

FY 2022.2023 Fallbrook Regional Health District Community Health Contract Grant Application

Organization Information

Legal Name

Boys Club of Fallbrook

DBA (if Applicable)

Boys & Girls Clubs of North County

Year Founded - use date of incorporation

1962

Program Name/Title

Triple Play

Brief Program Description

Developed by Boys & Girls Clubs of America, Triple Play: A Game Plan for the Mind, Body and Soul is a proven health and wellness program. It's 3 components teach youth Healthy Habits, provide Daily Challenges to improve physical activity, and Social Recreation for social and emotional development.

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

Established Program

Program Information - Type

Ongoing

Requested Amount

40624

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

36103.75

Organization's Mission Statement

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

Organization's Vision Statement

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

Agency Capability

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

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

Agency Collaborations

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

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

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

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

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

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

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

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

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

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

Local Sports Teams: provides tickets and sports clinics for our youth and families.

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

Target Population - Age

	Percent of program participants
Children (infants to 12)	98

	Percent of program participants
Young Adults (13-17)	2
Adults (18-60)	0
Seniors (60+)	0
We do not collect this data (indicate with 100%)*	

Target Population not collected - Age

N/A

Gender

	Percent of program participants
Female	46
Male	54
Non-binary	
Unknown*	

*Target Population - Gender

N/A

Income Level

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

*Target Population - Income Level

N/A

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

400

Social Determinants of Health (SDOH)

Program/Services Description - Social Determinants of Health

Education Access & Quality (Early Childhood Education and Development, Enrollment in Higher Education, High School Graduation, Language and Literacy)

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

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

Program/Services Description - FRHD Community Needs Assessment

Health (Diabetes - prevention, management)

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

Mental Health (Social Support - Youth or Families)

Health (Healthy Food/Nutrition)

Social (Economic Security, Health Literacy, Family/Child Support, Legal/Advocacy)

Statement of Need/Problem

Childhood and adolescent obesity have reached epidemic levels in the United States. 1 out of 3 children in San Diego County's schools are overweight or obese and Hispanic students are nearly twice as likely. Obesity can affect all aspects of a child or adolescents health, including psychological, cardiovascular and overall physical health. It is associated with several comorbidity conditions, including hypertension, diabetes, sleep apnea, poor self-esteem and depression. Some of the primary factors contributing to obesity in children include diet habits and lack of exercise. The primary social determinants of health addressed are Education Access and Quality, Social and Community Context, Healthcare Access and Quality, and Neighborhood and Built Environment. Many of our Club members are growing up in environments that lack social and economic opportunities. This puts them at higher risk for negative health outcomes as adults. By taking health and wellness beyond simple physical activity and nutrition, youth can take advantage of the positive opportunities provided in the Boys & Girls Club that will bring about positive change in themselves. Triple Play also provides Health Literacy. As low health literacy is prevalent amongst populations with low socioeconomic status, our kids and families benefit from the knowledge gained. Health literacy will also increase as they gain access to healthy foods and learn healthy eating patterns through nutrition education, as well as daily healthy meals and snacks we provide. Triple Play also teaches about a healthy mind, including dealing with mental health issues. Through Triple Play, youth develop social cohesion. The benefit of Triple Play is not only in just the program itself, but the context of the program being delivered within the Boys & Girls Club. The staff role models have a profound effect on our kids. Youth and families also benefit from the wraparound services we can provide.

Statement of Need/Problem - Others

We are not aware of any other programs in our community that offer daily, low/no cost programs that provide youth with nutrition education, physical activities and positive social interactions/social emotional learning.

Program/Services Description - Program Entry

All youth who are members of Boys & Girls Clubs of North County can participate in the Triple Play program. In order to enroll as a member, a parent/guardian needs to complete a simple membership registration packet and pay our \$30 annual membership fee, although more than one-third of our members have this fee scholarshiped. Once a youth is a member, they can attend our Club every day after school and all day during the summer. Our Triple Play program is offered as a program option several time throughout each week, so a child simply needs to choose that program to participate in during an activity block. Throughout the course of our program, staff members work to understand the needs of the youth and their families. If additional resources are needed, such as healthy food, additional counseling services, etc., staff are able to link families with these resources in our

community through our connections with other non-profit agencies, governmental entities and the local school districts.

