST CHERRY HILL, NJ 08002	\$ 30,270.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</b>	Employer identification number  <b>95-1878822</b>
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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
7	<u>HEXBERG FAMILY FOUNDATION</u>  <u>921 EMERALD BAY</u>  <u>LAGUNA BEACH, CA 92651</u>	\$ <u>21,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<u>CITY OF ALISO VIEJO</u>  <u>12 JOURNEY, SUITE 100</u>  <u>ALISO VIEJO, CA 92656</u>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<u>ORANGE COUNTY COMMUNITY FOUNDATION</u>  <u>4041 MACARTHUR BLVD. STE 510</u>  <u>NEWPORT BEACH, CA 92660</u>	\$ <u>148,750.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<u>NANCY MYERS</u>  <u>1085 LAGUNA CANYON ROAD</u>  <u>LAGUNA BEACH, CA 92651</u>	\$ <u>38,439.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<u>THE WILLIAM AND MARY FOUNDATION</u>  <u>5300 DISCOVERY PARK BLVD</u>  <u>WILLIAMSBURG, VA 23185</u>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<u>RAY WIRTA</u>  <u>1085 LAGUNA CANYON ROAD</u>  <u>LAGUNA BEACH, CA 92651</u>	\$ <u>40,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</b>	Employer identification number  <b>95-1878822</b>
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**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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization  <b>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</b>	Employer identification number  <b>95-1878822</b>
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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 info. once.) ▶ \$ \_\_\_\_\_  
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
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2019**  
**Open to Public Inspection**

Name of the organization **BOYS & GIRLS CLUB OF LAGUNA BEACH** Employer identification number **95-1878822**

**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (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? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

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.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

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.

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 .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

**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             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 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	1,148,619.	1,577,422.	1,455,706.	1,375,685.	780,629.
b Contributions					661,708.
c Net investment earnings, gains, and losses	215,799.	-69,029.	181,670.	80,021.	-19,005.
d Grants or scholarships					
e Other expenditures for facilities and programs	29,451.	359,774.	59,954.		47,647.
f Administrative expenses					
g End of year balance	1,334,967.	1,148,619.	1,577,422.	1,455,706.	1,375,685.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  11.40 %
  - b Permanent endowment  81.50 %
  - c Term endowment  7.10 %
- 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   | X   |    |
| (ii) Related organizations  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b  |    |
- 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		112,710.		112,710.
b Buildings		3,468,754.	1,792,080.	1,676,674.
c Leasehold improvements				
d Equipment		294,251.	246,337.	47,914.
e Other				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 1,837,298.

**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 .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**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	
(2) SNACK BAR DEPOSITS	5,908.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	5,908.

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 ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	2,387,108.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	220,276.	
b	Donated services and use of facilities	2b	50,576.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		270,852.
3	Subtract line 2e from line 1		3	2,116,256.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,442.	
b	Other (Describe in Part XIII.)	4b	-18,101.	
c	Add lines 4a and 4b	4c		-6,659.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	2,109,597.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,505,211.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	117,303.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	18,101.	
e	Add lines 2a through 2d	2e		135,404.
3	Subtract line 2e from line 1		3	2,369,807.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	11,442.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		11,442.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,381,249.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2:**

THE BOYS AND GIRLS CLUB OF LAGUNA BEACH IS EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANCHISE TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE STATE REVENUE AND TAXATION CODE, RESPECTIVELY. THE CLUB'S FORMS 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED. THE CLUB'S FORMS 199, CALIFORNIA EXEMPT ORGANIZATION ANNUAL INFORMATION RETURN, ARE SUBJECT TO EXAMINATION BY THE FTB, GENERALLY FOR FOUR YEARS AFTER THEY ARE FILED.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

MERCHANDISE EXPENSE -18,101.

**Part XIII** Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

MERCHANDISE EXPENSE 18,101.





