

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

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BOYS & GIRLS CLUB OF LAGUNA BEACH		D Employer identification number 95-1878822
	Doing business as		E Telephone number 949-494-2535
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1085 LAGUNA CANYON ROAD		G Gross receipts \$ 3,864,083.
	City or town, state or province, country, and ZIP or foreign postal code LAGUNA BEACH, CA 92651		
F Name and address of principal officer: PAMELA ESTES SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶	

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

J Website: ▶ **HTTP://BGCLAGUNABEACH.ORG/**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1968** **M** State of legal domicile: **CA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDE AFTER SCHOOL ACTIVITIES FOR CHILDREN.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	99
	6 Total number of volunteers (estimate if necessary)	6	158
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,321,625.	Current Year 2,318,211.
	9 Program service revenue (Part VIII, line 2g)	427,335.	913,485.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	53,098.	66,546.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-1,270.	-145,905.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,800,788.	3,152,337.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,660,088.	1,907,636.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 246,991.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	547,938.	674,425.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,208,026.	2,582,061.	
19 Revenue less expenses. Subtract line 18 from line 12	-407,238.	570,276.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 3,672,090.	End of Year 4,872,008.
	21 Total liabilities (Part X, line 26)	469,432.	1,021,679.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,202,658.	3,850,329.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	▶ PAMELA ESTES, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	TRITIA FOSTER				P02164134
Firm's name ▶ DAVIS FARR LLP			Firm's EIN ▶ 47-3535842		
Firm's address ▶ 18201 VON KARMAN AVE, SUITE 1100 IRVINE, CA 92612			Phone no. 949-474-2020		

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.

4a (Code:) (Expenses \$ 2,147,477. including grants of \$) (Revenue \$ 915,507.) OUR BOYS & GIRLS CLUB HAS BEEN AT THE FOREFRONT OF YOUTH DEVELOPMENT FOR 70 YEARS, SERVING DIVERSE YOUNG PEOPLE FROM A WIDE SPAN OF SOCIAL, ECONOMIC, RACIAL, CULTURAL, AND HOUSEHOLD EXPERIENCES. WITH AN EQUITY LENS, OUR MANDATE IS TO REACH AND SERVE THOSE WHO NEED US MOST AND NEVER TURN AWAY A CHILD DUE TO FINANCIAL CIRCUMSTANCES. WE PROMOTE THE HEALTHY SOCIAL, EMOTIONAL, PHYSICAL, AND INTELLECTUAL DEVELOPMENT OF YOUNG PEOPLE. OUR PRIMARY SERVICE AREA INCLUDES LAGUNA BEACH, ALISO VIEJO, LAKE FOREST, AND MISSION VIEJO. IN 2021 OVER 3000 YOUTHS BENEFITTED FROM OUR BOYS & GIRLS CLUB EXPERIENCE THROUGH OUR SCHOOL DAY AND OUT-OF-SCHOOL TIME PROGRAMS AT 3 CLUBHOUSES, 6 SCHOOLS, AND 1 PARK. WE ALSO PROVIDE A LICENSED PRESCHOOL PROGRAM, FREE TO LOW-INCOME HOUSEHOLDS. ALL PROGRAMS ARE IN-PERSON. THROUGHOUT THE PANDEMIC, WE

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 2,147,477.

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> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <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 Rev. Proc. 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> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <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)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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 17 regarding employee reporting, 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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 20		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 20		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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 **CHRISTOPHER SWITZER - 949-494-2535**
1085 LAGUNA CANYON RD, LAGUNA BEACH, CA 92651