Program/Services Description - Program Activities

Triple Play is a multi-faceted program designed to help young people become healthy, active and learn new ways to handle stress, maintain a healthy body and form positive relationships. This comprehensive approach includes three major components that focus on different aspects of healthy living: Mind-Healthy Habits provides a wide-ranging approach addressing nutrition, education and fitness. This approach incorporates healthy living and active learning into every part of the Club experience, from the gym to the learning center to the arts and crafts room. Daily healthy snacks and meals are provided to model good nutritional patterns for our youth. Cooking Club helps kids learn to create their own healthy meals. Body-These elements promote fun with a purpose and physical fitness year-round in a non-competitive, challenging environment. These sports, fitness and recreation programs are designed to get members up and active through daily challenges, games and tournaments to strengthen their body. Soul-Triple Play consciously incorporates elements of the Youth Development Strategy, which are belonging, usefulness, influence and competence. Social recreation utilizes the games room and other group game experiences to teach and reinforce social and ethical skills that young people need to become successful adults, including Social-Emotional Learning experiences. The progression of Triple Play activities are designed to build on knowledge over time, but still be able to stand alone as one-time activities. While each program component can stand alone, integrating them allows Club members to create lasting and powerful benefits. The theory of change for Triple Play describes the processes and outcomes of the program. Short term outcomes include improved knowledge of healthy habits, good nutrition and physical fitness; increased physical activity; and increase positive interaction with all youth. Intermediate outcomes are better nutrition; more youth meeting standards for vigorous activity; and more youth with healthy relationships with peers and a stronger sense of mastery and control. While providing fun and engaging activities for youth, Triple Play also helps youth build vital skills in impulse control, self-efficacy, self-confidence and decision making, as well as relationship building, teamwork and empathy. Triple Play is delivered to youth in a Boys & Girls Club environment with supportive and caring staff mentors and provides health promotion through practices that enable young people to develop social and emotional development skills that are critical in all aspects of their future health and development. A study conducted on the Triple Play program, delivered in a Boys & Girls Club setting, yielded the following results:-A majority (66%) of Club youth report eating two or more servings of fruit per day, compared to 32 percent of youth nationally.-Two times as many Club kids consume three or more servings of vegetables everyday (32% compared to 15% nationally)-After participating in Triple Play, the number of Club members who engages in vigorous activity for an hour or more at least five times per week increased by 35% (no change among control group). Each day youth members attend the Boys & Girls Club, they will participate in at least one component of Triple Play.

Program Goal #1

To improve the overall health of youth members of Boys & Girls Clubs of North County, specifically working to prevent obesity and diabetes, high blood pressure and hypertension while increasing social supports for youth and families, availability of healthy food/nutrition education and health literacy.

Program Objectives - Goal #1

3

Program Outcomes/Measurables - Goal & Objectives #1

Hiring and training logs will be kept for each site. Staff members will receive an orientation upon

hire to familiarize them with the Boys & Girls Club, our programs and our expectations. Staff will also receive an annual training specifically on the Triple Play program, its implementation and program curriculum. Participation counts will be kept at each site each day to track the achievement of our goal to reach 400 youth. Staff members will track participation on roll sheets, which will be accumulated and reported centrally each month, then compiled in preparation for grant reporting. In the spring, youth participants over the age of 9 will complete the National Youth Outcomes Initiative survey. This tool developed by Boys & Girls Clubs of America measures the impact of our programs. From this survey we can determine the wide range of impacts we are having on our youth including: fruit and vegetable consumption, water consumption, physical activity participation, ability to cope with challenges, identifying emotions, impulse control, problem solving, relationship building, self-efficacy and empathy. Responses in these areas will demonstrate the impact that Triple Play is having on our youth participants. Participation counts and other documentation will be kept on the family night events held three times each year at each site. Staff will track attendance using roll sheets, which will be accumulated and reported centrally each month, where the data will be compiled in preparation for grant reporting. Other documentation, such as flyers and photos, will also be collected centrally.

Anticipated Acknowledgment

Anticipated Acknowledgment

Social Media Postings

Print Materials to Service Recipients

Website Display

Anticipated Acknowledgment

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

Boys & Girls Club – Triple Play Objectives

Program Objectives: Please describe the objectives of how this program will meet its goal - as outlined above. Please outline each objective in its own text box below. Be clear in defining how each objective serves the goal. Keep in mind that your objectives should be Specific: provides the “who” and “what” of program activities. Measurable: focus on “how much” change is expected, should quantify the amount of change expected. Achievable: can be either implied or explicit; however, it should be attainable within a given time frame and with available program resources. Realistic: most useful when they accurately address the scope of the problem and programmatic steps that can be implemented within a specific time frame. and Time-phased: provide a time frame indicating when the objective will be measured or a time by which the objective will be met.

- 1) Hire and train staff members to provide daily Triple Play activities at each of the eight Boys & Girls Clubs of North County sites during the 2021-22 school year.
- 2) Provide 60 minutes of vigorous physical activity each day at each Boys & Girls Clubs of North County sites for at least 400 youth per day during the 2022-23 school year.
- 3) Provide three family nights each year at each of the eight Boys & Girls Clubs of North County sites for families of Boys & Girls Clubs of North County members during the 2022-23 school year.

FRHD CHC GRANT BUDGET INSTRUCTIONS

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

There are five tabs to this file:

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

1 Instructions:

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

2 Program Budget Form:

- > PROGRAM COST: This section should reflect the true and total costs of the program.

APPLYING ORGANIZATION: This is the applicant agency's investment in their program.

- > This is the value of the resources the agency will contribute to the program's cost. These may include funds from fundraising events, private donors, in-kind goods and services, and volunteer efforts.

- > OTHER FUNDERS: These are funds or resources provided from contracts, grants and partnerships that are used to support the program's operations.

- > REQUESTED FROM FRHD: This is the funding request you are putting forward to the District.

- > The line item names may not fully align with your budget. Please edit those items to align with your budget. Explain those items on your Budget Narrative Form as necessary.

A INDIRECT EXPENSES:

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

B PERSONNEL EXPENSES - PROGRAM SPECIFIC:

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

C DIRECT PROGRAM EXPENSES:

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

3 Revenue Sources

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

4 Budget Narrative

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

5 Budget Reporting Form

This form will be used for those grantees who are awarded contracts. This form would be > submitted with the quarterly Impact Report and should demonstrate that funds were allocated according to the submitted proposal budget.

