

CITY OF SOLANA BEACH

SOLANA BEACH CITY COUNCIL, SUCCESSOR AGENCY TO THE REDEVELOPMENT AGENCY,
PUBLIC FINANCING AUTHORITY, & HOUSING AUTHORITY



AGENDA

Joint SPECIAL Meeting

Wednesday, November 15, 2017 * 6:00 P. M.

City Hall / Council Chambers, 635 S. Highway 101, Solana Beach, California

- City Council meetings are video recorded and archived as a permanent record. The video recording captures the complete proceedings of the meeting and is available for viewing on the City's website.
- Posted Reports & Supplemental Docs contain records up to the cut off time prior to meetings for processing new submittals. Complete records containing meeting handouts, PowerPoints, etc. can be obtained through a [Records Request](#).

PUBLIC MEETING ACCESS

The Regular Meetings of the City Council are scheduled for the 2nd and 4th Wednesdays and are broadcast live on Cox Communications-Channel 19, Time Warner-Channel 24, and AT&T U-verse Channel 99. The video taping of meetings are maintained as a permanent record and contain a detailed account of the proceedings. Council meeting tapings are archived and available for viewing on the City's website.

AGENDA MATERIALS

A full City Council agenda packet including relative supporting documentation is available at City Hall, the Solana Beach Branch Library (157 Stevens Ave.), La Colonia Community Ctr., and online www.cityofsolanabeach.org. Agendas are posted at least 72 hours prior to regular meetings and at least 24 hours prior to special meetings. Writings and documents regarding an agenda of an open session meeting, received after the official posting, and distributed to the Council for consideration, will be made available for public viewing at the same time. In addition, items received at least 1 hour 30 minutes prior to the meeting time will be uploaded online with the courtesy agenda posting. Materials submitted for consideration should be forwarded to the City Clerk's department 858-720-2400. The designated location for viewing public documents is the City Clerk's office at City Hall during normal business hours.

SPEAKERS

Please submit a speaker slip to the City Clerk prior to the meeting, or the announcement of the Section/Item, to provide public comment. Allotted times for speaking are outlined on the speaker's slip for each agenda section: Oral Communications, Consent, Public Hearings and Staff Reports.

AMERICAN DISABILITIES ACT TITLE 2

In compliance with the Americans with Disabilities Act of 1990, persons with a disability may request an agenda in appropriate alternative formats as required by Section 202. Any person with a disability who requires a modification or accommodation in order to participate in a meeting should direct such request to the City Clerk's office (858) 720-2400 at least 72 hours prior to the meeting.

As a courtesy to all meeting attendees, please set cellular phones and pagers to silent mode and engage in conversations outside the Council Chambers.

CITY COUNCILMEMBERS

Mike Nichols, Mayor

Ginger Marshall, Deputy Mayor

David A. Zito, Councilmember

Jewel Edson, Councilmember

Judy Hegenauer, Councilmember

Gregory Wade
City Manager

Johanna Canlas
City Attorney

Angela Ivey
City Clerk

SPEAKERS:

Please submit your speaker slip to the City Clerk prior to the meeting or the announcement of the Item. Allotted times for speaking are outlined on the speaker's slip for Oral Communications, Consent, Public Hearings and Staff Reports.

READING OF ORDINANCES AND RESOLUTIONS:

Pursuant to Solana Beach Municipal Code Section 2.04.460, at the time of introduction or adoption of an ordinance or adoption of a resolution, the same shall not be read in full unless after the reading of the title, further reading is requested by a member of the Council. If any Councilmember so requests, the ordinance or resolution shall be read in full. In the absence of such a request, this section shall constitute a waiver by the council of such reading.

CALL TO ORDER AND ROLL CALL:

CLOSED SESSION REPORT: (when applicable)

FLAG SALUTE:

APPROVAL OF AGENDA:

PROCLAMATIONS/CERTIFICATES: *Ceremonial
None at the posting of this agenda*

PRESENTATIONS: Ceremonial items that do not contain in-depth discussion and no action/direction.

1. KAABOO Event Wrap-up

ORAL COMMUNICATIONS:

This portion of the agenda provides an opportunity for members of the public to address the City Council on items relating to City business and not appearing on today's agenda by submitting a speaker slip (located on the back table) to the City Clerk. Comments relating to items on this evening's agenda are taken at the time the items are heard. Pursuant to the Brown Act, no action shall be taken by the City Council on public comment items. Council may refer items to the City Manager for placement on a future agenda. The maximum time allotted for each presentation is THREE MINUTES (SBMC 2.04.190). Please be aware of the timer light on the Council Dais.

COUNCIL COMMUNITY ANNOUNCEMENTS / COMMENTARY:

An opportunity for City Council to make brief announcements or report on their activities. These items are not agendized for official City business with no action or substantive discussion.

A. CONSENT CALENDAR: (Action Items) (A.1. - A.4.)

Items listed on the Consent Calendar are to be acted in a single action of the City Council unless pulled for discussion. Any member of the public may address the City Council on an item of concern by submitting to the City Clerk a speaker slip (located on the back table) before the Consent Calendar is addressed. Those items removed from the Consent Calendar by a member of the Council will be trailed to the end of the agenda, while Consent Calendar items removed by the public will be discussed immediately after approval of the Consent Calendar.

A.1. Register Of Demands. (File 0300-30)

Recommendation: That the City Council

1. Ratify the list of demands for October 21, 2017 through October 27, 2017.

[Item A.1. Report \(click here\)](#)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

A.2. General Fund Adopted Budget for Fiscal Year 2017-2018 Changes. (File 0330-30)

Recommendation: That the City Council

1. Receive the report listing changes made to the Fiscal Year 2017-2018 General Fund Adopted Budget.

[Item A.2. Report \(click here\)](#)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

A.3. Plaza Street Fountain Repairs Construction Contract. (File 0820-40)

Recommendation: That the City Council

1. Adopt **Resolution 2017-161**:
 - a. Awarding a construction contract for the Plaza Street Fountain Repair Project, Bid No. 2017-09, in the amount of \$25,799.21, to California Aquatics.
 - b. Approving an amount of \$2,200.79 for construction contingency.
 - c. Authorizing the City Manager to execute the construction contract on behalf of the City.
 - d. Appropriating \$28,000 from the City CIP Reserve fund into the City CIP project for the Plaza Street Fountain Repair Project.
 - e. Authorizing the City Treasurer to amend the FY 2017/18 Adopted Budget accordingly.

[Item A.3. Report \(click here\)](#)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

A.4. City Sidewalk Repair Project. (File 0820-45)

Recommendation: That the City Council

1. Adopt **Resolution 2017-157**:
 - a. Authorizing the City Council to accept as complete the City Sidewalk Repair Project, Bid No. 2016-06, constructed by to Miramar General Engineering.
 - b. Authorizing the City Clerk to file a Notice of Completion.

[Item A.4. Report \(click here\)](#)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

NOTE: The City Council shall not begin a new agenda item after 10:30 p.m. unless approved by a unanimous vote of all members present. (SBMC 2.04.070)

B. PUBLIC HEARINGS: (B.1.)

This portion of the agenda provides citizens an opportunity to express their views on a specific issue as required by law after proper noticing by submitting a speaker slip (located on the back table) to the City Clerk. After considering all of the evidence, including written materials and oral testimony, the City Council must make a decision supported by findings and the findings must be supported by substantial evidence in the record. An applicant or designees for a private development/business project, for which the public hearing is being held, is allotted a total of fifteen minutes to speak, as per SBMC 2.04.210. A portion of the fifteen minutes may be saved to respond to those who speak in opposition. All other speakers have three minutes each. Please be aware of the timer light on the Council Dais.

B.1. Public Hearing: Introduce (1st Reading) Ordinance 483 Establishing a Community Choice Aggregation Program and Approving the Implementation Plan and Statement of Intent. (File 1010-40)

Recommendation: That the City Council

1. Conduct the Public Hearing: Open the Public Hearing, Report Council Disclosures, Receive Public Testimony, and Close the Public Hearing.
2. Find the project exempt from the California Environmental Quality Act pursuant to Section 15303 of the State CEQA Guidelines.
3. Approve **Resolution 2017-163** approving the Implementation Plan and Statement of Intent and directing the City Manager to submit it to the CPUC for certification.
4. Introduce **Ordinance 483** to establish the Solana Beach CCA program.

Item B.1. Report (click here)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

C. STAFF REPORTS: (C.1. – C.2.)

Submit speaker slips to the City Clerk.

C.1. Community Grant Requests Fiscal Year 2017-18. (File 0330-25)

Recommendation: That the City Council

1. Receive the Staff Report, Community Grant applications and consider the presentations from the grant applicants. This item will come back to the City Council at the December 13, 2017 City Council Meeting for Council's grant allocations.

Item C.1. Report (click here)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

C.2. Calling Upon Congress to Continue the Existing DACA Program and Provide DACA Recipients with a Pathway to Permanent Residence and Eventually US Citizenship. (File 0480-60)

Recommendation: That the City Council

1. Consider approval of **Resolution 2017-164** calling upon Congress to continue the existing DACA program and provide DACA recipients with a pathway to permanent residence and eventually US citizenship.

[Item C.2. Report \(click here\)](#)

Posted Reports & Supplemental Docs contain records up to the cut off time, prior to the start of the meeting, for processing new submittals. The final official record containing handouts, PowerPoints, etc. can be obtained through a Records Request to the City Clerk's Office.