**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 (add col. (a) through col. (c))	
		GALA	NIGHT AT THE RANCH	3		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	444,411.	192,627.	219,153.	856,191.
	2	Less: Contributions	125,000.	57,750.	44,250.	227,000.
	3	Gross income (line 1 minus line 2)	319,411.	134,877.	174,903.	629,191.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	100,938.	80,303.	24,677.	205,918.
	7	Food and beverages	6,031.	765.	17,910.	24,706.
	8	Entertainment	5,592.	8,197.	4,643.	18,432.
	9	Other direct expenses	29,187.	18,108.	35,645.	82,940.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				331,996.
11	Net income summary. Subtract line 10 from line 3, column (d)				297,195.	

**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			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	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)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

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: \_\_\_\_\_





**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

BOYS & GIRLS CLUB OF LAGUNA BEACH

Employer identification number

95-1878822

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COMPREHENSIVE QUALITY OUT-OF-SCHOOL ENRICHMENT FOR CHILDREN IN K-6TH  
GRADES AND A TEEN CENTER FOR 7TH - 12TH GRADES. WE ALSO PROVIDE THE  
ONLY FREE LICENSED PRESCHOOL WHICH EXCLUSIVELY SERVES LOW INCOME  
FAMILIES IN LAGUNA BEACH.

IN 2019, WE EMPLOYED 31 FULL TIME AND 18 PART TIME STAFF AND HAD OVER  
400 VOLUNTEERS HELP WITH OUR PROGRAMS. PARENT, CORPORATE AND COMMUNITY  
VOLUNTEERS ARE USED AS TUTORS AND MENTORS TO ASSIST IN THE EDUCATION &  
TECHNOLOGY CENTER. VOLUNTEERS ARE ALSO USED IN THE PRESCHOOL, ATHLETIC  
AND ART DEPARTMENTS ASSISTING OUR PROGRAM STAFF AND THE CHILDREN.

WE ARE COMMITTED TO NEVER TURNING AWAY A CHILD DUE TO FINANCIAL  
CIRCUMSTANCES. WITH NO OTHER AFFORDABLE OPTIONS AVAILABLE IN OUR  
SERVICE AREA, MANY FAMILIES LIVING PAYCHECK TO PAYCHECK RELY ON OUR  
CLUB TO CARE FOR THEIR CHILDREN DURING THE WORK DAY. OVER 22% OF OUR  
MEMBERS QUALIFIED FOR FREE AND REDUCED SCHOOL LUNCH PROGRAM AND 20% OF  
OUR MEMBERS LIVED IN SINGLE PARENT HOUSEHOLDS. WE PROVIDED OVER 8,700  
FREE MEALS AND NEARLY 84,000 FREE SNACKS TO CHILDREN ATTENDING OUR  
CLUB.

WE OFFER DAILY ACCESS TO A BROAD RANGE OF PROGRAMS FOCUSED ON OUR  
PRIORITY OUTCOMES OF ACADEMIC SUCCESS, CHARACTER AND LEADERSHIP,  
HEALTHY LIFESTYLES, AND CREATIVE EXPRESSION. IN TOTAL, KIDS ENJOYED  
OVER 1.4 MILLION CLUB HOURS OVER THE YEAR INCLUDING APPROXIMATELY  
250,000 HOURS DOING HOMEWORK, 55,000 HOURS OF EXERCISE, AND 10,000

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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HOURS OF NUTRITION EDUCATION. WE ARE ALSO PROUD THAT OUR TEEN MEMBERS CONTRIBUTED NEARLY 2000 VOLUNTEER HOURS AT OUR CLUB AND HELPING OTHER LOCAL ORGANIZATIONS.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS JOHN SHANAHAH AND ROBIN SHANAHAH HAVE A FAMILY RELATIONSHIP.

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

TAX PREPARER EMAILS A COPY OF THE FINAL VERSION OF FORM 990 TO THE DIRECTOR OF FINANCE & ADMINISTRATION FOR DISTRIBUTION TO MEMBERS OF THE EXECUTIVE COMMITTEE FOR REVIEW BEFORE IT IS FILED.