FRHD CHC GRANT BUDGET FORM

Agency Name:	Boys & Girls Clubs of North County	PROGRAM NAME:	Triple Play
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Not all line items will correspond with your program budget. If the item does not fully align either leave it blank or group it in the best category possible. However, be sure your program budget is fully itemized.

1) A	INDIRECT EXPENSES:	PROGRAM COST	APPLYING ORGANIZATION	OTHER FUNDERS	REQUESTED FROM FRHD
A1	Administrative Support	14,729.00	14,729.00		
A2	General Insurance (not program specific)	3,500.00	3,500.00		
A3	Accounting & audit expenses	1,360.00	1,360.00		
A4	Consultant/Contractor Fees	800.00	800.00		
A5	Physical Assets (Rent, Facility Costs)	1,500.00	1,500.00		
A6	Utilities	5,250.00	5,250.00		
A7	IT & Internet	350.00	350.00		
A8	Marketing & Communications	400.00	400.00		
A9	Office Supplies	1,700.00	1,700.00		
A10	Training & Education	950.00	950.00		
A11	Other: specify				
TOTAL INDIRECT EXPENSE		30,539.00	30,539.00	-	-

B	PERSONNEL EXPENSES - PROGRAM SPECIFIC	PROGRAM COST	APPLYING ORGANIZATION	OTHER FUNDERS	REQUESTED FROM FRHD
B1	Athletic Director .15 FTE	5,304.00			5,304.00
B2	Director of Program Services .15 FTE	5,928.00			5,928.00
B3	Site Staff 1@ each of 8 sites	120,000.00		105,000.00	15,000.00
B4	Data Manager .15 FTE	5,304.00			5,304.00
B5	Payroll Expenses (WC, taxes) @9%	12,288.00		9,450.00	2,838.00
B6	Benefits				
B7	Other: specify				
TOTAL PERSONNEL EXPENSE		148,824.00	-	114,450.00	34,374.00

C	DIRECT PROGRAM EXPENSES	PROGRAM COST	APPLYING ORGANIZATION	OTHER FUNDERS	REQUESTED FROM FRHD
C1	Equipment				
C2	Program/Project Supplies	25,000.00	18,750.00		6,250.00
C3	Printing/Duplicating				
C4	Travel/Mileage				
C5	Program Specific Insurance				
C6					
C7					
C8					
C9					
C10					
C11					
C12					
C13					
C14					
C15					
TOTAL OTHER EXPENSES		25,000.00	18,750.00	-	6,250.00

D	TOTAL ALL EXPENSES	PROGRAM COST	% REQUESTED FROM FRHD
		\$ 204,363.00	20%

2) FUNDING SOURCES

E	FUNDS FOR PROGRAM		
E1	APPLYING ORGANIZATION	X	49,289.00
E2	OTHER FUNDERS	Y	114,450.00
E3	REQUESTED FROM FRHD	Z	40,624.00
TOTAL FUNDING SOURCES			\$ 204,363.00

NOTE: THIS AMOUNT SHOULD BE EQUAL TO YOUR PROJECT COST.

3) % OF AGENCY BUDGET

F	CALCULATE % of Total Agency budget that this Program represents.	\$ 1,809,578.00	\$ 204,363.00	11%
		AGENCY BUDGET**	PROGRAM COST	% of AGENCY BUDGET

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

Agency Name:	Boys & Girls Clubs of North County
Program Name:	Triple Play
Total Organization Budget (Current Fiscal Year)	\$ 1,809,578.00
Total Project Budget (Current Fiscal Year)	\$ 204,363.00

Organization Sources of Revenue
(Total Organization Budget)

Sources of Funding
(This Project Request)

Source of funds	\$ Amount	Percent of Total	One-time funding? (Yes/No)	\$ Amount	Percent of Total	One-time funding? (Yes/No)
Federal	35000	0.02	n			
State	22000	0.01	n			
City/County*	14000	0.01	y			
Other Govt.	965000	0.53	n	90000	44	N
Proposed FRHD	42000	0.02	n	42000	0.21	N
Fees for Service	181000	0.1	n			
Grants (non-gov't)	230000	0.13	n			
General Donations	120000	0.07	n			
Other Internal						
Organizational Fundraising	200000	0.11	n	72363	0.35	N
Other (list):						
Total	\$1,809,000.00	100%		\$204,363.00	4456%	

* City/County

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

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



BOYS & GIRLS CLUBS
OF NORTH COUNTY

Board of Directors 2021-22

Governing Board	Bierbrauer, Chet	3M, retired ckbierbr@gmail.com
2 nd Vice President	Catania, Chris	Branch Manager/VP of Mortgage Lending Chris.catania@rate.com
Governing Board	Grimm, Steve	Senior Portfolio Manager, retired Stephen.grimm@att.net
Immediate Past President	Edelstein, Mike	Restaurateur, retired Medelstein49@aol.com
Board President	Mitchell, Dale	High School Superintendent, retired Dmitchell11800@gmail.com
Treasurer	Norberg, Paul	Tax Accountant, retired pnorberg@att.net
Governing Board	Quinn, Roy	U.S. Bank Branch Manager Roy.quinn@usbank.com
Governing Board	Reisbeck-Stoewer, Donna	Education Administrator, retired Drstoewer2015@gmail.com
Governing Board	Short, Jim	Software developer, retired
Governing Board	Small, Louise	Community volunteer tsmall@earthlink.net
Secretary	Stillman, Siegrid	FUESD School Board member/Educator, retired sig@nickynote.com
Governing Board	Tattersall, Dale	SDGE dtattersall@semprautilities.com
Executive Committee	Zoller, Deborah	Attorney at Law zollerlaw@aol.com