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAMELA ESTES EXECUTIVE DIRECTOR	40.00			X			110,335.	0.	9,400.	
(2) MICHELLE FORTEZZO CHIEF DEVELOPMENT OFFICER	40.00			X			78,369.	0.	3,331.	
(3) CHRIS SWITZER FINANCE DIRECTOR	40.00			X			63,391.	0.	5,020.	
(4) TERRY ANDERSON PRESIDENT	1.00	X		X			0.	0.	0.	
(5) LINDA SAVILLE PAST PRESIDENT	1.00	X		X			0.	0.	0.	
(6) PHYLLIS PHILLIPS PAST PRESIDENT & PHILANTHROPY CHAIR	1.00	X		X			0.	0.	0.	
(7) KIRK REIDINGER TREASURER	1.00	X		X			0.	0.	0.	
(8) WILLIAM DOLAN ENDOWMENT CHAIR	1.00	X		X			0.	0.	0.	
(9) ANNE MARIE DOYLE SECRETARY	1.00	X		X			0.	0.	0.	
(10) CHERIE APLIN DIRECTOR	1.00	X					0.	0.	0.	
(11) JAMES AZADIAN DIRECTOR	1.00	X					0.	0.	0.	
(12) ERIC BOSTWICK SAFETY CHAIR	1.00	X					0.	0.	0.	
(13) CASEY CALKINS DIRECTOR	1.00	X					0.	0.	0.	
(14) JEFF CALVERT DIRECTOR	1.00	X					0.	0.	0.	
(15) DAVE CARTER DIRECTOR	1.00	X					0.	0.	0.	
(16) DONNIE CREVIER DIRECTOR	1.00	X					0.	0.	0.	
(17) NIKITA GANATRA 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ROB HENDERSON DIRECTOR	1.00	X					0.	0.	0.	
(19) KELSEY LAROCHE DIRECTOR	1.00	X					0.	0.	0.	
(20) MEGHAN MACGILLVRAY DIRECTOR	1.00	X					0.	0.	0.	
(21) AYESHA ATTOH MAHAPATRA DIRECTOR	1.00	X					0.	0.	0.	
(22) PAUL POHORESKY DIRECTOR	1.00	X					0.	0.	0.	
(23) HANZ RADLEIN DIRECTOR	1.00	X					0.	0.	0.	
1b Subtotal							252,095.	0.	17,751.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							252,095.	0.	17,751.	

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

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <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**

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	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	769,854.					
	d Related organizations	1d						
	e Government grants (contributions)	1e	380,000.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,168,357.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 30,870.					
	h Total. Add lines 1a-1f			2,318,211.				
Program Service Revenue	2 a PROGRAM ACTIVITES	Business Code						
		900099		836,000.	836,000.			
	b MEMBERSHIPS	900099		77,485.	77,485.			
	c							
	d							
	e							
	f All other program service revenue							
g Total. Add lines 2a-2f			913,485.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			33,643.			33,643.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties			1,095.			1,095.	
	6 a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	7b	382,949.					
	c Gain or (loss)	7c	32,903.					
d Net gain or (loss)			32,903.			32,903.		
8 a Gross income from fundraising events (not including \$ 769,854. of contributions reported on line 1c). See Part IV, line 18	8a			175,645.				
b Less: direct expenses	8b			324,667.				
c Net income or (loss) from fundraising events				-149,022.			-149,022.	
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a			6,152.				
b Less: cost of goods sold	10b			4,130.				
c Net income or (loss) from sales of inventory				2,022.	2,022.			
Miscellaneous Revenue	11 a	Business Code						
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d							
12 Total revenue. See instructions				3,152,337.	915,507.	0.	-81,381.	