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

BOYS & GIRLS CLUB OF LAGUNA BEACH - CONFLICT OF INTEREST POLICY

A. REASON FOR STATEMENT

THE BOYS & GIRLS CLUB OF LAGUNA BEACH, AS A NONPROFIT, TAX-EXEMPT ORGANIZATION, DEPENDS ON CHARITABLE CONTRIBUTIONS FROM THE PUBLIC. MAINTENANCE OF ITS TAX-EXEMPT STATUS IS IMPORTANT BOTH FOR ITS CONTINUED FINANCIAL STABILITY AND FOR THE RECEIPT OF CONTRIBUTIONS AND PUBLIC SUPPORT. THEREFORE, THE OPERATIONS OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH FIRST MUST FULFILL ALL LEGAL REQUIREMENTS. THEY ALSO DEPEND ON THE PUBLIC TRUST AND THUS ARE SUBJECT TO SCRUTINY BY AND ACCOUNTABILITY TO BOTH GOVERNMENTAL AUTHORITIES AND MEMBERS OF THE PUBLIC.

CONSEQUENTLY, THERE EXISTS BETWEEN BOYS & GIRLS CLUB OF LAGUNA BEACH AND ITS BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES A FIDUCIARY DUTY THAT CARRIES WITH IT A BROAD AND UNBENDING DUTY OF LOYALTY AND FIDELITY. THE BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES HAVE THE RESPONSIBILITY OF ADMINISTERING THE AFFAIRS OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH HONESTLY AND

Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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PRUDENTLY, AND OF EXERCISING THEIR BEST CARE, SKILL, AND JUDGMENT FOR THE SOLE BENEFIT OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH. THOSE PERSONS SHALL EXERCISE THE UTMOST GOOD FAITH IN ALL TRANSACTIONS INVOLVED IN THEIR DUTIES, AND THEY SHALL NOT USE THEIR POSITIONS WITH THE BOYS & GIRLS CLUB OF LAGUNA BEACH OR KNOWLEDGE GAINED THERE FROM FOR THEIR PERSONAL BENEFIT. THE INTERESTS OF THE CLUB MUST HAVE THE FIRST PRIORITY IN ALL DECISIONS AND ACTIONS.

**B. PERSONS CONCERNED**

THIS STATEMENT IS DIRECTED NOT ONLY TO BOARD MEMBERS AND OFFICERS, BUT TO ALL EMPLOYEES WHO CAN INFLUENCE THE ACTIONS OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH. FOR EXAMPLE, THIS INCLUDES ALL WHO MAKE PURCHASING DECISIONS, ALL OTHER PERSONS WHO MIGHT BE DESCRIBED AS "MANAGEMENT PERSONNEL," AND ALL WHO HAVE PROPRIETARY INFORMATION CONCERNING THE BOYS & GIRLS CLUB OF LAGUNA BEACH.

**C. KEY AREAS IN WHICH CONFLICT MAY ARISE**

CONFLICTS OF INTEREST MAY ARISE IN THE RELATIONS OF DIRECTORS, OFFICERS, AND MANAGEMENT EMPLOYEES WITH ANY OF THE FOLLOWING THIRD PARTIES:

- PERSONS AND FIRMS SUPPLYING GOODS AND SERVICES TO THE BOYS & GIRLS CLUB OF LAGUNA BEACH
- PERSONS AND FIRMS FROM WHOM THE BOYS & GIRLS CLUB OF LAGUNA BEACH LEASES PROPERTY AND EQUIPMENT
- PERSONS AND FIRMS WITH WHOM THE BOYS & GIRLS CLUB OF LAGUNA BEACH IS DEALING OR PLANNING TO DEAL IN CONNECTION WITH THE GIFT, PURCHASE OR SALE OF REAL ESTATE, SECURITIES, OR OTHER PROPERTY
- COMPETING OR AFFINITY ORGANIZATIONS
- DONORS AND OTHERS SUPPORTING THE BOYS & GIRLS CLUB OF LAGUNA BEACH

Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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- FAMILY MEMBERS, FRIENDS, AND OTHER EMPLOYEES

D. NATURE OF CONFLICTING INTEREST

A MATERIAL CONFLICTING INTEREST MAY BE DEFINED AS AN INTEREST, DIRECT OR INDIRECT, WITH ANY PERSONS AND FIRMS MENTIONED IN SECTIONS A, B, AND C. SUCH AN INTEREST MIGHT ARISE, FOR EXAMPLE, THROUGH