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 7/1/2019, and ending 6/30/2020

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

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

D Employer identification number 95-2241614

E Telephone number (760) 728-5871

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

G Gross receipts \$ 1,548,556

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

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

J Website: ▶ www.bgcnorthcounty.org

K Form of organization: Corporation Trust Association Other ▶

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

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>To promote the health, social, educational, vocational, and character development of boys and girls through group activities, sports and other programs.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	107
	6	Total number of volunteers (estimate if necessary)	6	44
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	1,280,843	1,303,708
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	241,102	154,191
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	361	515
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,650,262	1,523,266
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)	1,275,129	1,296,734
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	15,402	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>4,108</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	468,297	399,115
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,758,828	1,695,849
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-108,566	-172,583
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	1,770,321	1,832,363
	22	Net assets or fund balances. Subtract line 21 from line 20	59,838	294,463
			1,710,483	1,537,900

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 _____

Type or print name and title _____

Paid Preparer Use Only

Print/Type preparer's name Roland W Munger Preparer's signature  Date 3/2/2021 Check if self-employed PTIN P01871456

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

Firm's address ▶ 2170 South El Camino Real, Ste. 217, Oceanside, CA 92054 Phone no. (760) 730-8020

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
To promote the health, social, educational, vocational, and character development of boys and girls through group activities, sports and other programs.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 1,447,027 including grants of \$) (Revenue \$ 154,191)
Improve the health, social, vocational, and character development of boys and girls through group activities, sports, and other programs.

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

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

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

4e Total program service expenses ▶ 1,447,027

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	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 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 lines 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 in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

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 in 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?	X	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 107		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year		X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
If "Yes," complete Form 4720, Schedule O.			

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.	16	
1b	Enter the number of voting members included on line 1a, above, who are independent.	16	
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
7b	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:		
8a	The governing body?	X	
8b	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
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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?		
15a	The organization's CEO, Executive Director, or top management official.	X	
15b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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
16b	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 **▶**
 Allison Barclay (760) 728-5871
 445 E Ivy St, Fallbrook, CA 92028

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Allison Barclay CEO	40.00 0.00			X			95,102			
(2) Chet Bierbrauer Director	1.00 0.00	X								
(3) Rex Bright President	2.00 0.00	X		X						
(4) Chris Catania 2nd Vice President	2.00 0.00	X		X						
(5) Jeff Corbett Director	1.00 0.00	X								
(6) Steve Grimm Director	1.00 0.00	X								
(7) Mike Edelstein Past President	2.00 0.00	X		X						
(8) Janine Hall Director	1.00 0.00	X								
(9) Dale Mitchell 1st Vice President	2.00 0.00	X		X						
(10) Paul Norberg Treasurer	2.00 0.00	X		X						
(11) Roy Quinn Director	1.00 0.00	X								
(12) Donna Reisbeck-Stoewer Director	1.00 0.00	X								
(13) Jim Short Director	1.00 0.00	X								
(14) Louise Small Director	1.00 0.00	X								

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Siegrid Stillman Secretary	2.00 0.00	X		X						
(16) Dale Tattersall Director	1.00 0.00	X								
(17) Deborah Zoller Director	1.00 0.00	X								
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal							95,102	0	0	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							95,102	0	0	