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	269,846.	136,736.	59,861.	73,249.
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	1,435,120.	1,304,757.	34,866.	95,497.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,835.	8,395.	2,225.	1,215.
9 Other employee benefits	50,375.	32,197.	9,426.	8,752.
10 Payroll taxes	140,460.	121,504.	6,005.	12,951.
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	11,851.		11,851.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	31,073.	1,543.	29,530.	
12 Advertising and promotion	21,057.	2,620.	1,779.	16,658.
13 Office expenses	9,299.	8,072.		1,227.
14 Information technology				
15 Royalties				
16 Occupancy	88,318.	67,924.	6,400.	13,994.
17 Travel	17,151.	16,785.	3.	363.
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	124,589.	124,589.		
23 Insurance	99,850.	83,085.	6,006.	10,759.
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 PROGRAM SUPPLIES	112,458.	112,458.		
b REPAIRS AND MAINTENANCE	69,652.	64,633.		5,019.
c MISCELLANEOUS	47,331.	24,338.	18,142.	4,851.
d TRAINING	27,581.	25,866.	671.	1,044.
e All other expenses	14,215.	11,975.	828.	1,412.
25 Total functional expenses. Add lines 1 through 24e	2,582,061.	2,147,477.	187,593.	246,991.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	97,615.	1	532,018.
	2 Savings and temporary cash investments	105,476.	2	609,007.
	3 Pledges and grants receivable, net	76,534.	3	52,395.
	4 Accounts receivable, net	20,314.	4	99,827.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	65,668.	9	85,569.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,075,020.		
	b Less: accumulated depreciation	10b 2,271,286.	10c	1,803,734.
	11 Investments - publicly traded securities	1,566,797.	11	1,689,458.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,672,090.	16	4,872,008.	
Liabilities	17 Accounts payable and accrued expenses	90,236.	17	126,597.
	18 Grants payable		18	
	19 Deferred revenue	14,865.	19	51,149.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	57,083.	24	37,145.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	307,248.	25	806,788.
	26 Total liabilities. Add lines 17 through 25	469,432.	26	1,021,679.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,898,808.	27	2,398,509.
	28 Net assets with donor restrictions	1,303,850.	28	1,451,820.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,202,658.	32	3,850,329.
	33 Total liabilities and net assets/fund balances	3,672,090.	33	4,872,008.

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	3,152,337.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,582,061.
3	Revenue less expenses. Subtract line 2 from line 1	3	570,276.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,202,658.
5	Net unrealized gains (losses) on investments	5	103,365.
6	Donated services and use of facilities	6	-25,970.
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	3,850,329.

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 on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 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
1		
2a		X
b	X	
c	X	
3a		X
3b		

Form 990 (2021)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

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

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	989,880.	1,007,998.	919,177.	1,321,625.	2,318,211.	6,556,891.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge	109,685.	90,995.	66,727.	13,860.	25,970.	307,237.
4 Total. Add lines 1 through 3	1,099,565.	1,098,993.	985,904.	1,335,485.	2,344,181.	6,864,128.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						410,656.
6 Public support. Subtract line 5 from line 4.						6,453,472.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	1,099,565.	1,098,993.	985,904.	1,335,485.	2,344,181.	6,864,128.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	49,451.	47,215.	47,305.	40,477.	34,738.	219,186.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7,083,314.
12 Gross receipts from related activities, etc. (see instructions)					12	5,656,382.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	91.11 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	94.02 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

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

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

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

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

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

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

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

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

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

Schedule B (Form 990) (2021)

Name of organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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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	BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE STREET NE ATLANTA, GA 30309-3580	\$ 64,125.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CARRIE CLICK 426 ARROYO CHICO LAGUNA BEACH, CA 92651-2541	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	JIM AND VICKI CLICK 6403 E. MIRAMAR DRIVE TUCSON, AZ 85715	\$ 76,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	DONNIE CREVIER AND LAURIE KRAUS 165 MOSS ST. LAGUNA BEACH, CA 92651	\$ 56,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	LAGUNA BEACH COMMUNITY FOUNDATION P.O. BOX 1628 LAGUNA BEACH, CA 92652-1628	\$ 110,792.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	MARISLA FOUNDATION 668 COAST HIGHWAY, PMB 1400 LAGUNA BEACH, CA 92651-1513	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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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	MASSEN GREENE FOUNDATION 24881 ALICIA PARKWAY, SUITE E-349 LAGUNA HILLS, CA 92653	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	NANCY MYERS 32932 PCH, 14-273 DANA POINT, CA 92629	\$ 51,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	ORANGE COUNTY COMMUNITY FOUNDATION 4041 MACARTHUR BLVD., SUITE 510 NEWPORT BEACH, CA 92660-2503	\$ 197,909.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	SUE GROSS FOUNDATION 1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	KEITH SWAYNE 402 HIGH DR. LAGUNA BEACH, CA 92651-1610	\$ 48,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	JOE AND GWEN ZIOMEK 6106 MISTY OAKS ST SARASOTA, FL 34243	\$ 265,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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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
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
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 for instructions and the latest information.**

OMB No. 1545-0047

2021

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) 2021

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	1,459,443.	1,334,967.	1,148,619.	1,577,422.	1,455,706.
b Contributions					
c Net investment earnings, gains, and losses	150,545.	211,475.	215,799.	-69,029.	181,670.
d Grants or scholarships					
e Other expenditures for facilities and programs	51,999.	86,999.	29,451.	359,774.	59,954.
f Administrative expenses					
g End of year balance	1,557,989.	1,459,443.	1,334,967.	1,148,619.	1,577,422.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 20.2000 %
 - b Permanent endowment 79.8000 %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | 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		3,579,098.	1,987,127.	1,591,971.
c Leasehold improvements				
d Equipment		383,212.	284,159.	99,053.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,803,734.