- OWNING STOCK OR HOLDING DEBT OR OTHER PROPRIETARY INTERESTS IN ANY THIRD PARTY DEALING WITH THE BOYS & GIRLS CLUB OF LAGUNA BEACH

- HOLDING OFFICE, SERVING ON THE BOARD, PARTICIPATING IN MANAGEMENT, OR BEING OTHERWISE EMPLOYED (OR FORMERLY EMPLOYED) BY ANY THIRD PARTY DEALING WITH THE BOYS & GIRLS CLUB OF LAGUNA BEACH

- RECEIVING REMUNERATION FOR SERVICES WITH RESPECT TO INDIVIDUAL TRANSACTIONS INVOLVING THE BOYS & GIRLS CLUB OF LAGUNA BEACH

- USING THE BOYS & GIRLS CLUB OF LAGUNA BEACH'S TIME, PERSONNEL, EQUIPMENT, SUPPLIES, OR GOOD WILL OTHER THAN FOR APPROVED BOYS & GIRLS CLUB OF LAGUNA BEACH ACTIVITIES, PROGRAMS, AND PURPOSES

- RECEIVING PERSONAL GIFTS OR LOANS FROM THIRD PARTIES DEALING WITH THE BOYS & GIRLS CLUB OF LAGUNA BEACH. RECEIPT OF ANY GIFT IS DISAPPROVED EXCEPT GIFTS OF NOMINAL VALUE THAT COULD NOT BE REFUSED WITHOUT DISCOURTESY. NO PERSONAL GIFT OF MONEY SHOULD EVER BE ACCEPTED.

E. INTERPRETATION OF THIS STATEMENT OF POLICY

THE AREAS OF CONFLICTING INTEREST LISTED IN SECTIONS A, B, AND C AND THE RELATIONS IN THOSE AREAS THAT MAY GIVE RISE TO CONFLICT, AS LISTED IN SECTION D, ARE NOT EXHAUSTIVE. CONCEIVABLY, CONFLICTS MIGHT ARISE IN OTHER AREAS OR THROUGH OTHER RELATIONS. IT IS ASSUMED THAT THE TRUSTEES, OFFICERS, AND MANAGEMENT EMPLOYEES WILL RECOGNIZE SUCH AREAS AND RELATION BY ANALOGY.



Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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THE FACT THAT ONE OF THE INTERESTS DESCRIBED IN SECTION D EXISTS DOES NOT NECESSARILY MEAN THAT A CONFLICT EXISTS; OR THAT THE CONFLICT, IF IT EXISTS, IS MATERIAL ENOUGH TO BE OF PRACTICAL IMPORTANCE; OR THAT THE CONFLICT, IF MATERIAL ENOUGH, UPON FULL DISCLOSURE OF ALL RELEVANT FACTS AND CIRCUMSTANCES IS NECESSARILY ADVERSE TO THE INTERESTS OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH.

HOWEVER, IT IS THE POLICY OF THE BOARD THAT THE EXISTENCE OF ANY OF THE INTERESTS DESCRIBED IN SECTION D SHALL BE DISCLOSED ON A TIMELY BASIS AND ALWAYS BEFORE ANY TRANSACTION IS CONSUMMATED. IT SHALL BE THE CONTINUING RESPONSIBILITY OF BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES TO SCRUTINIZE THEIR TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS AND RELATIONSHIPS FOR POTENTIAL CONFLICTS AND TO IMMEDIATELY MAKE SUCH DISCLOSURES.

#### F. DISCLOSURE POLICY AND PROCEDURE

DISCLOSURE SHOULD BE MADE ACCORDING TO THE BOYS & GIRLS CLUB OF LAGUNA BEACH STANDARDS. TRANSACTIONS WITH RELATED PARTIES MAY BE UNDERTAKEN ONLY IF ALL OF THE FOLLOWING ARE OBSERVED:

1. A MATERIAL TRANSACTION IS FULLY DISCLOSED IN THE AUDITED FINANCIAL STATEMENTS OF THE ORGANIZATION;
2. THE RELATED PARTY IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTION;
3. A COMPETITIVE BID OR COMPARABLE VALUATION EXISTS; AND
4. THE ORGANIZATION'S BOARD HAS ACTED UPON AND DEMONSTRATED THAT THE TRANSACTION IS IN THE BEST INTEREST OF THE ORGANIZATION.