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 **0**

	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
		0
		0
		0
		0
		0

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	0					
	b Membership dues	1b	38,281					
	c Fundraising events	1c	98,418					
	d Related organizations	1d	0					
	e Government grants (contributions)	1e	0					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,167,009					
	g Noncash contributions included in lines 1a-1f	1g	\$ 0					
	h Total. Add lines 1a-1f			1,303,708				
	Program Service Revenue	2a Youth Program and League Fees	Business Code 900099		154,191	154,191		
b				0				
c				0				
d				0				
e				0				
f All other program service revenue				0				
g Total. Add lines 2a-2f				154,191				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			515			515	
	4 Income from investment of tax-exempt bond proceeds			0				
	5 Royalties			0				
	6a Gross rents	(i) Real		(ii) Personal				
		6a						
		6b Less: rental expenses						
	6c Rental income or (loss)	0	0					
	d Net rental income or (loss)			0				
	7a Gross amount from sales of assets other than inventory	(i) Securities		(ii) Other				
		7a	0	0				
		7b Less: cost or other basis and sales expenses	0	0				
	7c Gain or (loss)	0	0					
	d Net gain or (loss)			0				
	8a Gross income from fundraising events (not including \$ 98,418 of contributions reported on line 1c). See Part IV, line 18							
		8a		87,531				
8b Less: direct expenses			25,290					
c Net income or (loss) from fundraising events			62,241			62,241		
9a Gross income from gaming activities. See Part IV, line 19								
	9a		0					
	9b Less: direct expenses		0					
c Net income or (loss) from gaming activities			0					
10a Gross sales of inventory, less returns and allowances								
	10a		0					
	10b Less: cost of goods sold		0					
c Net income or (loss) from sales of inventory			0					
Miscellaneous Revenue	11a Miscellaneous Revenue	Business Code 900099		2,611			2,611	
	b			0				
	c			0				
	d All other revenue			0				
	e Total. Add lines 11a-11d			2,611				
12 Total revenue. See instructions			1,523,266	154,191	0	65,367		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete 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 domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	95,102	83,690	7,608	3,804
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	1,025,885	878,643	147,242	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	81,675	70,115	11,256	304
10 Payroll taxes	94,072	80,758	13,314	
11 Fees for services (nonemployees):				
a Management	10,933	4,440	6,493	
b Legal	0			
c Accounting	9,000		9,000	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0		0	
12 Advertising and promotion	5,090		5,090	
13 Office expenses	57,281	53,292	3,989	
14 Information technology	11,473	6,561	4,912	
15 Royalties	0			
16 Occupancy	57,141	53,066	4,075	
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	7,215	1,419	5,796	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	125,085	114,645	10,440	0
23 Insurance	31,103	26,914	4,189	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Dues and Subscriptions	16,287	6,870	9,417	
b Equipment Repair and Maintenance	19,914	18,592	1,322	
c Miscellaneous	5,988	5,417	571	
d Snack Program	42,605	42,605		
e All other expenses	0			
25 Total functional expenses. Add lines 1 through 24e	1,695,849	1,447,027	244,714	4,108
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)		(B)	
		Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing	336,089	1	567,091
	2	Savings and temporary cash investments	166,965	2	158,396
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	37,106	4	1,800
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	
	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	2,641,602		
		10a			
	b	Less: accumulated depreciation	1,536,526	10c	1,105,076
		10b			
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
14	Intangible assets	0	14	0	
15	Other assets. See Part IV, line 11	0	15	0	
16	Total assets. Add lines 1 through 15 (must equal line 33)	1,770,321	16	1,832,363	
Liabilities	17	Accounts payable and accrued expenses	59,838	17	61,463
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	233,000
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	59,838	26	294,463
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	1,710,483	27	1,532,180
	28	Net assets with donor restrictions	0	28	5,720
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>				
	and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds	0	29	
	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	
31	Retained earnings, endowment, accumulated income, or other funds	0	31		
32	Total net assets or fund balances	1,710,483	32	1,537,900	
33	Total liabilities and net assets/fund balances	1,770,321	33	1,832,363	

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	1,523,266
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,695,849
3	Revenue less expenses. Subtract line 2 from line 1	3	-172,583
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,710,483
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,537,900

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		

Depreciation and Amortization

Form **4562**

(Including Information on Listed Property)

2019

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

Attachment
Sequence No. **179**

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

Name(s) shown on return Boys & Girls Club of North County	Business or activity to which this form relates 990	Identifying number 95-2241614
--------------------------------------------------------------	--------------------------------------------------------	----------------------------------

Part I Election To Expense Certain Property Under Section 179

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

1 Maximum amount (see instructions)	1																									
2 Total cost of section 179 property placed in service (see instructions)	2																									
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3																									
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0																								
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	0																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">6 (a) Description of property</th> <th style="width: 25%;">(b) Cost (business use only)</th> <th style="width: 25%;">(c) Elected cost</th> </tr> </thead> <tbody> <tr> <td>7 Listed property. Enter the amount from line 29</td> <td style="text-align: center;">7</td> <td></td> </tr> <tr> <td>8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7</td> <td style="text-align: center;">8</td> <td style="text-align: right;">0</td> </tr> <tr> <td>9 Tentative deduction. Enter the smaller of line 5 or line 8</td> <td style="text-align: center;">9</td> <td style="text-align: right;">0</td> </tr> <tr> <td>10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562.</td> <td style="text-align: center;">10</td> <td></td> </tr> <tr> <td>11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions</td> <td style="text-align: center;">11</td> <td></td> </tr> <tr> <td>12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11</td> <td style="text-align: center;">12</td> <td style="text-align: right;">0</td> </tr> <tr> <td>13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12</td> <td style="text-align: center;">13</td> <td style="text-align: right;">0</td> </tr> </tbody> </table>			6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	7 Listed property. Enter the amount from line 29	7		8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0	9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0	10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562.	10		11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11		12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0	13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	0
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost																								
7 Listed property. Enter the amount from line 29	7																									
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0																								
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	0																								
10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562.	10																									
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11																									
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0																								
13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	0																								

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

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

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

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2019	17	125,085
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

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

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	125,085
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

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

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

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

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

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

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

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

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

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) - 99.65%; 15 Public support percentage from 2018 Schedule A, Part II, line 14 - 99.61%; 16a 33 1/3% support test—2019. 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. [X]; b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. []; 17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. []; b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. []; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. []

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <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 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a** The organization satisfied the Activities Test. Complete line 2 below.
 - b** The organization is the parent of each of its supported organizations. Complete line 3 below.
 - c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

	Yes	No
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		0
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	0
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	0
10 Line 8 amount divided by line 9 amount	0.000

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			0
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014 0			
b From 2015 0			
c From 2016 0			
d From 2017 0			
e From 2018 0			
f Total of lines 3a through e	0		
g Applied to underdistributions of prior years		0	
h Applied to 2019 distributable amount			0
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4 Distributions for 2019 from Section D, line 7: \$ 0			
a Applied to underdistributions of prior years		0	
b Applied to 2019 distributable amount			0
c Remainder. Subtract lines 4a and 4b from 4.	0		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			0
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			0
7 Excess distributions carryover to 2020. Add lines 3j and 4c.	0		
8 Breakdown of line 7:			
a Excess from 2015 0			
b Excess from 2016 0			
c Excess from 2017 0			
d Excess from 2018 0			
e Excess from 2019 0			