WORKPLAN COMMENTS:

Adopted June 8, 2016

COMPENSATION & REIMBURSEMENT DISCLOSURE:

GC: Article 2.3. Compensation: 53232.3. (a) Reimbursable expenses shall include, but not be limited to, meals, lodging, and travel. 53232.3 (d) Members of a legislative body shall provide brief reports on meetings attended at the expense of the local agency at the next regular meeting of the legislative body.

COUNCIL COMMITTEE REPORTS:

Regional Committees: (outside agencies, appointed by this Council)

- a. City Selection Committee (meets twice a year) – Nichols (Edson, alternate).
- b. County Service Area 17 – Marshall (Nichols, alternate).
- c. Escondido Creek Watershed Authority – Marshall/Staff (no alternate).
- d. League of Ca. Cities' San Diego County Executive Committee – Nichols (Edson, alternate) and any subcommittees.
- e. League of Ca. Cities' Local Legislative Committee – Nichols (Edson, alternate)
- f. League of Ca. Cities' Coastal Cities Issues Group (CCIG) – Nichols (Edson, alternate)
- g. North County Dispatch JPA – Marshall (Edson, alternate).
- h. North County Transit District – Edson (Nichols, alternate)
- i. Regional Solid Waste Association (RSWA) – Nichols (Hegenauer, alternate).
- j. SANDAG – Zito (Primary), Edson (1st alternate), Nichols (2nd alternate) and any subcommittees.
- k. SANDAG Shoreline Preservation Committee – Zito (Hegenauer, alternate).
- l. San Dieguito River Valley JPA – Hegenauer (Nichols, alternate).
- m. San Elijo JPA – Marshall, Zito (City Manager, alternate).
- n. 22nd Agricultural District Association Community Relations Committee – Marshall, Edson.

Standing Committees: (All Primary Members) (Permanent Committees)

- a. Business Liaison Committee – Zito, Edson.
- b. Solana Beach-Del Mar Relations Committee – Nichols, Zito
- c. Highway 101 / Cedros Ave. Development Committee – Edson, Nichols.
- d. Fire Dept. Management Governance & Organizational Evaluation – Edson, Hegenauer
- e. I-5 Construction Committee – Zito, Edson.
- f. Parks and Recreation Committee – Nichols, Zito
- g. Public Arts Committee – Marshall, Hegenauer.
- h. School Relations Committee – Nichols, Hegenauer.

ADJOURN:

AFFIDAVIT OF POSTING

STATE OF CALIFORNIA }
COUNTY OF SAN DIEGO } §
CITY OF SOLANA BEACH }

I, Angela Ivey, City Clerk of the City of Solana Beach, do hereby certify that this Agenda for the November 15, 2017 Council Meeting was called by City Council, Successor Agency to the Redevelopment Agency, Public Financing Authority, and the Housing Authority of the City of Solana Beach, California, was provided and posted on November 8, 2017 at 5:30 p.m. on the City Bulletin Board at the entrance to the City Council Chambers. Said meeting is held at 6:00 p.m., November 15, 2017, in the Council Chambers, at City Hall, 635 S. Highway 101, Solana Beach, California.

Angela Ivey, City Clerk
City of Solana Beach, CA

UPCOMING CITIZEN CITY COMMISSION AND COMMITTEE MEETINGS:

Regularly Scheduled, or Special Meetings that have been announced, as of this Agenda Posting. Dates, times, locations are all subject to change. See the City's Commission's website or the City's Events Calendar for updates.

- **Budget & Finance Commission**
Thursday, December 21, 2017, 6:30 p.m. (City Hall)
- **Climate Action Commission**
Wednesday, December 20, 2017, 5:30 p.m. (City Hall)
- **Parks & Recreation Commission**
Thursday, December 14, 2017, 4:00 p.m. (Fletcher Cove Community Center)
- **Public Arts Commission**
Tuesday, December 26, 2017, 5:30 p.m. (City Hall)
- **View Assessment Commission**
Tuesday, December 19, 2017, 6:00 p.m. (Council Chambers)



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: Finance
SUBJECT: Register of Demands

BACKGROUND:

Section 3.04.020 of the Solana Beach Municipal Code requires that the City Council ratify a register of demands which represents all financial demands made upon the City for the applicable period.

Register of Demands- 10/21/17 through 10/27/17	
Check Register-Disbursement Fund (Attachment 1)	\$ <u>725,206.79</u>
TOTAL	\$ <u>725,206.79</u>

DISCUSSION:

Staff certifies that the register of demands has been reviewed for accuracy, that funds are available to pay the above demands, and that the demands comply with the adopted budget.

CEQA COMPLIANCE STATEMENT:

Not a project as defined by CEQA.

FISCAL IMPACT:

The register of demands for October 21, 2017 through October 27, 2017 reflects total expenditures of \$725,206.79 from various City funding sources.

WORK PLAN:

N/A

OPTIONS:

- Ratify the register of demands.
- Do not ratify and provide direction.

CITY COUNCIL ACTION: _____

DEPARTMENT RECOMMENDATION:

Staff recommends that the City Council ratify the above register of demands.

CITY MANAGER'S RECOMMENDATION:

Approve Department Recommendation.



Gregory Wade, City Manager

Attachments:

1. Check Register – Disbursement Fund

PENTAMATION
 DATE: 10/31/2017
 TIME: 16:29:50

CITY OF SOLANA BEACH, CA
 CHECK REGISTER - DISBURSEMENT FUND

PAGE NUMBER: 1
 ACCTPAZI

SELECTION CRITERIA: transact.ck_date between '20171021 00:00:00.000' and '20171027 00:00:00.000'
 ACCOUNTING PERIOD: 4/18

FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91254	10/26/17	1122	APPLE ONE, INC	00150005150	TEMP HELP PE 10/07	0.00	969.84
1011	91254	10/26/17	1122	APPLE ONE, INC	00150005150	TEMP HELP PE 10/14	0.00	215.52
1011	91254	10/26/17	1122	APPLE ONE, INC	00150005150	TEMP HELP PE 10/14	0.00	942.90
	TOTAL CHECK						0.00	2,128.26
1011	91255	10/26/17	5347	ARPITA VERGHESE	001	RFND-10/15/17 FCCC	0.00	500.00
1011	91256	10/26/17	2261	BETSY SCHULZ-A DESIGN GA	45994626510	9462.01F18 FCCC TILES	0.00	5,550.00
1011	91257	10/26/17	5319	BRYANT JEMISON	00160006140	SHIRT-SMITH/DILORENZO	0.00	193.03
1011	91258	10/26/17	5351	VARSITY BRANDS HOLDING C	00170007110	PORTABLE BALL LOCKER	0.00	193.34
1011	91262	10/26/17	1914	US BANK	25560006180	FUEL SYSTM 2483/JGUTV	0.00	3.33
1011	91262	10/26/17	1914	US BANK	00160006170	ZIPPER LUBRICANT	0.00	5.73
1011	91262	10/26/17	1914	US BANK	25560006180	AWARDS-JG BANQUET	0.00	7.11
1011	91262	10/26/17	1914	US BANK	00165006530	PWI WATER	0.00	7.28
1011	91262	10/26/17	1914	US BANK	00165006530	PWI WATER	0.00	8.38
1011	91262	10/26/17	1914	US BANK	25560006180	SHARPIES	0.00	9.69
1011	91262	10/26/17	1914	US BANK	00150005450	HOSTING DOMAINS-SEPT	0.00	9.95
1011	91262	10/26/17	1914	US BANK	00150005400	FF/PM RECRUITMNT FOOD	0.00	10.11
1011	91262	10/26/17	1914	US BANK	00160006170	GLASS STRAINERS	0.00	12.48
1011	91262	10/26/17	1914	US BANK	00150005200	COUNCIL MTG-9/12	0.00	12.50
1011	91262	10/26/17	1914	US BANK	00150005100	WATERS FOR COUNCIL	0.00	13.08
1011	91262	10/26/17	1914	US BANK	00150005200	COUNCIL MTG-8/23	0.00	14.25
1011	91262	10/26/17	1914	US BANK	00150005250	COUNCIL MTG-8/23	0.00	14.25
1011	91262	10/26/17	1914	US BANK	00165006510	APHA LNCH-GLDBRG-9/14	0.00	15.00
1011	91262	10/26/17	1914	US BANK	00150005250	COUNCIL MTG-9/12	0.00	15.50
1011	91262	10/26/17	1914	US BANK	00160006170	COMMAND STRP/LTR	0.00	16.78
1011	91262	10/26/17	1914	US BANK	00150005150	HEADPHONES	0.00	17.26
1011	91262	10/26/17	1914	US BANK	00165006570	PURP-WATER HATER-FD	0.00	17.65
1011	91262	10/26/17	1914	US BANK	00165006560	CAR WASH	0.00	19.99
1011	91262	10/26/17	1914	US BANK	00165006510	ENG LNCH-GOLDBRG-9/13	0.00	21.48
1011	91262	10/26/17	1914	US BANK	00160006170	ANNUAL PHOTO FRAME	0.00	21.53
1011	91262	10/26/17	1914	US BANK	25560006180	HOSE CONNECTORS	0.00	21.69
1011	91262	10/26/17	1914	US BANK	00160006120	APERTUS CLANG SPLLY	0.00	22.08
1011	91262	10/26/17	1914	US BANK	001	KERR-08/26-BAGGAGE	0.00	25.00
1011	91262	10/26/17	1914	US BANK	00150005150	DVDS	0.00	97.02
1011	91262	10/26/17	1914	US BANK	00150005450	MONITOR STANDS	0.00	97.22
1011	91262	10/26/17	1914	US BANK	00150005100	LCC MEMPSR DUES-EDSON	0.00	100.00
1011	91262	10/26/17	1914	US BANK	00150005100	COUNCIL MTG-8/23	0.00	106.09
1011	91262	10/26/17	1914	US BANK	00160006120	VEHICLE LOGOS	0.00	109.30
1011	91262	10/26/17	1914	US BANK	00150005150	SHREDDER	0.00	109.36
1011	91262	10/26/17	1914	US BANK	25570007110	CAMP-ICE CREAM	0.00	110.00
1011	91262	10/26/17	1914	US BANK	00150005150	DUSTR/WIPE/PAPER/PADS	0.00	122.01
1011	91262	10/26/17	1914	US BANK	25055005570	MOVIE NGHT RAFFLE	0.00	134.69
1011	91262	10/26/17	1914	US BANK	00165006570	FAN-FD	0.00	142.53
1011	91262	10/26/17	1914	US BANK	001	EDSON-FLIGHT-9/15	0.00	146.00
1011	91262	10/26/17	1914	US BANK	00160006170	2481-FIRES	0.00	146.50
1011	91262	10/26/17	1914	US BANK	25560006180	JG TRUCK COVERS	0.00	163.49
1011	91262	10/26/17	1914	US BANK	001	BAVIN-HOTEL-9/12-15	0.00	179.98
1011	91262	10/26/17	1914	US BANK	00165006530	POST DRIVER PART	0.00	185.00