STAFF DISCLOSURES SHOULD BE MADE TO THE CHIEF PROFESSIONAL OFFICER (CPO) (OR IF HE OR SHE IS THE ONE WITH THE CONFLICT, THEN TO THE EXECUTIVE COMMITTEE), WHO SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IS MATERIAL, AND IF THE MATTERS ARE MATERIAL, BRING THEM TO THE ATTENTION OF THE

Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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DESIGNATED COMMITTEE.

DISCLOSURE INVOLVING DIRECTORS SHOULD BE MADE TO THE EXECUTIVE COMMITTEE.

THE BOARD SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IS MATERIAL, AND IN THE PRESENCE OF AN EXISTING MATERIAL CONFLICT, WHETHER THE CONTEMPLATED TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONABLE TO THE BOYS & GIRLS CLUB OF LAGUNA BEACH. THE DECISION OF THE BOARD ON THESE MATTERS WILL REST IN ITS MEMBERS' SOLE DISCRETION, AND THEIR CONCERN MUST BE THE WELFARE OF THE BOYS & GIRLS CLUB OF LAGUNA BEACH AND THE ADVANCEMENT OF ITS PURPOSE.

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

THE ORGANIZATION MAKES THEIR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AS WELL AS FILING THEIR FINANCIAL INFORMATION WITH THE CALIFORNIA REGISTRY OF CHARITABLE TRUSTS.

FORM 990 PART X11 LINE 2C

THE AUDIT OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

# California Exempt Organization Annual Information Return

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) \_\_\_\_\_, and ending (mm/dd/yyyy) \_\_\_\_\_

Corporation/Organization name: **BOYS & GIRLS CLUB OF LAGUNA BEACH**

California corporation number: **0261475**

FEIN: **95-1878822**

Street address (suite or room): **1085 LAGUNA CANYON ROAD**

City: **LAGUNA BEACH** State: **CA** ZIP code: **92651**

Foreign country name: \_\_\_\_\_ Foreign province/state/county: \_\_\_\_\_ Foreign postal code: \_\_\_\_\_

**A** First Return  Yes  No

**B** Amended Return  Yes  No

**C** IRC Section 4947(a)(1) trust  Yes  No

**D** Final Information Return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_

**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other

**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series

**G** Is this a group filing? See instructions  Yes  No

**H** Is this organization in a group exemption  Yes  No  
If "Yes," what is the parent's name? \_\_\_\_\_

**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No

**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No

**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_

**L** If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required

**M** Is the organization a Limited Liability Company?  Yes  No

**N** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No

**O** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No

**P** Is federal Form 1023/1024 pending?  Yes  No  
Date filed with IRS \_\_\_\_\_

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

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,545,493	00
	2	Gross dues and assessments from members and affiliates	2	93,470	00
	3	Gross contributions, gifts, grants, and similar amounts received <b>STMT 1</b>	3	919,177	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	2,558,140	00
	5	Cost of goods sold	5	350,097	00
	6	Cost or other basis, and sales expenses of assets sold	6	98,446	00
	7	Total costs. Add line 5 and line 6	7	448,543	00
	8	Total gross income. Subtract line 7 from line 4	8	2,109,597	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	2,381,249	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-271,652	00
<b>Filing Fee</b>	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	Filing fee \$10 or \$25. See General Information F	15	N/A	00
	16	Penalties and Interest. See General Information J	16		00
	17	<b>Balance due.</b> Add line 12, line 15, and line 16. Then subtract line 11 from the result	17		00

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.

**Sign Here**  
Signature of officer: \_\_\_\_\_ Title: **EXECUTIVE DIRE** Date: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Paid Preparer's Use Only**  
Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self-employed  PTIN: **P02164134**  
Firm's name (or yours, if self-employed) and address: **DAVIS FARR LLP**  
**2301 DUPONT DRIVE, SUITE 200**  
**IRVINE, CA 92612** Firm's FEIN: **47-3535842**  
Telephone: **949-474-2020**

May the FTB discuss this return with the preparer shown above? See instructions  Yes  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.