Part VI

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

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

Area with horizontal dashed lines for supplemental information.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2019

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

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

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

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Angel Society P.O. Box 1408 Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Del Rey Avocado 1260 S. Main Street Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Linda Heald 3501 Tierra Linda Lane Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	John and Janet Kister 3636 Luneta Lane Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Bob and Susan Lucy 3705 Fire Road Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Pacific Western Bank 130 West Fallbrook Street Fallbrook CA 92028 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SDGE Semper Energy P.O. Box 129007 San Diego CA 92112 Foreign State or Province: Foreign Country:	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	James and Jeanette Short 3033 Via Loma Fallbrook CA 92028 Foreign State or Province: Foreign Country:	\$ 10,163	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Better World Together Foundation 1 Better World Cir Ste. 200 Temecula CA 92590 Foreign State or Province: Foreign Country:	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Boys and Girls Club of Fallbrook Foundation PO Box 1497 Bonsall CA 92003 Foreign State or Province: Foreign Country:	\$ 28,275	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	French Fund P.O. Box 20160 Long Beach Long Beach CA 90801 Foreign State or Province: Foreign Country:	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Nordson Foundation 28601 Clemens Rd Westlake OH 44145 Foreign State or Province: Foreign Country:	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Tony and Sue Godfrey 300 Corporate Pointe Ste. 220 Culver City CA 90230 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	Rite Aid Foundation 30 Huner Lane Camp Hill PA 17011 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	San Diego Foundation 2508 Historic Decatur Rd Ste. 200 San Diego CA 92106 Foreign State or Province: _____ Foreign Country: _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	US Bank PO Box 634 Milwaukee WI 53201 Foreign State or Province: _____ Foreign Country: _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	Zable Foundation 1660 Hotel Cir N Ste. 710 San Diego CA 92108 Foreign State or Province: _____ Foreign Country: _____	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

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

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

Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)* ▶ \$ _____ 0

Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

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

Form for Part II Conservation Easements, including questions about purpose, monitoring, and expenses, with a sub-table for held at the end of the tax year.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions about reporting and amounts.

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	0

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V Endowment Funds.

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations _____
- (ii) Related organizations _____

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	47,000		47,000
b Buildings	0	1,419,624	830,013	589,611
c Leasehold improvements	0	702,920	328,737	374,183
d Equipment	0	428,539	345,569	82,970
e Other	0	43,519	32,207	11,312
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,105,076

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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	1,523,266
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	a Net unrealized gains (losses) on investments	2a			
	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	0
3	Subtract line 2e from line 1			3	1,523,266
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			
	b Other (Describe in Part XIII.)	4b			
	c Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5	1,523,266

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	1,695,849
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
	a Donated services and use of facilities	2a			
	b Prior year adjustments	2b			
	c Other losses	2c			
	d Other (Describe in Part XIII.)	2d			
	e Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	1,695,849
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			
	b Other (Describe in Part XIII.)	4b			
	c Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5	1,695,849

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.

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

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Boys & Girls Club of North County

Employer identification number

95-2241614

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 The Gavel Group 26439 Rancho Pk Lake Forest CA 92630	Event Auction		X	87,445	17,250	70,195
2				0	0	0
3				0	0	0
4				0	0	0
5				0	0	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
Total				87,445	17,250	70,195

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.

CA

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
		Fundraising Event (event type)	(event type)	NONE (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	185,949	0	185,949
	2	Less: Contributions	98,418	0	98,418
	3	Gross income (line 1 minus line 2)	87,531	0	87,531
Direct Expenses	4	Cash prizes		0	0
	5	Noncash prizes		0	0
	6	Rent/facility costs		0	0
	7	Food and beverages		0	0
	8	Entertainment		0	0
	9	Other direct expenses	25,290	0	25,290
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶			
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				62,241

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			0	
Direct Expenses	2	Cash prizes			0	
	3	Noncash prizes			0	
	4	Rent/facility costs			0	
	5	Other direct expenses			0	
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				(0)
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				0

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Boys & Girls Club of North County

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

95-2241614

Form 990, Part VI, Line 11b: The Chief Executive Officer reviews the Form 990 for general
accuracy before it is filed. In addition, the Form 990 is provided to Board Members for review
and approval prior to filing.

Form 990, Part VI, Line 12c: The conflict of interest policy as well as situations and
positions that may lead to a conflict of interest are reviewed periodically to ensure that no
violations of the policy have taken place.

Form 990, Part VI, Line 19: The Organization's governing documents and tax forms are available
upon request.

Form 990, Part VI, Section B, Line 15a: The Board of Directors reviews compensation data to
establish guidelines for the organization.

California Exempt Organization
Annual Information Return

199

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) 07/01/2019, and ending (mm/dd/yyyy) 06/30/2020

Corporation/Organization name BOYS & GIRLS CLUB OF NORTH COUNTY
California corporation number 0437493

Additional information. See instructions. FEIN 95-2241614

Street address (suite or room) 445 E IVY ST
PMB no.