PENTAMATION
 DATE: 10/31/2017
 TIME: 16:29:50

CITY OF SOLANA BEACH, CA
 CHECK REGISTER - DISBURSEMENT FUND

PAGE NUMBER: 2
 ACCTPA21

SELECTION CRITERIA: transact_ck_date between '20171021 00:00:00.000' and '20171027 00:00:00.000'
 ACCOUNTING PERIOD: 4/18

FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91262	10/26/17	1914	US BANK	50900007700	DAKOTA-TIRES	0.00	241.63
1011	91262	10/26/17	1914	US BANK	001650006520	DAKOTA-TIRES	0.00	241.64
1011	91262	10/26/17	1914	US BANK	001	CALCCA-WADE/KING-10/3	0.00	250.00
1011	91262	10/26/17	1914	US BANK	001600006150	CERT MTG LUNCH- 9/19	0.00	269.43
1011	91262	10/26/17	1914	US BANK	25055005570	MOVIE NIGHT CONCESSION	0.00	293.62
1011	91262	10/26/17	1914	US BANK	25570007110	CAMP-FIELD TRIP-8/23	0.00	312.00
1011	91262	10/26/17	1914	US BANK	00160006120	TWLS/CLEANR/COFF FLTR	0.00	315.11
1011	91262	10/26/17	1914	US BANK	00150005450	HARD DRIVE	0.00	350.00
1011	91262	10/26/17	1914	US BANK	001	BAVIN-HOTEL-9/12-15	0.00	359.96
1011	91262	10/26/17	1914	US BANK	001	EDSON-HOTEL-9/13-15	0.00	428.70
1011	91262	10/26/17	1914	US BANK	001	WADE-HOTEL-09/13	0.00	428.92
1011	91262	10/26/17	1914	US BANK	25055005570	MOVIE NIGHT CONCESSION	0.00	432.00
1011	91262	10/26/17	1914	US BANK	00150005150	COUNCIL PICTURES	0.00	449.00
1011	91262	10/26/17	1914	US BANK	00150005150	DVD MEMORIES-DEPOSIT	0.00	600.00
1011	91262	10/26/17	1914	US BANK	13560006120	2 MATRESSES-FD	0.00	667.42
1011	91262	10/26/17	1914	US BANK	13560006120	2 MATRESSES-FD	0.00	667.42
1011	91262	10/26/17	1914	US BANK	00150005450	LAPTOP MAINT	0.00	748.85
1011	91262	10/26/17	1914	US BANK	001	KERR-AUG-HOTEL	0.00	826.20
1011	91262	10/26/17	1914	US BANK	00160006120	SHIRTS-FD	0.00	999.00
1011	91262	10/26/17	1914	US BANK	001	WADE-TAXI-9/15	0.00	33.50
1011	91262	10/26/17	1914	US BANK	001	KERR-08/30-TAXI	0.00	39.16
1011	91262	10/26/17	1914	US BANK	001	KERR-08/30-BAGGAGE	0.00	45.00
1011	91262	10/26/17	1914	US BANK	00150005450	CONSTANT CONTACT-AUG	0.00	45.00
1011	91262	10/26/17	1914	US BANK	00150005200	LA TIMES SUB-Q2	0.00	51.87
1011	91262	10/26/17	1914	US BANK	00160006170	TONER-LIFEGUARDS	0.00	56.70
1011	91262	10/26/17	1914	US BANK	00165000530	FUEL-09/18	0.00	63.00
1011	91262	10/26/17	1914	US BANK	00150005400	FF/PM RECRUTMNT LUNCH	0.00	68.05
1011	91262	10/26/17	1914	US BANK	50900007700	TONER-EW YARD	0.00	69.06
1011	91262	10/26/17	1914	US BANK	00150005150	AIR PURIFIER-FILE RM	0.00	69.92
1011	91262	10/26/17	1914	US BANK	00150005150	PENS/POST-ITS/CLEANER	0.00	72.46
1011	91262	10/26/17	1914	US BANK	001	EDSON-FLIGHT-9/13	0.00	75.00
1011	91262	10/26/17	1914	US BANK	001	WADE-FLIGHT-9/13	0.00	75.00
1011	91262	10/26/17	1914	US BANK	00150005100	CASSETTE RECORDER	0.00	76.17
1011	91262	10/26/17	1914	US BANK	00150005100	COUNCIL MTG-9/12	0.00	80.28
1011	91262	10/26/17	1914	US BANK	001	WADE-TAXI-9/15	0.00	81.42
1011	91262	10/26/17	1914	US BANK	001	WADE-TAXI-9/13	0.00	81.42
1011	91262	10/26/17	1914	US BANK	001650006530	FUEL-8/31	0.00	85.00
1011	91262	10/26/17	1914	US BANK	00160006170	HOTSCHEDULES-SEPT	0.00	90.00
1011	91262	10/26/17	1914	US BANK	00150005150	FLASHDRIVE	0.00	90.67
1011	91262	10/26/17	1914	US BANK	25560006180	CHARGERS 2483/JG UTV	0.00	96.95
1011	91262	10/26/17	1914	US BANK	00150005150	DVDS	0.00	97.02
TOTAL CHECK							0.00	12,714.84
1011	91263	10/26/17	4168	CHEN RYAN ASSOCIATES	45999055550	9905.01 TRFFC PE09/30	0.00	2,045.00
1011	91264	10/26/17	1295	CITY OF DEL MAR	00150005450	IT MAINT SUPPORT-SEPT	0.00	1,575.00
1011	91265	10/26/17	211	CONSOLIDATED ELECTRICAL	00165006570	70W HPS LAMPS	0.00	533.36
1011	91265	10/26/17	211	CONSOLIDATED ELECTRICAL	00165006570	FIRE STATION APP. BAY	0.00	629.95
TOTAL CHECK							0.00	1,163.31
1011	91266	10/26/17	3902	CORODATA RECORDS MANAGEM	00150005150	RECORDS STRG-SEPT	0.00	309.30