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)		
Total. (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)		
Total. (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)	
Total. (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	6,888.
(3) PPP LOAN	300,000.
(4) EIDL LOAN	499,900.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	806,788.

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	3,247,981.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	103,365.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	103,365.	
3	Subtract line 2e from line 1	3	3,144,616.	
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	11,851.	
b	Other (Describe in Part XIII.)	4b	-4,130.	
c	Add lines 4a and 4b	4c	7,721.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,152,337.	

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	2,600,310.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	25,970.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	4,130.	
e	Add lines 2a through 2d	2e	30,100.	
3	Subtract line 2e from line 1	3	2,570,210.	
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	11,851.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	11,851.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,582,061.	

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 -4,130.

Part XIII Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

MERCHANDISE EXPENSE 4,130.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total				▶		

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

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 (event type)	THE RANCH (event type)	2 (total number)		
Revenue	1	Gross receipts	609,287.	205,377.	130,835.	945,499.
	2	Less: Contributions	508,122.	146,887.	114,845.	769,854.
	3	Gross income (line 1 minus line 2)	101,165.	58,490.	15,990.	175,645.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	91,879.	93,846.	16,423.	202,148.
	7	Food and beverages	1,102.	753.	9,973.	11,828.
	8	Entertainment	5,900.	11,650.	900.	18,450.
	9	Other direct expenses	56,294.	20,524.	15,423.	92,241.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				324,667.
11	Net income summary. Subtract line 10 from line 3, column (d)				-149,022.	

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))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	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: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

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

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

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Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (ROOFING MATER)	X	1	30,870.	FMV
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**SCHEDULE O
(Form 990)**

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 Form 990-EZ.

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

OMB No. 1545-0047

2021

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:

COMMITTED OURSELVES TO STAYING CONNECTED TO OUR KIDS, ESPECIALLY AFTER

THE SOCIAL ISOLATION AND DISRUPTIONS IN SCHOOL THAT THEY HAVE

EXPERIENCED. WE PRIDE OURSELVES ON OUR TRAUMA-INFORMED PRACTICES, WHICH

MEET EACH CHILD WHERE THEY UNIQUELY ARE DEVELOPMENTALLY, AND HELP THEM

GAIN THE SKILLS, ATTITUDES, AND SUPPORT SYSTEMS THAT THEY NEED TO

THRIVE IN LIFE. WE ADVOCATE FOR THE IMPORTANCE OF PLAY IN YOUNG

PEOPLE'S LIVES AND HOW THEY LEARN AND GROW FROM IT. THE IMPACT WE HAVE

ON OUR CHILDREN AND FAMILIES IS CENTERED ON BUILDING HEALTHY

RELATIONSHIPS, AMONGST OUR CLUB MEMBERS, TEAM MEMBERS, VOLUNTEERS,

DONORS, PARTNER AGENCIES. AS THE PROVERB SAYS, "IT TAKES A VILLAGE TO

RAISE A CHILD" AND WE ARE A CATALYST FOR THE COMMUNITY, LEADING CHANGE

TO HELP YOUNG PEOPLE HAVE FLOURISHING FUTURES.

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

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

Schedule O (Form 990) 2021

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

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 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:

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

- 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

- 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

Name of the organization

BOYS & GIRLS CLUB OF LAGUNA BEACH

Employer identification number

95-1878822

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.