928951 12-04-19

**SEE PART II SUBSTITUTE ATTACHMENT**

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2		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	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8		00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees	•	11		0 00	
	12	Other salaries and wages	•	12		00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13		00
		14	Taxes	•	14		00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16		00
		17	Other Expenses and Disbursements	•	17		00
	18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18		00	

<b>Schedule L Balance Sheet</b>	Beginning of taxable year			End of taxable year
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash				•
2 Net accounts receivable				•
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				•
10 a Depreciable assets				
b Less accumulated depreciation	( )		( )	
11 Land				•
12 Other assets				•
13 <b>Total assets</b>				
<b>Liabilities and net worth</b>				
14 Accounts payable				•
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities				
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund				•
22 <b>Total liabilities and net worth</b>				

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

CA 199

CASH CONTRIBUTIONS  
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
MCKENNA EUROPEAN AUTO CENTER	10850 FIRESTONE BLVD. NORWALK, CA 90650-2294	10/30/19	5,000.
MATTHEW ALCONE TTEE	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/08/19	5,000.
WILLIAM GILLESPIE FOUNDATION	359 SAN MIGUEL DRIVE, #209 NEWPORT BEACH, CA 92660-2119	10/14/19	5,000.
JP MORGAN CHASE	201 N CENTRAL AVE PHOENIX, AZ 85004-1071	04/15/19	5,000.
MILIND AMB	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/27/19	5,000.
UEBERROTH FAMILY FOUNDATION	P.O. BOX 37 CORONA DEL MAR, CA 92625-0037	04/15/19	10,000.
DENNIS BERRYMAN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/02/19	5,000.
LINDA I. SMITH FOUNDATION	3197-A AIRPORT LOOP DR COSTA MESA, CA 92626-3424	06/18/19	5,000.
TUTTLE-CLICK AUTOMOTIVE GROUP	41 AUTO CENTER DRIVE IRVINE, CA 92618-2802	04/19/19	10,000.
RBC FOUNDATION USA	200 VESEY STREET, 14TH FLOOR NEW YORK, NY 10281	05/22/19	15,000.
CITY OF LAGUNA BEACH	505 FOREST AVE. LAGUNA BEACH, CA 92651-2332	07/15/19	25,000.
BUCHANAN STREET PARTNERS	3501 JAMBOREE RD, #4200 NEWPORT BEACH, CA 92660	02/28/19	5,000.
MASSEN GREENE FOUNDATION	32974 DANATEAK DANA POINT, CA 92652-1628	04/25/19	50,000.

BOYS & GIRLS CLUB OF LAGUNA BEACH95-1878822

DON CLURMAN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	8,000.
THEDA & TAMBLIN CLARK SMITH FAMILY FOUNDATION	501 SILVERSIDE ROAD WILMINGTON, DE 19809-1374	09/17/19	25,000.
NEWPORT LEXUS	3901 MACARTHUR BLVD. NEWPORT BEACH, CA 92660-3012	08/13/19	5,000.
THE EDWARDS LIFESCIENCES FUND	ONE EDWARDS WAY IRVINE, CA 92614-5688	10/22/19	5,000.
LEXUS PURSUIT OF POTENTIAL DEALER MATCHING FUNDS	P.O. BOX 7137 PRINCETON, NJ 08543-7137	10/17/19	5,000.
O.L. HALSELL FOUNDATION	P.O. BOX 6300 SANTA ANA, CA 92706-0300	12/16/19	20,000.
DANNY MCKENNA	59 EMERALD BAY LAGUNA BEACH, CA 92651-1251	04/08/19	5,000.
THE GROSS FAMILY CHARITABLE FOUNDATION	1613 SOUTH COAST HIGHWAY LAGUNA BEACH, CA 92651	11/22/19	10,000.
JUDY COBAIN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	5,000.
JIM CLICK	6403 E. MIRAMAR DRIVE TUCSON, AZ 85715	05/03/19	61,300.
EDISON INTERNATIONAL - MATCHING GIFT PROGRAM	P.O.BOX 3288 PRINCETON, NJ 08543-3288	07/18/19	5,000.
COX COMMUNICATIONS, INC.	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	03/19/19	5,000.
SUBARU OF AMERICAN FOUNDATION	2235 ROUTE 70 WEST CHERRY HILL, NJ 08002	05/23/19	30,270.
MADELEINE DOSSIN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/23/19	16,000.