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CITY OF SOLANA BEACH, CA
 CHECK REGISTER - DISBURSEMENT FUND

SELECTION CRITERIA: transact_ck_date between '20171021 00:00:00.000' and '20171027 00:00:00.000'
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FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91267	10/26/17	127	COX COMMUNICATIONS INC	00150005450	TV BRDCAST 10/10-11/9	0.00	1,160.75
1011	91268	10/26/17	2629	D & D DISPOSAL INC	00160006130	ANIMAL DISPOSAL-9/17	0.00	225.00
1011	91268	10/26/17	2629	D & D DISPOSAL INC	00160006130	ANIMAL DISPOSAL-9/18	0.00	65.00
	TOTAL CHECK						0.00	290.00
1011	91259	10/26/17	5348	DANA KETTLER	001	RFND-12/22-CXL FCCC	0.00	1,046.39
1011	91270	10/26/17	1701	DANNY KING	001	CALCCA-KING-10/02-03	0.00	-351.14
1011	91270	10/26/17	1701	DANNY KING	00150005200	CALCCA-KING-10/02-03	0.00	442.09
	TOTAL CHECK						0.00	90.95
1011	91271	10/26/17	108	DEL MAR BLUE PRINT COMPA	00170007110	DIA DE LOS MUE-POSTER	0.00	110.00
1011	91272	10/26/17	5210	COUNTY OF SAN DIEGO	00160006140	PRKNG CITE ADMIN-SEP	0.00	2,451.25
1011	91273	10/26/17	213	DEPARTMENT OF TRANSPORTA	00165006540	MAINT 07/17-09/17	0.00	459.35
1011	91273	10/26/17	213	DEPARTMENT OF TRANSPORTA	00165006540	ELECT 07/17-09/17	0.00	379.26
	TOTAL CHECK						0.00	838.61
1011	91274	10/26/17	4218	DICK MILLER, INC	459	9327 ST IMP RT PES/30	0.00	-6,106.45
1011	91274	10/26/17	4218	DICK MILLER, INC	228	9327 ST IMP RT PES/30	0.00	-2,865.60
1011	91274	10/26/17	4218	DICK MILLER, INC	202	9327 ST IMP RT PES/30	0.00	-2,232.00
1011	91274	10/26/17	4218	DICK MILLER, INC	459	9327 ST IMP RT PES/30	0.00	-665.05
1011	91274	10/26/17	4218	DICK MILLER, INC	202	9327 ST IMP RT PES/30	0.00	-246.68
1011	91274	10/26/17	4218	DICK MILLER, INC	20293276510	9327 STIMP IMP PES/30	0.00	4,687.09
1011	91274	10/26/17	4218	DICK MILLER, INC	20293276510	9327 STIMP RT PES/30	0.00	246.68
1011	91274	10/26/17	4218	DICK MILLER, INC	45993276510	9327 STIMP IMP PES/30	0.00	12,636.00
1011	91274	10/26/17	4218	DICK MILLER, INC	45993276510	9327 ST IMP RT PES/30	0.00	665.05
1011	91274	10/26/17	4218	DICK MILLER, INC	20293276510	9327 ST IMP C 9/30	0.00	42,409.00
1011	91274	10/26/17	4218	DICK MILLER, INC	20293276510	9327 ST IMP C RT 9/30	0.00	2,232.00
1011	91274	10/26/17	4218	DICK MILLER, INC	45993276510	9327 ST IMP C 9/30	0.00	116,025.55
1011	91274	10/26/17	4218	DICK MILLER, INC	45993276510	9327 ST IMP C RT 9/30	0.00	6,106.45
1011	91274	10/26/17	4218	DICK MILLER, INC	22893276510	9327 ST IMP C 9/30	0.00	54,442.26
1011	91274	10/26/17	4218	DICK MILLER, INC	22893276510	9327 ST IMP C RT 9/30	0.00	2,865.60
	TOTAL CHECK						0.00	230,199.90
1011	91275	10/26/17	134	DIXIELINE LUMBER CO INC	00165006570	SAFETY HASP-PD	0.00	3.38
1011	91275	10/26/17	134	DIXIELINE LUMBER CO INC	00165006570	PLASTIC PLUG W/SCREW	0.00	7.75
1011	91275	10/26/17	134	DIXIELINE LUMBER CO INC	00165006570	URINAL KIT/GLOVES	0.00	43.34
	TOTAL CHECK						0.00	54.47
1011	91276	10/26/17	269	DUDEK & ASSOCIATES INC.	50998336510	9833 PUMP STN-PE07/28	0.00	1,190.00
1011	91277	10/26/17	331	EL CAMINO RENTAL	00160006170	FORKLIFT-LFGRD TWRS	0.00	601.66
1011	91278	10/26/17	2462	EMBROIDERY IMAGE	00160006140	4 NAME BADGES-CODE	0.00	64.95
1011	91279	10/26/17	94	ESGIL CORPORATION	00155005560	BLDG PRMT 09/25-09/29	0.00	5,652.47
1011	91279	10/26/17	94	ESGIL CORPORATION	00155005560	BLDG PRMT 09/18-09/22	0.00	8,856.95
1011	91279	10/26/17	94	ESGIL CORPORATION	00155005560	BLDG PRMT 07/31-08/04	0.00	9,480.85

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FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
TOTAL CHECK								23,990.27
1011	91280	10/26/17	223	FEDEX	00150005150	SHIPPING 08/31/17	0.00	70.76
1011	91280	10/26/17	223	FEDEX	00150005150	SHIPPING 08/15 & 8/16	0.00	104.97
1011	91280	10/26/17	223	FEDEX	00150005150	SHIPPING 08/24/17	0.00	22.72
TOTAL CHECK								198.45
1011	91281	10/26/17	1075	IRON MOUNTAIN	00150005150	RECORDS STRG-OCT	0.00	417.82
1011	91282	10/26/17	5346	JENNIFER MANTER	001	RFND-10/14/17-FCCC	0.00	500.00
1011	91283	10/26/17	2235	JEWEL EDSON	001	LCC CON-EDSON-9/13-15	0.00	-1,308.66
1011	91283	10/26/17	2235	JEWEL EDSON	00150005100	LCC CON-EDSON-9/13-15	0.00	1,361.67
TOTAL CHECK								53.01
1011	91284	10/26/17	5349	JOSEPH MASNICA	00150005400	LIVESCAN	0.00	25.00
1011	91285	10/26/17	5344	KATO LETICIA	001	RFND SB-0630039	0.00	57.00
1011	91286	10/26/17	2287	KOPPEL & GRUBER PUBLIC F	20875007580	CRT FEE ASSESSMENT	0.00	328.48
1011	91286	10/26/17	2287	KOPPEL & GRUBER PUBLIC F	21100007600	ST LGHT FEE ASSESSMNT	0.00	590.96
TOTAL CHECK								919.44
1011	91287	10/26/17	4738	MEDICAL EYE SERVICES	00150005400	ROUNDING-OCT	0.00	-0.24
1011	91287	10/26/17	4738	MEDICAL EYE SERVICES	001	EE# -OCT	0.00	20.33
1011	91287	10/26/17	4738	MEDICAL EYE SERVICES	001	VISLUN OCT	0.00	452.45
TOTAL CHECK								472.54
1011	91288	10/26/17	111	MISSION LINEN & UNIFORM	21100007600	LAUNDRY-PUB WORKS	0.00	1.56
1011	91288	10/26/17	111	MISSION LINEN & UNIFORM	50900007700	LAUNDRY-PUB WORKS	0.00	6.25
1011	91288	10/26/17	111	MISSION LINEN & UNIFORM	00165006560	LAUNDRY-PUB WORKS	0.00	7.03
1011	91288	10/26/17	111	MISSION LINEN & UNIFORM	00165006520	LAUNDRY-PUB WORKS	0.00	7.04
1011	91288	10/26/17	111	MISSION LINEN & UNIFORM	00165006530	LAUNDRY-PUB WORKS	0.00	12.50
TOTAL CHECK								34.38
1011	91289	10/26/17	5352	MOBILE MINI LLC	25560006180	REISSUE CHK #090608	0.00	280.15
1011	91290	10/26/17	434	NOBLE CONSULTANTS, INC.	45094426510	9442.01SEASCP STR-SEP	0.00	351.00
1011	91291	10/26/17	5252	NOSSAMAN LLP	00150005250	PROF SVC-SEPT	0.00	17,968.60
1011	91292	10/26/17	5350	OBET COREA	12050005460	CLM.1802 COREA	0.00	2,069.27
1011	91293	10/26/17	50	OFFICE DEPOI INC	00160006170	MARINE SAFETY STAMP	0.00	66.90
1011	91294	10/26/17	1377	ONE DAY SIGNS	00165006560	SEASCAPE-RGLTRY SIGN	0.00	404.06
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1716.24/223 OCEAN ST	0.00	250.00
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1717.19/982 AVOCADO	0.00	250.00
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1717.10/301 WEST CLIF	0.00	250.00
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1714.30/234 S. RIOS	0.00	250.00
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1715.03/738 CASTRO	0.00	250.00

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FUND - 001 - GENERAL FUND

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1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1715.39/310 S RIOS AV	0.00	375.00
1011	91295	10/26/17	4797	PAMELA ELLIOTT LANDSCAPE	21355005550	1716.44/1058 SOLANA	0.00	375.00
TOTAL CHECK							0.00	2,000.00
1011	91296	10/26/17	4658	PLACEWORKS, INC	21355005550	1714.20/959 GENEVIEVE	0.00	10,997.50
1011	91297	10/26/17	1087	PREFERRED BENEFIT INS AD 001		DENMAL OCTOBER 17	0.00	2,865.56
1011	91297	10/26/17	1087	PREFERRED BENEFIT INS AD 001		EE# COBRA OCT 17	0.00	46.80
1011	91297	10/26/17	1087	PREFERRED BENEFIT INS AD 001		EE# COBRA 17	0.00	46.80
1011	91297	10/26/17	1087	PREFERRED BENEFIT INS AD 001		EE# COBRA OCT 17	0.00	84.00
1011	91297	10/26/17	1087	PREFERRED BENEFIT INS AD 001		ROUNDING OCT 17	0.00	-0.07
TOTAL CHECK							0.00	3,043.09
1011	91298	10/26/17	3568	QS WHOLESALE, INC	00160006170	WETSUIT-MCPHEE	0.00	163.43
1011	91299	10/26/17	2260	REDFLEX TRAFFIC SYSTEMS,	00165006540	RED LIGHT CAMERA-SEPT	0.00	7,159.35
1011	91300	10/26/17	416	REGIONAL COMMS SYS, MS 0	00160006120	CAP CODE-JUN	0.00	32.50
1011	91301	10/26/17	5345	RONALD LOZIER	001	RFND SB-0629869	0.00	347.50
1011	91302	10/26/17	257	SAN DIEGO COUNTY SHERIFF 001		CR TOW FEE-SEPT	0.00	-1,148.91
1011	91302	10/26/17	257	SAN DIEGO COUNTY SHERIFF 21960006110		LAW ENFORCEMENT-SEPT	0.00	8,333.27
1011	91302	10/26/17	257	SAN DIEGO COUNTY SHERIFF 00160006110		LAW ENFORCEMENT-SEPT	0.00	320,197.73
TOTAL CHECK							0.00	327,382.09
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 45994566510		9456.17EMG STRMDN RPR	0.00	897.60
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 12050005460		CLM.1740 LAND SURVEY	0.00	-5,215.50
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 12050005460		CLM.1740 LAND SURVEY	0.00	-3,432.00
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 45994566510		9456 EMG STRMDRN RPR	0.00	415.20
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 45994566510		9456 EMG STRMDRN RPR	0.00	3,432.00
1011	91303	10/26/17	5177	SAN DIEGO COUNTY ENGINEERING 45994566510		9456 EMG STRMDRN RPR	0.00	5,215.50
TOTAL CHECK							0.00	1,312.80
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506018 0902-100217	0.00	275.80
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506019 0902-100217	0.00	1,134.85
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 20875007580		005506020 0902-100217	0.00	1,721.15
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006530		0011695000 0802-0901	0.00	30.14
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006530		0011695000 0701-0801	0.00	32.72
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006530		0011695000 0902-1002	0.00	32.72
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006550		0011695000 0802-0901	0.00	90.41
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006550		0011695000 0701-0801	0.00	98.18
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006550		0011695000 0902-1002	0.00	98.18
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506000 0701-090117	0.00	196.05
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506001 0701-090117	0.00	81.05
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506002 0701-090117	0.00	457.04
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 20875007580		005506003 0701-090117	0.00	1,414.79
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506004 0701-090117	0.00	81.05
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506005 0701-090117	0.00	219.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506006 0701-090117	0.00	129.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006560		005506007 0701-090117	0.00	102.95
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST 00165006570		005506008 0701-090117	0.00	356.30