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;

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

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

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 B, LINE 15:

THE EXECUTIVE BOARD PROVIDES A COMPENSATION RECOMMENDATION FOR EXECUTIVE

DIRECTOR, OFFICERS AND OTHER KEY EMPLOYEES FOR THE WHOLE BOARD FOR

APPROVAL. THE RECOMMENDATION IS DETERMINED BY DATA FROM OTHER ORANGE

COUNTY NON PROFITS AND CLUB OFFICERS AND EXECUTIVES.

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

Name of the organization BOYS & GIRLS CLUB OF LAGUNA BEACH	Employer identification number 95-1878822
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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 2021 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**

Additional information. See instructions. FEIN: **95-1878822**

Street address (suite or room): **1085 LAGUNA CANYON ROAD** PMB no. _____

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 Is the organization a limited liability company? Yes No

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

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

O 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.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,221,205	00	
	2	Gross dues and assessments from members and affiliates	2		00	
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	2,318,211	00	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. STMT 2				
	4	This line must be completed. If the result is less than \$50,000, see General Information B	4	3,539,416	00	
	5	Cost of goods sold	5	4,130	00	
	6	Cost or other basis, and sales expenses of assets sold	6	382,949	00	
	7	Total costs. Add line 5 and line 6	7	387,079	00	
8	Total gross income. Subtract line 7 from line 4	8	3,152,337	00		
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	2,582,061	00	
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	570,276	00	
Filing Fee	11	Total payments	11		00	
	12	Use tax. See General Information K	12		00	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00	
	15	Penalties and interest. See General Information J	15		00	
	16	Balance due. Add line 12 and line 15. Then subtract line 11 from the result	16		00	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
	Signature of officer	Title EXECUTIVE DIRE	Date	• Telephone		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	• PTIN P02164134		
	Firm's name (or yours, if self-employed) and address	DAVIS FARR LLP 18201 VON KARMAN AVE, SUITE 1100 IRVINE, CA 92612			• Firm's FEIN 47-3535842	
	May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			• Telephone 949-474-2020		

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.

128951 01-19-22

SEE PART II SUBSTITUTE ATTACHMENT

Receipts from Other Sources	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	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8		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	
	Expenses and Disbursements	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	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18		00

Schedule L Balance Sheet	Beginning of taxable year			End of taxable year
	(a)	(b)	(c)	(d)
Assets				
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 Total assets				
Liabilities and net worth				
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 Total liabilities and net worth				

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

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CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
AETNA FOUNDATION	P.O. BOX 7337 PRINCETON, NJ 08543-7337		5,000.
PETER AND NICOLE ANDERSON	1000 NORTH COAST HIGHWAY, SUITE 10 LAGUNA BEACH, CA 92651		7,250.
APPLIED MEDICAL	22872 AVENIDA EMPRESA RANCHO SANTA MARGARITA, CA 92688-2650		6,000.
ERICA AUSTIN	1201 EMERALD BAY LAGUNA BEACH, CA 92651		5,155.
JIMMY AZADIAN	425 ARROYO CHICO LAGUNA BEACH, CA 92651		9,013.
OMAR BENGALI	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651		5,700.
BILL BLACKBURN	5 SO. VISTA DE LA LUNA LAGUNA BEACH, CA 92651-6750		6,159.
WOLFRAM BLUME	581 DUNNEGAN DRIVE LAGUNA BEACH, CA 92651		33,242.
BOYS & GIRLS CLUBS OF AMERICA	1275 PEACHTREE STREET NE ATLANTA, GA 30309-3580		64,125.
CHRISTOPHER AND RANI BRAUN	1905 DIANA LANE NEWPORT BEACH, CA 92660		5,650.
DR. PAUL AND KAREN BROWER	28560 MARTINGALE DR SAN JUAN CAPISTRANO, CA 92675		12,000.
CA COVID RELIEF PROGRAM	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651		25,000.
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES	P.O. BOX 469 COPPELL, TX 75019		5,000.
CITY OF LAGUNA BEACH	505 FOREST AVE. LAGUNA BEACH, CA 92651-2332		25,000.