BOYS & GIRLS CLUB OF LAGUNA BEACH95-1878822

KENNETH MUNRO	300 BLUE OAK LN LOS ALTOS, CA 94022	06/04/19	10,500.
JULIE MILLS	2213 CALLE OPALLO SAN CLEMENTE, CA 92673	05/13/19	5,000.
DYKEMA GOSSETT LLP	333 SOUTH GRAND AVENUE, SUITE 2100 LOS ANGELES, CA 90071	04/15/19	5,000.
FESTIVAL OF ARTS FOUNDATION	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	03/25/19	6,000.
DAVID FLATTUM	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/17/19	5,000.
ANGELS BASEBALL LP	2000 GENE AUTRY WAY ANAHEIM, CA 92803	08/26/19	5,500.
ALAN FUERSTMAN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	5,000.
JASON HANSEN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/17/19	7,500.
HEXBERG FAMILY FOUNDATION	921 EMERALD BAY LAGUNA BEACH, CA 92651	05/24/19	21,500.
HASTY HONARKAR	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	5,000.
GARY HOPE	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/17/19	8,000.
JAFFE FAMILY FOUNDATION	933 MACARTHUR BLVD. MAHWAH, NJ 07430	03/11/19	5,000.
FORD MOTOR FUND	WHQ/SUITE 211 ONE AMERICAN ROAD DEARBORN, MI 48126	09/17/19	10,000.
DHONT FAMILY FOUNDATION	2700 N. MAIN ST, SUITE 1100 SANTA ANA, CA 92705	12/16/19	5,000.
GARY JENKINS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	5,500.

BOYS & GIRLS CLUB OF LAGUNA BEACH95-1878822

GREG MACGILLIVRAY	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	03/19/19	5,000.
SHERRY MONTGOMERY	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	09/23/19	5,000.
CITY OF ALISO VIEJO	12 JOURNEY, SUITE 100 ALISO VIEJO, CA 92656	01/24/19	30,000.
ORANGE COUNTY COMMUNITY FOUNDATION	4041 MACARTHUR BLVD. STE 510 NEWPORT BEACH, CA 92660	01/28/19	148,750.
NANCY MYERS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	12/19/19	38,439.
JOHN NOOTBAAR	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	12/31/19	6,170.
PACIFIC LIFE FOUNDATION	P.O. BOX 9000 NEWPORT BEACH, CA 92658	01/29/19	7,500.
DAVID PHILLIPS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/14/19	10,000.
PROVINCE GROUP LLC	26 CORPORATE PLAZA DR #260 NEWPORT BEACH, CA 92660	11/26/19	7,000.
CARRIE REYNOLDS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	06/04/19	10,500.
AL ROBERTS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	04/24/19	5,000.
LINDA SAVILLE	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	03/04/19	15,000.
SCHWAB CHARITABLE FUND	P.O. BOX 628298 ORLANDO, FL 32862	12/31/19	5,000.
JOHN SHANAHAN	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	13,000.
SWIFT REAL ESTATE PARTNERS	2445 MCCABE WAY SUITE 100 IRVINE, CA 92614	08/06/19	5,500.



<u>BOYS &amp; GIRLS CLUB OF LAGUNA BEACH</u>			<u>95-1878822</u>
THE EMPIRE DIAMOND CO.	350 FIFTH AVE., SUITE 3012 NEW YORK, NY 10118	05/20/19	5,500.
THE WILLIAM AND MARY FOUNDATION	5300 DISCOVERY PARK BLVD WILLIAMSBURG, VA 23185	05/03/19	25,000.
TOYOTA OF ORANGE	1400 N. TUSTIN ST ORANGE, CA 92867	02/20/19	5,000.
WELLS FARGO ADVISORS, LLC	ONE NORTH JEFFERSON AVE. ST. LOUIS, MO 63103	05/07/19	10,000.
JANA WILLIAMS	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	05/13/19	7,500.
RAY WIRTA	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	12/02/19	40,000.
WORAVKA FAMILY FOUNDATION FOR CHILDREN	18685 MAIN ST, SUITE 101 HUNTINGTON BEACH, CA 92648	10/15/19	5,000.
TOTAL INCLUDED ON LINE 3			<u><u>874,929.</u></u>