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FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20475007520	GRP 6-01 09/02-10/02	0.00	10,240.90
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20475007520	GRP 7-12 08/16-10/16	0.00	1,535.67
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20475007520	GRP 5-25 08/02-10/02	0.00	4,947.86
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005979005 0802-100217	0.00	462.11
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00900007700	005979008 0802-100217	0.00	85.43
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506018 0701-080117	0.00	855.40
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506019 0701-080117	0.00	1,507.45
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20875007580	005506020 0701-080117	0.00	1,367.17
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506014 0701-080117	0.00	154.33
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	50900007700	005506015 0715-091517	0.00	463.00
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506016 0715-091517	0.00	129.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506017 0715-091517	0.00	474.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005979003 0715-091517	0.00	251.18
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20375007510	007732000 0715-091517	0.00	191.15
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20375007510	005979004 0715-091517	0.00	1,129.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506018 0802-090117	0.00	-393.50
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506019 0802-090117	0.00	1,517.80
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20875007580	005506020 0802-090117	0.00	1,690.10
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506009 0701-090117	0.00	81.05
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506010 0701-090117	0.00	234.35
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506011 0701-090117	0.00	308.12
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506012 0701-090117	0.00	1,823.60
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005506013 0701-090117	0.00	142.37
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20375007510	005979000 0701-090117	0.00	534.83
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	005979001 0701-090117	0.00	102.30
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	REV PREPAY TO SFID	0.00	-18,590.41
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	M#81967689 07/01-08/1	0.00	-1,507.45
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	20875007580	M#81967713 07/07-08/1	0.00	-1,367.17
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006560	M#56662306 07/01-08/1	0.00	-855.40
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	50900007700	M#18473 07/01-08/01	0.00	-617.33
1011	91306	10/26/17	141	SANTA FE IRRIGATION DIST	00165006530	M#81967699 07/01-08/1	0.00	-130.90
TOTAL CHECK							0.00	13,321.54
1011	91307	10/26/17	169	SDG&E CO INC	00165006540	UTILITIES-08/31-10/06	0.00	406.90
1011	91307	10/26/17	169	SDG&E CO INC	00165006530	UTILITIES-08/31-10/06	0.00	450.90
1011	91307	10/26/17	169	SDG&E CO INC	00165006540	UTILITIES-09/05-10/06	0.00	878.81
1011	91307	10/26/17	169	SDG&E CO INC	00165006530	UTILITIES-09/05-10/06	0.00	1,071.02
1011	91307	10/26/17	169	SDG&E CO INC	20375007510	UTILITIES-09/05-10/06	0.00	2,130.28
1011	91307	10/26/17	169	SDG&E CO INC	00165006570	UTILITIES-08/31-10/06	0.00	2,276.81
1011	91307	10/26/17	169	SDG&E CO INC	00165006570	UTILITIES-09/05-10/06	0.00	5,326.93
1011	91307	10/26/17	169	SDG&E CO INC	21100007600	UTILITIES-08/31-10/06	0.00	6,480.36
TOTAL CHECK							0.00	19,022.01
1011	91308	10/26/17	1073	SEASIDE HEATING & AIR CO	00165006570	HVAC MAINT-OCT-IC	0.00	110.00
1011	91309	10/26/17	3909	SECTRAN SECURITY INC	12050005460	COURIER SVC-OCT	0.00	106.00
1011	91309	10/26/17	3909	SECTRAN SECURITY INC	12050005460	COURIER SVC FUEL-OCT	0.00	9.01
TOTAL CHECK							0.00	115.01
1011	91310	10/26/17	153	SHELL FLEET MANAGEMENT	00160006120	AUTO FUEL-SEPT	0.00	1,337.24
1011	91310	10/26/17	153	SHELL FLEET MANAGEMENT	00160006120	CR EXEMPT TAX-SEPT	0.00	-114.32
TOTAL CHECK							0.00	1,222.92

PENTAMATION
 DATE: 10/31/2017
 TIME: 16:29:50

CITY OF SOLANA BEACH, CA
 CHECK REGISTER - DISBURSEMENT FUND

PAGE NUMBER: 7
 ACCTPA21

SELECTION CRITERIA: transact.ck_date between '20171021 00:00:00.000' and '20171027 00:00:00.000'
 ACCOUNTING PERIOD: 4/18

FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91311	10/26/17	4465	SUN LIFE FINANCIAL	001	OCT 17 SUPP LIFE INS	0.00	267.10
1011	91311	10/26/17	4465	SUN LIFE FINANCIAL	001	OCT 17 LIFE & ADD INS	0.00	1,018.29
1011	91311	10/26/17	4465	SUN LIFE FINANCIAL	001	OCT 17 LTD	0.00	1,325.77
TOTAL CHECK							0.00	2,611.16
1011	91312	10/26/17	4606	T & T JANITORIAL, INC	00165006570	JANITORIAL SVC-SEPT	0.00	3,975.00
1011	91313	10/26/17	4959	TELECOM LAW FIRM	21355005550	1717.15 PROF SVC-AUG	0.00	750.00
1011	91313	10/26/17	4959	TELECOM LAW FIRM	21355005550	1717.15 PROF SVC-AUG	0.00	1,200.00
1011	91313	10/26/17	4959	TELECOM LAW FIRM	21355005550	1717.15 PROF SVC-AUG	0.00	456.00
TOTAL CHECK							0.00	2,406.00
1011	91314	10/26/17	4534	TRAFFIC SUPPLY, INC	00165006570	NO TRN ON RED SGN-4	0.00	-425.78
1011	91314	10/26/17	4534	TRAFFIC SUPPLY, INC	00165006540	NO TRN ON RED SGN-4	0.00	425.78
1011	91314	10/26/17	4534	TRAFFIC SUPPLY, INC	00165006540	RED TRAFFIC PAINT	0.00	370.79
TOTAL CHECK							0.00	370.79
1011	91315	10/26/17	645	T. S. INDUSTRIAL SUPPLY I	00165006560	PRESSURE WASHER RPR	0.00	280.18
1011	91316	10/26/17	1458	THE UNIFORM SPECIALIST	21460006120	TURNOUT-MASNICA	0.00	1,653.98
1011	91317	10/26/17	3242	VAN DYKE LANDSCAPE ARCHI	42094386510	9438.10-SKTPRK PE9/30	0.00	8,965.50
1011	91318	10/26/17	30	VERIZON WIRELESS-SD	00160006120	FIRE CELL 08/29-09/28	0.00	157.65
1011	91318	10/26/17	30	VERIZON WIRELESS-SD	00160006140	CODES CELL 8/29-09/28	0.00	40.90
1011	91318	10/26/17	30	VERIZON WIRELESS-SD	27060006120	CSA17 IPAD 8/29-9/28	0.00	113.97
TOTAL CHECK							0.00	312.52
1011	91319	10/26/17	4933	GREGORY WADE	001	LCC CONF-WADE-9/13-15	0.00	-1,458.22
1011	91319	10/26/17	4933	GREGORY WADE	001	CALCCA-WADE-10/02-03	0.00	-339.14
1011	91319	10/26/17	4933	GREGORY WADE	00150005200	CALCCA-WADE-10/02-03	0.00	339.14
1011	91319	10/26/17	4933	GREGORY WADE	00150005200	LCC CONF-WADE-9/13-15	0.00	1,504.38
TOTAL CHECK							0.00	46.16
1011	91320	10/26/17	662	WEST COAST ARBORISTS, IN	00165006530	TREE MAINT-09/16-9/30	0.00	900.00
1011	91320	10/26/17	662	WEST COAST ARBORISTS, IN	00165006560	TREE MAINT-09/16-9/30	0.00	900.00
TOTAL CHECK							0.00	1,800.00
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	D95CP PLNG LEASE-SEPT	0.00	555.18
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS COPIES8/21-9/21	0.00	106.36
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS COPIES7/21-8/21	0.00	79.43
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT CLRKS-SEPT	0.00	218.99
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT CLRKS-AUG	0.00	218.99
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT CLRKS-JULY	0.00	218.99
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-7/21-8/21	0.00	65.81
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-8/21-9/21	0.00	203.15
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-6/21-7/21	0.00	203.58
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-7/21-8/21	0.00	13.20
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-8/21-9/21	0.00	31.04
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-6/21-7/21	0.00	60.92
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT UFTRS-AUG	0.00	199.60

PENTAMATION
 DATE: 10/31/2017
 TIME: 16:29:50

CITY OF SOLANA BEACH, CA
 CHECK REGISTER - DISBURSEMENT FUND

PAGE NUMBER: 8
 ACCTPA21

SELECTION CRITERIA: transact.chk_date between '20171021 00:00:00.000' and '20171027 00:00:00.000'
 ACCOUNTING PERIOD: 4/18

FUND - 001 - GENERAL FUND

CASH ACCT	CHECK NO	ISSUE DT	VENDOR	NAME	BUDGET UNIT	DESCRIPTION	SALES TAX	AMOUNT
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT UPSTRS-SRPT	0.00	199.60
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	W7830PT UPSTRS-JULY	0.00	199.60
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-7/21-8/21	0.00	114.08
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-8/21-9/21	0.00	122.01
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS CLR-6/21-7/21	0.00	179.11
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-8/21-9/21	0.00	28.21
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-6/21-7/21	0.00	32.77
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS BLK-7/21-8/21	0.00	38.65
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	D95CP FLNG LEASE-JULY	0.00	555.18
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	D95CP FLNG LEASE-AUG	0.00	555.18
1011	91321	10/26/17	37	XEROX CORPORATION	00150005350	EXCESS COPIES6/30-7/21	0.00	77.23
TOTAL	CHECK						0.00	4,276.86
TOTAL	CASH ACCOUNT						0.00	725,206.79
TOTAL	FUND						0.00	725,206.79
TOTAL	REPORT						0.00	725,206.79



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: Finance
SUBJECT: Report on Changes Made to the General Fund Adopted Budget for Fiscal Year 2017-2018

BACKGROUND:

Staff provides a report at each Council meeting that lists changes made to the current Fiscal Year (FY) General Fund Adopted Budget.