BOYS & GIRLS CLUB OF LAGUNA BEACH95-1878822

CARRIE CLICK	426 ARROYO CHICO LAGUNA BEACH, CA 92651-2541	55,000.
JIM AND VICKI CLICK	6403 E. MIRAMAR DRIVE TUCSON, AZ 85715	76,000.
COX COMMUNICATIONS, INC.	27121 TOWNE CENTER FOOTHILL RANCH, CA 92610-2825	5,500.
CREST INSURANCE	5285 E. WILLIAMS CIRCLE, STE 400 TUCSON, AZ 85711	29,200.
DONNIE CREVIER AND LAURIE KRAUS	165 MOSS ST. LAGUNA BEACH, CA 92651	56,000.
JEFF DASH	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	8,729.
DHONT FAMILY FOUNDATION	400 N TUSTIN AVE SANTA ANA, CA 92705	10,000.
ELLINGSON FAMILY FUND	600 ALLVIEW TERRACE LAGUNA BEACH, CA 92651	10,000.
LAGUNA BEACH PROPERTIES	33761 WINDJAMMER DRIVE DANA POINT, CA 92629	6,054.
EDISON INTERNATIONAL - MATCHING GIFT PROGRAM	P.O. BOX 3288 PRINCETON, NJ 08543-3288	5,000.
EDWARDS LIFESCIENCES FOUNDATION	ONE EDWARDS WAY IRVINE, CA 92614-5688	6,000.
FESTIVAL OF ARTS FOUNDATION	650 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651-1837	6,000.
FORD MOTOR FUND	WHQ/SUITE 211 ONE AMERICAN ROAD DEARBORN, MI 48126-2798	15,000.
ALAN AND SUSAN FUERSTMAN	3 ADA PKWY STE 100 IRVINE, CA 92618	10,000.
WILLIAM GILLESPIE	130 IRVINE COVE PL LAGUNA BEACH, CA 92651-1042	5,000.
CARL HAGMIER	34 VIA CORSICA DANA POINT, CA 92629	22,650.
JOE AND JANE HANAUER	1200 S. COAST HIGHWAY SUITE 204 LAGUNA BEACH, CA 92651	10,000.
GEORGE HEED	21561 ANNS LANE LAGUNA BEACH, CA 92651	6,000.
HEXBERG FAMILY FOUNDATION	921 EMERALD BAY LAGUNA BEACH, CA 92651	24,000.
KAREN JAFFE	88 EMERALD BAY LAGUNA BEACH, CA 92651	8,000.
JAFFE FAMILY FOUNDATION	88 EMERALD BAY LAGUNA BEACH, CA 92651-1266	7,000.
STEVEN AND SHELLY JAKSCH	1550 S SUNKIST ST, UNIT H ANAHEIM, CA 92806	7,402.
JATAIN FOUNDATION	2 SHORE WALK NEWPORT COAST, CA 92657-2158	10,000.
GARY AND BETSY JENKINS	1739 ALISOS AVE. LAGUNA BEACH, CA 92651	11,000.
JP MORGAN CHASE	201 N CENTRAL AVE., 21ST FL. AZ1-1139 PHOENIX, AZ 85004-1071	5,000.
JOHN KAHAL	33782 ORILLA DR DANA POINT, CA 92629	5,500.
MARK KARPENKO	33811 SHACKLETON ISLE DANA POINT, CA 92629	5,900.
KIWANIS CLUB OF LAKE FOREST FOUNDATION ACCOUNT	23101 MOULTON PARKWAY SUITE 101 LAGUNA HILLS, CA 92653	9,000.