City FALLBROOK
State CA
Zip code 92028

Foreign country name Foreign province/state/county Foreign postal code

- A First Return
B Amended Return
C IRC Section 4947(a)(1) trust
D Final Information Return?
E Check accounting method
F Federal return filed?
G Is this a group filing?
H Is this organization in a group exemption?
I Did the organization have any changes to its guidelines not reported to the FTB?
J If exempt under R&TC Section 23701d, has the organization engaged in political activities?
K Is the organization exempt under R&TC Section 23701g?
L If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box.
M Is the organization a Limited Liability Company?
N Did the organization file Form 100 or Form 109 to report taxable income?
O Is the organization under audit by the IRS or has the IRS audited in a prior year?
P Is federal Form 1023/1024 pending?

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

Table with 17 rows and 3 columns: Description, Line Number, Amount. Includes Receipts and Revenues (lines 1-8), Expenses (lines 9-10), and Filing Fee (lines 11-17).

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.

Paid Preparer's Use Only Preparer's signature, Date, Check if self-employed, Firm's name (or yours, if self-employed) and address, Firm's FEIN, Telephone.

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

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

Receipts from Other Sources	1 Gross sales or receipts from all business activities. See instructions	1	241,722	00
	2 Interest	2	515	00
	3 Dividends	3		00
	4 Gross rents	4		00
	5 Gross royalties	5		00
	6 Gross amount received from sale of assets (See Instructions)	6		00
	7 Other income. Attach schedule	7	2,611	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	244,848	00
Expenses and Disbursements	9 Contributions, gifts, grants, and similar amounts paid. Attach schedule	9		00
	10 Disbursements to or for members	10		00
	11 Compensation of officers, directors, and trustees. Attach schedule	11	95,102	00
	12 Other salaries and wages	12	1,025,885	00
	13 Interest	13		00
	14 Taxes	14	94,072	00
	15 Rents	15	57,141	00
	16 Depreciation and depletion (See instructions)	16	125,085	00
	17 Other Expenses and Disbursements. Attach schedule	17	323,854	00
	18 Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	1,721,139	00

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		503,054		725,487
2	Net accounts receivable		37,106		1,800
3	Net notes receivable				
4	Inventories				
5	Federal and state government obligations				
6	Investments in other bonds				
7	Investments in stock				
8	Mortgage loans				
9	Other investments. Attach schedule				
10 a	Depreciable assets	2,594,602		2,594,602	
b	Less accumulated depreciation	(1,411,441)	1,183,161	(1,536,526)	1,058,076
11	Land		47,000		47,000
12	Other assets. Attach schedule				
13	Total assets		1,770,321		1,832,363
Liabilities and net worth					
14	Accounts payable		59,838		61,463
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				233,000
18	Other liabilities. Attach schedule				
19	Capital stock or principal fund				
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund		1,710,483		1,537,900
22	Total liabilities and net worth		1,770,321		1,832,363

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	●	-172,583	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		-172,583
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●					
6	Total. Add line 1 through line 5		-172,583				

2019 Depreciation and Amortization

3885F

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

Name as shown on tax return

FEIN

BOYS & GIRLS CLUB OF NORTH COUNTY

95-2241614

Tangible and intangible assets placed in service during the 2019 taxable year:			Depreciation			Amortization		
(a) Description of property	(b) Date placed in service (mm/dd/yyyy)	(c) Cost or other basis	(d) Method of figuring depreciation	(e) Life or rate	(f) Depreciation for this year	(g) Code section	(h) Period or percentage	(i) Amortization for this year
1								
Add line 1 column (f) and column (i) amounts. See instructions								

Depreciation

- 2 California depreciation for assets placed in service beginning before the 2019 taxable year 2 125,085
Be sure to make adjustments for any basis differences.
- 3 Total California depreciation. Add line 1(f) and line 2 3 125,085

Amortization

- 4 California amortization for intangibles placed in service beginning before the 2019 taxable year 4 _____
Be sure to make adjustments for any basis differences.
- 5 Total California amortization. Add line 1(i) and line 4 5 _____
- 6 Total depreciation and amortization. Add line 3 and line 5. See instructions 6 125,085

General Information

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

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

A Purpose

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

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

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

B Federal/State Differences

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

- **Before January 1, 1987.** California disallowed depreciation under the federal Accelerated Cost Recovery System (ACRS).

California depreciation is calculated in the same manner as in prior years for those assets.

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

Line 7, Part II (CA 199) - Other Income

1	Other Income	1	2,611
2		2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	
10	Total	10	2,611

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

1	Pension plans, employee benefits	1	81,675
2	Legal fees	2	0
3	Accounting fees	3	9,000
4	Other professional fees	4	10,933
5	Travel, conferences, and meetings	5	7,215
6	Printing and publications	6	0
7	Special events direct expenses	7	25,290
8	Office expenses	8	57,281
9	Other expenses	9	132,460
10		10	
11		11	
12	Total	12	323,854

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

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

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

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code

11 Cal. Code Regs. sections 301-306, 309, 311, and 312

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

(For Registry Use Only)

Boys & Girls Club of North County Name of Organization _____ List all DBAs and names the organization uses or has used _____ 445 E Ivy St Address (Number and Street) _____ Fallbrook, CA 92028 City or Town, State, and ZIP Code _____ (760) 728-5871 Telephone Number _____ allisonb@bgcnorthcounty.org E-mail Address _____	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report State Charity Registration Number 0437493 Corporation or Organization No. CT04430 Federal Employer I.D. No. 95-2241614
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