The information provided in this Staff Report lists the changes made through October 11, 2017.

DISCUSSION:

The following table reports the revenue, expenditures, and transfers for 1) the Adopted General Fund Budget approved by Council on June 14, 2017 (Resolution 2017-095) and 2) any resolutions passed by Council that amended the Adopted General Fund Budget.

GENERAL FUND - ADOPTED BUDGET PLUS CHANGES As of November 8, 2017					
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Action	Description	Revenues	Expenditures	Transfers from GF	Net Surplus
Reso 2017-195	Adopted Budget	17,611,600	(16,932,700)	(372,400) (1)	\$ -306,500
Reso 2017-122	Marine Safety MOU	-	(11,340)	-	295,160
Reso 2017-123	Salary and Comp Plan	-	(75,500)	-	219,660
Reso 2017-126	Miscellaneous MOU	-	(53,600)	-	166,060
(1) Transfers to:					
	Debt Service for Public Facilities		152,400		
	City CIP Fund		220,000	372,400	

CEQA COMPLIANCE STATEMENT:

Not a project as defined by CEQA

COUNCIL ACTION:

FISCAL IMPACT:

N/A

WORK PLAN:

N/A

OPTIONS:

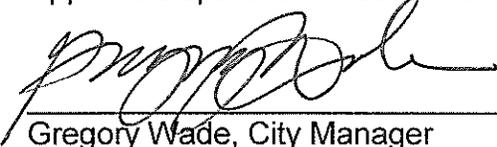
- Receive the report.
- Do not accept the report

DEPARTMENT RECOMMENDATION:

Staff recommends that the City Council receive the report listing changes made to the FY 2017-2018 General Fund Adopted Budget.

CITY MANAGER'S RECOMMENDATION:

Approve Department Recommendation



Gregory Wade, City Manager



STAFF REPORT

CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: Engineering Department
SUBJECT: **Consideration of Resolution No. 2017-161 Awarding Construction Contract for Repairs of the Plaza Street Fountain**

BACKGROUND:

As part of routine public works maintenance, various inspections and maintenance activities are performed on City infrastructure. As part of this routine maintenance, Staff determined that the Plaza Street Fountain needs to be repaired.

Staff prepared plans and specifications for a maintenance project which was originally advertised for construction bids in August 2017. No bids were received. Per Section 20166 of the California Public Contract Code (CPCC), if no bids are received, the City Council may have the project done without further complying with the provisions of the CPCC.

This item is before the City Council to consider adoption of Resolution No. 2017-161 (Attachment 1) to award a construction contract to repair the Plaza Street fountain.

DISCUSSION:

Staff prepared specifications for this project after developing the scope of work consistent with a comprehensive condition assessment of the fountain. The project was advertised for construction bids on August 3, 2017. The deadline for submission of construction bids was set for September 7, 2017, but no bids were received. As mentioned above, the CPCC allows for a public agency to proceed as needed on a project when no bids are submitted.

After the time of the expected bid opening, Staff began negotiating with California Aquatics, which is a firm that has experience with fountain renovation projects. The

CITY COUNCIL ACTION:

repairs to be done include mechanical repairs, such as replacing the pump, filter and associated equipment; and cosmetic repairs, such as cleaning, acid washing and painting the fountain basin, cleaning and resealing the compass, removal of calcium deposits on the sculpture, repairing and resealing the exterior stone and concrete work.

CEQA COMPLIANCE STATEMENT:

The project is exempt from the California Environmental Quality Act (CEQA) pursuant to Section 15301(c) of the State CEQA Guidelines.

FISCAL IMPACT:

Through collaboration with Public Works Staff and California Aquatics, Staff was able to negotiate a cost to perform the necessary repairs to the Plaza Street Fountain. The negotiated proposal submitted by California Aquatics is for \$25,799.21. Staff is also recommending a construction contingency in the amount of \$2,200.79, which is just under 8% of the construction proposal submitted by California Aquatics. This would bring the estimated construction total to \$28,000.

Although the Fiscal Year (FY) 2017/18 and FY 2018/19 Adopted Budgets identified \$20,000 for repairs to the Plaza Street Fountain, the money will not be appropriated until FY 2018/19. Staff is requesting that the City Council consider appropriating \$28,000 from the City's Capital Improvement Program Reserve fund for FY 2017/18.

Since the project is scheduled to be funded for \$20,000 in FY 2018/19, if the City Council approves funding the project for \$28,000 in FY 2017/18, the \$20,000 budgeted in FY 2018/19 would be returned to the City CIP Reserve account in FY 2018/19.

WORK PLAN:

This project is not identified in the 2017/18 Work Plan.

OPTIONS:

- Approve Staff recommendation.
- Approve Staff recommendation with modifications.
- Provide direction.

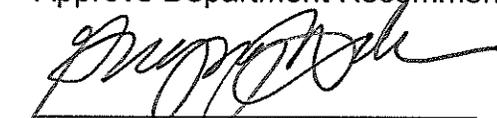
DEPARTMENT RECOMMENDATION:

Staff recommends the City Council adopt Resolution No. 2017-161:

1. Awarding a construction contract for the Plaza Street Fountain Repair Project, Bid No. 2017-09, in the amount of \$25,799.21, to California Aquatics.
2. Approving an amount of \$2,200.79 for construction contingency.
3. Authorizing the City Manager to execute the construction contract on behalf of the City.
4. Appropriating \$28,000 from the City CIP Reserve fund into the City CIP project for the Plaza Street Fountain Repair Project.
5. Authorizing the City Treasurer to amend the FY 2017/18 Adopted Budget accordingly.

CITY MANAGER RECOMMENDATION:

Approve Department Recommendation.



Gregory Wade, City Manager

Attachments:

1. Resolution No. 2017-161

RESOLUTION 2017 - 161

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, AWARDING A CONSTRUCTION CONTRACT TO CALIFORNIA AQUATICS FOR THE PLAZA STREET FOUNTAIN REPAIR PROJECT

WHEREAS, as part of routine public works maintenance, various inspections and maintenance activities are performed on City infrastructure. As part of this routine maintenance, Staff determined that the Plaza Street Fountain needs to be repaired; and

WHEREAS, this project was originally advertised for construction bids in August 2017 but no bids were received; and

WHEREAS, per Section 20166 of the California Public Contract Code (CPC), if no bids are received, the City Council may have the project done without further complying with the provisions of the CPC; and

WHEREAS, after the time of the expected bid opening, Staff began negotiating with California Aquatics, which is a firm that has experience with fountain renovation projects.

NOW, THEREFORE, the City Council of the City of Solana Beach, California, does resolve as follows:

1. That the above recitations are true and correct.
2. That the City Council awards a construction contract for the Plaza Street Fountain Repair Project, Bid No. 2017-09, in the amount of \$25,799.21, to California Aquatics.
3. That the City Council approves an amount of \$2,200.79 for construction contingency.
4. That the City Council authorizes the City Manager to execute the construction contract on behalf of the City.
5. That the City Council appropriates \$28,000 from the City CIP Reserve fund into the City CIP project for the Plaza Street Fountain Repair Project.

6. That the City Council Authorizing the City Treasurer to amend the Fiscal Year 2017/18 Adopted Budget accordingly.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSTAIN: Councilmembers –
ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: Engineering Department
SUBJECT: **Consideration of Resolution No. 2017-157 Notice of Completion for the City Sidewalk Repair Project**

BACKGROUND:

As part of a City-wide active inspection program, Staff identified several numerous concrete sidewalk panels that needed to be repaired or replaced. In an effort to correct displaced sidewalk sections, Staff developed a project which was advertised for construction bids in February 2017. The City Council awarded a construction contract to the lowest responsible and responsive contractor, Miramar General Engineering (MGE), on July 12, 2017. The project was completed to the satisfaction of the City Engineer.

This item is before the City Council for the consideration of Resolution No. 2017-157 (Attachment 1) to report the final project costs, accept the project as complete and direct the City Clerk to file a Notice of Completion for the City Sidewalk Repair Project, Bid No. 2016-06.

DISCUSSION:

MGE completed all work on this project in accordance with the approved specifications of Bid No. 2016-06 to the satisfaction of the City Engineer. A list of the sidewalk sections repaired as part of this project is included as Attachment 2. There were no change orders issued for this project. The City will release the retention, in the amount of \$1,139.75, thirty-five (35) days after the project is accepted as complete by the City Council.