BOYS & GIRLS CLUB OF LAGUNA BEACH95-1878822

KURT AND WENDY KOCH	285 SOUTH REMINGTON ANAHEIM, CA 92807	28,740.
LAGUNA BEACH COMMUNITY FOUNDATION	P.O. BOX 1628 LAGUNA BEACH, CA 92652-1628	110,792.
JASON LEVECKE	10810 INLAND AVE MIRA LOMA, CA 91752	10,000.
LINDA I. SMITH FOUNDATION	3197-A AIRPORT LOOP DR COSTA MESA, CA 92626-3424	7,500.
LUGANO DIAMONDS	620 NEWPORT CENTER DR., SUITE 100 NEWPORT BEACH, CA 92660-8044	5,010.
MACGILLIVRAY FAMILY FOUNDATION	P.O. BOX 205 LAGUNA BEACH, CA 92652-0205	10,000.
MARISLA FOUNDATION	668 COAST HIGHWAY, PMB 1400 LAGUNA BEACH, CA 92651-1513	60,000.
MASSEN GREENE FOUNDATION	24881 ALICIA PARKWAY, SUITE E-349 LAGUNA HILLS, CA 92653	75,000.
MISSION HOSPITAL REGIONAL MEDICAL CENTER	27700 MEDICAL CENTER ROAD MISSION VIEJO, CA 92692	10,650.
NEWTN MORRIS AND CLAUDIA VILLAMIZAR	292 AGATE STREET LAGUNA BEACH, CA 92651	5,000.
MICHAEL AND LINDA MUSSALLEM	1306 SKYLINE LAGUNA BEACH, CA 92651	5,000.
NANCY MYERS	32932 PCH, 14-273 DANA POINT, CA 92629	51,300.
CRAIG AND AMY NICKOLOFF	168 CRESCENT BAY DRIVE LAGUNA BEACH, CA 92651	15,050.
JOHN AND CAREN NOOTBAAR	31703 SEA CLIFF DR LAGUNA BEACH, CA 92651-7001	10,053.
J DUROSS O'BRYAN	1501 EMERALD BAY LAGUNA BEACH, CA 92651	5,000.
O.L. HALSELL FOUNDATION	P.O. BOX 6300 SANTA ANA, CA 92706-0300	25,000.
JENNA OFFIELD	151 KALMUS DR. SUITE A204 COSTA MESA, CA 92626	10,000.
OFFIELD FAMILY FOUNDATION	151 KALMUS DR, STE A204 COSTA MESA, CA 92626	10,000.
ORANGE COUNTY COMMUNITY FOUNDATION	4041 MACARTHUR BLVD., SUITE 510 NEWPORT BEACH, CA 92660-2503	197,909.
PHYLLIS AND DAVID PHILLIPS	155 MONTE CARLO DRIVE LAGUNA BEACH, CA 92651	35,908.
PROVINCE GROUP LLC	26 CORPORATE PLAZA DRIVE SUITE 260 NEWPORT BEACH, CA 92660	10,243.
RANDALL FAMILY FOUNDATION	616 NIMES RD LOS ANGELES, CA 90077	10,000.
RBC FOUNDATION USA	200 VESEY STREET, 14TH FLOOR NEW YORK, NY 10281	15,000.
REDFERN GALLERY	1540 SOUTH COAST HIGHWAY, #103 LAGUNA BEACH, CA 92651-3260	5,000.
RENAISSANCE CHARITABLE FOUNDATION INC.	8910 PURDUE RD., SUITE 555 INDIANAPOLIS, IN 46268	10,000.
PAMELA ROSENAU	505 5TH AVE., 14TH FLOOR NEW YORK, NY 10017	10,000.
SEAN AND LAURA SAUERS	31668 SANTA ROSA AVE. LAGUNA BEACH, CA 92651	5,000.
LINDA S. SAVILLE	1404 SAN IGNACIO SOLANA BEACH, CA 92075	9,622.