**ANNUAL REGISTRATION RENEWAL FEE REPORT  
 TO ATTORNEY GENERAL OF CALIFORNIA**

**Section 12586 and 12587, California Government Code  
 11 Cal. Code Regs. section 301-307, 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 LAGUNA BEACH**

Name of Organization

List all DBAs and names the organization uses or has used

**1085 LAGUNA CANYON ROAD**

Address (Number and Street)

**LAGUNA BEACH, CA 92651**

City or Town, State, and ZIP Code

**949-494-2535**

Telephone Number

E-mail Address

Check if:

- Change of address  
 Amended report

State Charity Registration Number **CT002681**

Corporation or Organization No. **0261475**

Federal Employer ID No. **95-1878822**

**ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)  
 Make Check Payable to Department of Justice**

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

**PART A - ACTIVITIES**

For your most recent full accounting period (beginning 01/01/2019 ending 12/31/2019) list:

Gross Annual Revenue \$ 2,109,597 Noncash Contributions \$ 0 Total Assets \$ 3,733,095  
 Program Expenses \$ 1,677,705 Total Expenses \$ 2,381,249

**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? <b>SEE STATEMENT 2</b>	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? <b>SEE STATEMENT 3</b>	X	
6. During this reporting period, did the organization hold a raffle for charitable purposes? <b>SEE STATEMENT 4</b>	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, and I am authorized to sign.**

**PAMELA ESTES**

**EXECUTIVE DIRECTOR**

Signature of Authorized Agent

Printed Name

Title

Date

CA RRF-1

EXPLANATION OF FINANCIAL TRANSACTIONS  
PART B, LINE 1

STATEMENT 2

THE CLUB HAS A BANK ACCOUNT WITH UNION BANK AT DECEMBER 31, 2019. A BOARD MEMBER IS AN EMPLOYEE AT UNION BANK. THIS BOARD MEMBER ABSTAINS FROM DECISIONS MADE CONCERNING MATTERS THAT WOULD BE A CONFLICT OF INTEREST.

THE CLUB HOLDS THE ANNUAL GALA EVENT AT THE MONTAGE LAGUNA BEACH EACH YEAR. A MEMBER OF THE BOARD IS AN EMPLOYEE AT THE MONTAGE LAGUNA BEACH.

THE CLUB'S PHONE SERVICE PROVIDER IS COX COMMUNICATIONS. A MEMBER OF THE BOARD IS AN EMPLOYEE AT COX COMMUNICATIONS.

AT DECEMBER 31, 2019, THE CLUB HAD OUTSTANDING EMPLOYEE LOANS OF \$1,775 WHICH ARE INCLUDED IN ACCOUNTS RECEIVABLE IN THE ACCOMPANYING STATEMENT OF FINANCIAL POSITION. THE EMPLOYEE LOANS WILL BE REIMBURSED TO THE CLUB THROUGH PAYROLL DEDUCTIONS IN THE NEXT FISCAL YEAR.

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CA RRF-1

INFORMATION REGARDING GOVERNMENTAL FUNDING  
PART B, LINE 5

STATEMENT 3

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LAGUNA BEACH UNIFIED SCHOOL DISTRICT  
550 BLUMONT, LAGUNA BEACH, CA 92651-2356  
IRENE WHITE 949-497-7700

CITY OF ALISO VIEJO  
12 JOURNEY, SUITE 100, ALISO VIEJO, CA 92656-5335  
GRACIE DURAN 949-425-2519

CITY OF LAGUNA BEACH  
505 FOREST AVE., LAGUNA BEACH, CA 92651-2332  
BOB WHALEN 949-497-0352

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CA RRF-1

EXPLANATION OF CHARITABLE RAFFLES  
PART B, LINE 6

STATEMENT 4

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FIVE RAFFLES WERE HELD DURING FYE 12/31/19 AS FOLLOWS: 5/11/19, 6/17/19,  
9/13/19, 9/19/19, AND 10/11/19.