CEQA COMPLIANCE STATEMENT:

Construction of damaged sidewalk is exempt pursuant to Section 15301(c) of the State CEQA Guidelines.

CITY COUNCIL ACTION:

FISCAL IMPACT:

There was \$22,795 appropriated for construction of the project and the entire amount was spent. Since no change orders were issued, the final cost of the project is \$22,795.

WORK PLAN:

This project is not identified in the 2017-2018 Work Plan.

OPTIONS:

- Approve Staff recommendation.
- Approve Staff recommendation with modifications.
- Provide direction.

DEPARTMENT RECOMMENDATION:

Staff recommends that the City Council adopt Resolution 2017-157:

1. Authorizing the City Council to accept as complete the City Sidewalk Repair Project, Bid No. 2016-06, constructed by to Miramar General Engineering.
2. Authorizing the City Clerk to file a Notice of Completion.

CITY MANAGER RECOMMENDATION:

Approve Department Recommendation.



Gregory Wade, City Manager

Attachments:

1. Resolution No. 2017-157
2. List of sidewalk sections repaired

RESOLUTION 2017 - 157

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, ACCEPTING AS COMPLETE THE CITY SIDEWALK REPAIR PROJECT AND AUTHORIZING THE CITY CLERK TO FILE A NOTICE OF COMPLETION

WHEREAS, as part of a City-wide inspection, Staff identified numerous concrete sidewalk panels that needed to be repaired in order to prevent further damage that may cause tripping potentials; and

WHEREAS, in February 2017, Staff advertised for construction bids for the City Sidewalk Repair Project, Bid No. 2016-06 and a construction contract was awarded to Miramar General Engineering on July 12, 2017.

NOW, THEREFORE, the City Council of the City of Solana Beach, California, does resolve as follows:

1. That the above recitations are true and correct.
2. That the City Council accepts as complete the City Sidewalk Repair Project, Bid No. 2016-06, constructed by Miramar General Engineering.
3. That the City Council authorizes the City Clerk to file a Notice of Completion for the project.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSTAIN: Councilmembers –
ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk

LIST OF LOCATIONS

**City Sidewalk Repair Project
Bid No. 2016-06**

Street #	Street Name	Install Root Barrier (L.F)	Remove and replace Sidewalk (S.F.)
1141	Cerro Largo	20	90
202	La Barranca	55	248
216	La Barranca	25	113
251	La Barranca	30	135
678	San Mario	0	90
444	Santa Alicia	10	45
502	Santa Alicia (on S. Victoria)	0	90
651	Santa Camelia	0	45
520	Santa Carina	15	68
1544	Santa Elena	20	90
1016	Santa Florencia	25	113
517	Santa Helena	15	68
1253	Santa Luisa	20	90
763	Santa Olivia	0	68
930	Via Mil Cumbres	0	68
1003	Via Mil Cumbres (on Cerro Largo)	45	203



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: City Manager's Department
SUBJECT: **Council Consideration of Introducing Ordinance 483 Establishing a Community Choice Aggregation Program and Resolution 2017-163 Approving the Implementation Plan and Statement of Intent**

BACKGROUND:

Community Choice Aggregation (CCA), authorized by Assembly Bill 117, is a state law that allows cities, counties and other authorized entities to aggregate electricity demand within their jurisdictions in order to purchase and/or generate alternative energy supplies for residents and businesses within their jurisdiction while maintaining the existing electricity provider for transmission and distribution services. The goal of a CCA is to provide a higher percentage of renewable energy electricity at competitive and potentially cheaper rates than existing Investor Owned Utilities (IOUs), while giving consumers local choices and promoting the development of renewable power sources and programs and local job growth. Under Public Utilities Code section 366.2, customers have the right to opt out of a CCA Program and continue to receive service from the IOUs. Since 2011, City Staff has been tasked by the City Council to research and analyze the possibility of developing a viable CCA for Solana Beach.

On October 11, 2017, the City Council authorized the City to move into Phases 2 and 3 of CCA development and implementation. One of the required steps for establishing a CCA program is to adopt an Ordinance setting the intent to establish a CCA, and to approve the Implementation Plan and Statement of Intent. There are very clear requirements established by the California Public Utilities Commission (CPUC) on what is to be included in the Implementation Plan. These plans are meant to lay out the general operating principles and goals for the CCA. Once adopted, the Implementation Plan is submitted to the CPUC for certification. After submittal, the CPUC has 90 days within which to certify the Implementation Plan.

CITY COUNCIL ACTION:

This item is before the City Council to consider Resolution 2017-163 (Attachment 1) approving the Implementation Plan and Statement of Intent (Attachment 2) and authorizing the City Manager to submit to the CPUC for certification and to consider introducing Ordinance 483 (Attachment 3) establishing a CCA in Solana Beach.

DISCUSSION:

The development and potential launch of the Solana Beach CCA is separated into three (3) phases with a goal for program launch within the first year followed by provision of two to five years of power supply and all CCA operational services. The phases are broken up as follows:

Phase 1	Phase 2	Phase 3
Program Development	Program Launch	Operations
0-6 Months	6-12 Months	Years 2-5
<ul style="list-style-type: none"> • Technical study completed • Community and local government outreach • Implementation Plan drafted • Operations, budget, and staffing plan developed 	<ul style="list-style-type: none"> • Implementation Plan certified • Data management, accounting, and back office functions established • Utility service agreement, regulatory registrations, bond posting • Power procurement and contracting • Rate design/rate setting • Public outreach and marketing campaign • Customer notifications/enrollment period 	<ul style="list-style-type: none"> • Ongoing power supply services (scheduling, etc.) • Customer account management • Community outreach and marketing • Regulatory and legislative affairs • Net energy metering and feed-in tariff • Enrollment of additional communities

At the October 11, 2017 City Council meeting, the City Council authorized the City to move into Phases 2 and 3 of CCA development as listed in the chart above. In order to accomplish the tasks in Phases 2 and 3, an Ordinance is required to establish the CCA and an Implementation Plan must be approved and submitted to the CPUC for certification. Ordinance 483 to establish the CCA is included as Attachment 1 and Resolution No. 2017-163 to approve the Implementation Plan and direct the City Manager to submit to the CPUC is included as Attachment 2, for Council's consideration. The Implementation Plan itself is included as Attachment 3 to this Staff Report.

Ordinance 483 is required to establish a CCA in Solana Beach. It is the necessary next step as the City progresses through the phases of CCA development and potential launch. The adoption of Ordinance 483 would not commit the City to launching a CCA but is required to adopt an implementation plan at this point in the process. The City is still committed to conducting additional public outreach, including workshops, to educate the community on the potential impacts of the implementation of the CCA.

Resolution No. 2017-163 would approve the Implementation Plan and direct the City Manager to submit it to the CPUC for certification. The Implementation Plan describes the City's plans to implement a voluntary CCA program for electric customers within the jurisdictional boundary of Solana Beach. The content of the Implementation Plan complies with the statutory requirements of AB 117. As required by Public Utilities Code Section 366.2(c)(3), the Implementation Plan details the process and consequences of aggregation and provides the City's statement of intent for implementing a CCA program. Once received by the CPUC, they have 90 days to review and certify.

Additionally, submittal of the Implementation Plan to the CPUC initiates the timeframe under San Diego Gas and Electric's (SDG&E) Rule 27 which requires SDG&E to be ready to successfully manage a CCA launch for Solana Beach within six (6) months. Primarily, this consists of being ready for the required data management tasks with respect to billing and call center coordination with the City's data management consultant, Calpine Energy Solutions (Calpine). City Staff, Calpine and SDG&E have all been meeting since August to coordinate the potential roll-out of the region's first CCA. The City is still anticipating a potential launch date of June 1, 2018.

It is important to emphasize that the adoption of Ordinance 483 and approval of Resolution 2017-163 does not commit the City to launching a CCA. The City Council can, at any point, stop the development and launch of the program. These are just the next required steps as the City moves through the process of launching a CCA. As mentioned previously in this Staff Report, the City will continue to conduct public outreach on the rate comparisons, renewable energy percentage content scenarios, financial safeguards and potential local programs based on community feedback.

CEQA COMPLIANCE STATEMENT:

This ordinance is exempt from the requirements of the California Environmental Quality Act (CEQA) pursuant to the CEQA Guidelines, as it is not a "project" as it has no potential to result in a direct or reasonably foreseeable indirect physical change to the environment because energy will be transported through existing infrastructure. (14 Cal. Code Regs. section 15378(a).) Further, this ordinance is exempt from CEQA as there is no possibility that this ordinance or its implementation would have a significant effect on the environment. (14 Cal. Code Regs. section 15061(b)(3).) This ordinance is also categorically exempt because it is an action taken by a regulatory agency to assume the maintenance, restoration, enhancement or protection of the environment. (14 Cal. Code Regs. section 15308.)

FISCAL IMPACT:

There is no fiscal impact as a result of the actions discussed in this Staff Report. The certification of the Implementation Plan is part of the tasks included in Phase 2 of the agreement with The Energy Authority (TEA). Minimal additional consultant services continue for assistance in the ongoing development and implementation of Phases 2

and 3 tasks. These costs can be reimbursed through CCA program revenue if or when the City launches a CCA.

WORK PLAN:

Environmental Sustainability – “Policy Development” – Priority Item 2) Develop and Implement a Community Choice Aggregation (CCA) Program.

OPTIONS:

- Approve Staff recommendation and approve Resolution 2017-163 approving the Implementation Plan and Statement of Intent and directing the City Manager to submit it to the CPUC for certification.
- Approve Staff recommendation and introduce Ordinance 483 to establish the Solana Beach CCA program.
- Do not approve the Staff recommendations.
- Provide further direction to Staff.