BOYS & GIRLS CLUB OF LAGUNA BEACH

95-1878822

JOHN AND TAMARA SCHAEFER	12 EMERALD BAY LAGUNA BEACH, CA 92651	10,000.
SCHOOL POWER	733 ST. ANNS DRIVE LAGUNA BEACH, CA 92651	32,775.
JOHN AND ROBIN SHANAHAN	66 TWILIGHT BLUFF NEWPORT COAST, CA 92657	15,000.
SISTERS OF ST. JOSEPH HEALTHCARE FOUNDATION	440 SOUTH BATAVIA STREET ORANGE, CA 92868-3907	10,000.
RICHARD AND ELIZABETH STEELE	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	20,000.
SUE GROSS FOUNDATION	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	50,000.
SCOTT SUMMER	1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	9,000.
KEITH SWAYNE	402 HIGH DR. LAGUNA BEACH, CA 92651-1610	48,750.
SWIFT REAL ESTATE PARTNERS	260 CALIFORNIA STREET, SUITE 1100 SAN FRANCISCO, CA 94111-4300	5,000.
THE H.S. LOPEZ FAMILY TRUST	3901 E. BROADWAY BLVD. TUCSON, AZ 85711	25,000.
THE WILLIAM AND MARY ROSS FOUNDATION	4729 EAST SUNRISE DRIVE, PMB 501 TUCSON, AZ 85718-4535	25,000.
TUTTLE-CLICK AUTOMOTIVE GROUP	41 AUTO CENTER DRIVE IRVINE, CA 92618-2802	20,000.
UEBERROTH FAMILY FOUNDATION	P.O. BOX 37 CORONA DEL MAR, CA 92625-0037	10,000.
US BANK	4100 NEWPORT PLACE, 9TH FLOOR NEWPORT BEACH, CA 92660	5,000.
US BANK FOUNDATION	800 NICOLLET MALL MINNEAPOLIS, MN 55402	10,000.
WILLIAM GILLESPIE FOUNDATION	2101 E COAST HWY., SUITE 110 CORONA DEL MAR, CA 92625	5,000.
DAVID AND HOLLY WILSON	761 DRAGON RIDGE DR HENDERSON, NV 89012-0100	10,000.
RAY AND SANDRA WIRTA	102 EMERALD BAY LAGUNA BEACH, CA 92651	22,554.
WORAVKA FAMILY FOUNDATION FOR CHILDREN	1611 HILLCREST DR LAGUNA BEACH, CA 92651	5,025.
JOE AND GWEN ZIOMEK	6106 MISTY OAKS ST SARASOTA, FL 34243	265,000.
TOTAL INCLUDED ON LINE 3		<u><u>2,015,110.</u></u>

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NONCASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 2

CONTRIBUTOR'S NAME

CONTRIBUTOR'S ADDRESS

IB ROOF SYSTEMS

1085 LAGUNA CANYON ROAD LAGUNA BEACH, CA
92651

PROPERTY DESCRIPTION

DATE OF GIFT

FMV OF GIFT

TOTAL AMOUNT

ROOFING MATERIALS

03/15/21

30,870.

30,870.

TOTAL INCLUDED ON LINE 3

30,870.

30,870.

**ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA**
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

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

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

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

<p><u>BOYS & GIRLS CLUB OF LAGUNA BEACH</u> Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used</p> <p><u>1085 LAGUNA CANYON ROAD</u> Address (Number and Street)</p> <p><u>LAGUNA BEACH, CA 92651</u> City or Town, State, and ZIP Code</p> <p><u>949-494-2535</u> Telephone Number</p> <p>_____ E-mail Address</p>	<p>Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report</p> <hr/> <p>State Charity Registration Number <u>CT002681</u></p> <p>Corporation or Organization No. <u>0261475</u></p> <p>Federal Employer ID No. <u>95-1878822</u></p>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice

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

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2021 ending 12/31/2021) list:

Total Revenue (including noncash contributions) \$ 3,152,337 Noncash Contributions \$ 30,870 Total Assets \$ 4,872,008
 Program Expenses \$ 2,147,477 Total Expenses \$ 2,582,061

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

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

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		X
5. During this reporting period, did the organization receive any governmental funding? SEE STATEMENT 3	X	
6. During this reporting period, did the organization hold a raffle for charitable purposes? SEE STATEMENT 4	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.

<u>PAMELA ESTES</u>	<u>EXECUTIVE DIRECTOR</u>	
Signature of Authorized Agent	Printed Name	Title
		Date

CA RRF-1

INFORMATION REGARDING GOVERNMENTAL FUNDING
PART B, LINE 5

STATEMENT 3

CALIFORNIA COVID RELIEF PROGRAM
1325 J STREET, SACRAMENTO, CA 95814

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
P.O. BOX 469, COPPELL, TX 75019

CITY OF LAGUNA BEACH
505 FOREST AVENUE, LAGUNA BEACH, CA 92651-2332
CONTACT: MAYOR BOB WHALEN

CA RRF-1

EXPLANATION OF CHARITABLE RAFFLES
PART B, LINE 6

STATEMENT 4

ONE RAFFLE WAS HELD ON JULY 19, 2021. 850 TICKETS WERE SOLD.