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

PART A - ACTIVITIES

For your most recent full accounting period (beginning 7/1/2019 ending 6/30/2020) list:

Gross Annual Revenue \$ <u>1,548,556</u>	Noncash Contributions \$ <u>0</u>	Total Assets \$ <u>1,832,363</u>
Program Expenses \$ <u>1,447,027</u>	Total Expenses \$ <u>1,695,849</u>	

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

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

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

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

	Allison Barclay	CEO	
Signature of Authorized Agent	Printed Name	Title	Date

Boys and Girls Club of North County
State Charity Registration Number: CT-04430
FEIN: 95-2241614
CA Corp: 0437493
JUNE 30, 2020

Responses to Form RRF-1

Question 4

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

Question 5

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

Question 8

The organization engaged a CPA firm to conduct an audit.

MUNGER & COMPANY, CPAs

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

Boys and Girls Clubs of North County
Audited Financial Statements
June 30, 2020

Table of Contents

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FINANCIAL STATEMENTS	
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Statement of Activities	3
Statement of Functional Expenses	4
Statement of Cash Flows	5
Notes to Financial Statements	6-10

MUNGER & COMPANY, CPAs

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

INDEPENDENT AUDITOR'S REPORT

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

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

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

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

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

Opinion

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



Munger & Company, CPAs

January 20, 2021

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

ASSETS

OPERATING ASSETS:

Cash	\$ 719,767
Restricted cash	5,720
Accounts receivable	1,800
Total Operating Assets	727,287

FIXED ASSETS:

Land	47,000
Buildings and improvements	2,122,544
Furnishings and equipment	153,890
Vehicles	305,868
Timeshares	12,300
Less: accumulated depreciation	(1,536,526)
Total Fixed Assets	1,105,076

TOTAL ASSETS \$ 1,832,363

LIABILITIES AND NET ASSETS

LIABILITIES:

Accounts payable and accrued liabilities	\$ 61,463
PPP Loan	233,000
Total Liabilities	294,463

NET ASSETS:

Without donor restrictions	
Undesignated	427,104
Invested in fixed assets, net	1,105,076
	1,532,180

With donor restrictions

Purpose restrictions	5,720
	5,720

Total Net Assets Without Donor Restrictions 1,537,900

TOTAL LIABILITIES AND NET ASSETS \$ 1,832,363

The Accompanying Notes are an Integral Part of the Financial Statements

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

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

The Accompanying Notes are an Integral Part of the Financial Statements

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

	Program Services				Supporting Services	
	Club	Leagues	After School	Total	Management and General	Fund Raising
EXPENSES:						
Conferences and meetings	\$ 414	\$ 40	\$ 965	\$ 1,419	\$ 5,796	\$ -
Depreciation	114,645			114,645	10,440	
Dues and subscriptions	808	271	5,791	6,870	9,417	
Equipment repair & maintenance	2,277		7,458	9,735	1,322	
Special event expense				-		25,290
Insurance	5,837	629	20,448	26,914	4,189	
Marketing				-	5,090	
Occupancy	51,010	2,056		53,066	4,075	
Other expense	1,854	59	3,504	5,417	571	
Professional fees	457		3,983	4,440	15,493	
Salaries and related benefits	333,045	61,430	718,731	1,113,206	183,528	
Snack program	42,605			42,605		
Supplies	15,781	8,022	29,489	53,292	3,989	
Telephone	2,399	506	3,656	6,561	4,912	
Vehicle costs	8,620		237	8,857		
Total expense by function	\$ 579,752	\$ 73,013	\$ 794,262	\$ 1,447,027	\$ 248,822	\$ 25,290
Less expenses included with revenues on the statement of activities						
Special event expenses	-	-	-	-	-	(25,290)
Total expenses included in the expense section on the statement of activities	\$ 579,752	\$ 73,013	\$ 794,262	\$ 1,447,027	\$ 248,822	\$ 1,695,849

The Accompanying Notes are an Integral Part of the Financial Statements

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

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

The Accompanying Notes are an Integral Part of the Financial Statements

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
June 30, 2020

Note 1. Nature of Organization

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

Note 2. Summary of Significant Accounting Policies

Basis of Presentation

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

Cash and Cash Equivalents

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

Receivables and Credit Policies

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

Property and Equipment

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

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

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
June 30, 2020

Note 2. Summary of Significant Accounting Policies (continued)

Net Assets

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

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

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

Revenue and Revenue Recognition

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

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

Donated Services and In-Kind Contributions

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

Advertising Costs

Advertising costs are expensed as incurred.

Functional Allocation of Expenses

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

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
June 30, 2020

Note 2. Summary of Significant Accounting Policies (continued)

Income Taxes

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

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

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

Estimates

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

Financial Instruments and Credit Risk

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

Subsequent Events

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

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS

June 30, 2020

Note 3. Liquidity and Availability

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

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

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

Note 4. Employee Benefit Plan

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

Note 5. Accumulated Paid Time Off (PTO)

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

Note 6. Net Assets With Donor Restrictions

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

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

Note 7. Functionalized Expenses

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

Note 8. Related Party Transactions

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

BOYS AND GIRLS CLUBS OF NORTH COUNTY
NOTES TO FINANCIAL STATEMENTS
June 30, 2020

Note 9. Concentrations of Revenues and Receivables

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

Note 10. PPP Loan

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