DEPARTMENT RECOMMENDATION:

Staff recommends the City Council:

1. Conduct the Public Hearing: Open the Public Hearing, Report Council Disclosures, Receive Public Testimony, and Close the Public Hearing.
2. Find the project exempt from the California Environmental Quality Act pursuant to Section 15303 of the State CEQA Guidelines.
3. Approve Resolution 2017-163 approving the Implementation Plan and Statement of Intent and directing the City Manager to submit it to the CPUC for certification.
4. Introduce Ordinance 483 to establish the Solana Beach CCA program.

CITY MANAGER RECOMMENDATION:

Approve Department Recommendation.



Gregory Wade, City Manager

Attachments:

1. Resolution 2017-163
2. Implementation Plan and Statement of Intent
3. Ordinance 483

RESOLUTION 2017 - 163

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, DIRECTING THE CITY MANAGER TO SUBMIT THE APPROVED COMMUNITY CHOICE AGGREGATION IMPLEMENTATION PLAN REQUIRED BY PUBLIC UTILITIES CODE SECTION 366.2(C)(3)

WHEREAS, the City of Solana Beach is pursuing alternative energy solutions in hopes of improving the current and future environmental and economic conditions of its community and region; and

WHEREAS, the City has been actively investigating options to procure and provide electric power to its citizens with the intent of achieving greater local involvement over the provision of electric services, increasing the renewable energy percentage content and promoting competitively priced renewable energy; and

WHEREAS, a technical study concluded that a Community Choice Aggregation Program would serve the City and provide benefits to include the use of renewable energy at or above the required Renewable Portfolio Standard level while providing competitive rates and economic benefits to the City; and

WHEREAS, an Implementation Plan and Statement of Intent was drafted and presented to the Solana Beach City Council at a duly noticed public hearing for its consideration and adoption on November 15, 2017; and

WHEREAS, pursuant to Public Utilities Code Section 366.2(c)(12)(A), the City Council introduced Ordinance No. 483 electing to implement a community choice aggregation program within the City's jurisdiction after having conducted a noticed public hearing and considering all materials and evidence presented.

NOW, THEREFORE, the City Council of the City of Solana Beach, California, resolve as follows:

1. That the above recitations are true and correct.
2. That the Solana Beach Implementation Plan and Statement of Intent is approved.
3. That the City Manager is directed to file the Implementation Plan and Statement of Intent with the California Public Utilities Commission for certification.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSTAIN: Councilmembers –
ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk

CITY OF SOLANA BEACH

**COMMUNITY CHOICE AGGREGATION
IMPLEMENTATION PLAN AND STATEMENT
OF INTENT - DRAFT**

November 2017

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1 INTRODUCTION

The City of Solana Beach (“City” or “Solana Beach”), located within San Diego County, is pursuing the implementation of a community choice aggregation program (“CCA”), which has been temporarily named Solana Beach CCA (the “Program” or “SBCCA”). SBCCA will offer service to all eligible customers within the City’s geographic boundaries.

This Implementation Plan and Statement of Intent (“Implementation Plan”) describes the City’s plans to implement a voluntary CCA program for electric customers within the jurisdictional boundaries of Solana Beach that currently take bundled electric service from San Diego Gas and Electric (“SDGE”). The Program will provide electricity customers the opportunity to jointly procure electricity from competitive suppliers, with such electricity being delivered over SDGE’s transmission and distribution system. The planned start date for the Program is June 1, 2018. All current SDGE customers within the City’s service area will receive information describing the SBCCA Program and will have multiple opportunities to opt out and choose to remain full requirement (“bundled”) customers of SDGE, in which case they will not be enrolled. Thus, participation in the SBCCA Program is completely voluntary. However, customers, as provided by law, will be automatically enrolled according to the anticipated schedule later described in Chapter 5 unless they affirmatively elect to opt-out.

Implementation of SBCCA will enable customers within Solana Beach’s service area to take advantage of the opportunities granted by Assembly Bill 117 (“AB 117”), the Community Choice Aggregation Law. Solana Beach’s primary objectives in implementing this Program are to procure an electric supply portfolio with higher renewable content than SDGE; to provide cost competitive electric services; and to sustain long-term rate stability for residents and businesses through local control. The prospective benefits to consumers include increased renewable energy options, stable and competitive electric rates, and the opportunity for public participation in determining which technologies are utilized to meet local electricity needs.

To ensure successful operation of the Program, the City has contracted with a not-for-profit energy services company that will procure SBCCA’s initial supply portfolio in the open market. Information regarding the procurement process is contained in Chapter 10.

The California Public Utilities Code provides the relevant legal authority for the City to become a Community Choice Aggregator and invests the California Public Utilities Commission (“CPUC” or “Commission”) with the responsibility for establishing the cost recovery mechanism that must be in place before customers can begin receiving electrical service through the SBCCA Program. The CPUC also has responsibility for registering the City as a Community Choice Aggregator and ensuring compliance with basic consumer protection rules. The Public Utilities Code requires adoption of an Implementation Plan at a duly noticed public hearing. The plan must then be filed with the Commission.

On November 15, 2017 the City, at a duly noticed public hearing, introduced and adopted this Implementation Plan, through Resolution No. 2017-163 (a copy of which is included as part of Appendix A).

The Commission has established the methodology to use to determine the cost recovery mechanism, and SDGE has approved tariffs for imposition of the cost recovery mechanism. Having accomplished this

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milestone, the City submits this Implementation Plan to the CPUC. Following the CPUC's certification of its receipt of this Implementation Plan and resolution of any outstanding issues, the City will take the final steps needed to register as a CCA prior to initiating the customer notification and enrollment process.

1.1 STATEMENT OF INTENT

The content of this Implementation Plan complies with the statutory requirements of AB 117. As required by Public Utilities Code Section 366.2(c)(3), this Implementation Plan details the process and consequences of aggregation and provides the City's statement of intent for implementing a CCA program that includes all of the following:

- Universal access;
- Reliability;
- Equitable treatment of all customer classes; and
- Any requirements established by state law or by the CPUC concerning aggregated service.

1.2 ORGANIZATION OF THIS IMPLEMENTATION PLAN

The remainder of this Implementation Plan is organized as follows:

Chapter 2: Aggregation Process

Chapter 3: Organizational Structure

Chapter 4: Startup Plan & Funding

Chapter 5: Program Phase-In

Chapter 6: Load Forecast & Resource Plan

Chapter 7: Financial Plan

Chapter 8: Rate setting

Chapter 9: Customer Rights and Responsibilities

Chapter 10: Procurement Process

Chapter 11: Contingency Plan for Program Termination

Appendix A: City of Solana Beach Resolution No. 2017-163 (Adopting Implementation Plan)

The requirements of AB 117 are cross-referenced to Chapters of this Implementation Plan in the following table.

AB 117 Cross References

AB 117 REQUIREMENT	IMPLEMENTATION PLAN CHAPTER
Statement of Intent	Chapter 1: Introduction
Process and consequences of aggregation	Chapter 2: Aggregation Process
Organizational structure of the program, its operations and funding	Chapter 3: Organizational Structure Chapter 4: Startup Plan & Funding Chapter 7: Financial Plan
Disclosure and due process in setting rates and allocating costs among participants	Chapter 8: Rate setting
Rate setting and other costs to participants	Chapter 8: Rate setting Chapter 9: Customer Rights and Responsibilities
Participant rights and responsibilities	Chapter 9: Customer Rights and Responsibilities
Methods for entering and terminating agreements with other entities	Chapter 10: Procurement Process
Description of third parties that will be supplying electricity under the program, including information about financial, technical and operational capabilities	Chapter 10: Procurement Process
Termination of the program	Chapter 11: Contingency Plan for Program Termination

2 AGGREGATION PROCESS

2.1 INTRODUCTION

This Chapter describes the background leading to the development of this Implementation Plan and describes the process and consequences of aggregation, consistent with the requirements of AB 117.

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In early 2016 Solana Beach engaged the assistance of California Clean Power to evaluate the feasibility of Solana Beach operating a standalone CCA program. The initial study revealed that a CCA program was viable, offering customers rates competitive with SDGE. The City has subsequently contracted with EES to validate the results of the initial feasibility study as some time had passed. EES also found a Solana Beach CCA to be viable. Finally, in 2017, the City contracted with The Energy Authority (TEA) to be its wholesale services provider. TEA has refreshed the feasibility analysis and finds SBCCA to be feasible as reflected in this implementation plan.

The City created SBCCA with the following objectives: 1) procure a power supply with greater renewable content than SDGE; 2) help meet the goals of the Climate Action Plan to reduce GHG emissions; 3) provide cost-competitive electric services to the residents of Solana Beach; 4) gain local control of the City's energy procurement needs; and 5) provide local clean energy programs and benefits.

The City released a draft Implementation Plan in September 2017, which described the planned organization, governance and operation of the CCA Program. Following consideration of comments related to the draft document, a final Implementation Plan was prepared and duly adopted by the Solana Beach City Council.

The SBCCA Program represents a culmination of planning efforts that are responsive to the expressed needs and priorities of the residents and business community within Solana Beach. The City plans to expand the energy choices available to eligible customers through creation of innovative new programs for voluntary purchases of renewable energy and net energy metering to promote customer-owned renewable generation.

2.2 PROCESS OF AGGREGATION

Before they are enrolled in the Program, prospective SBCCA customers will receive two written notices in the mail, from Solana Beach, that will provide information needed to understand the Program's terms and conditions of service and explain how customers can opt-out of the Program, if desired. All customers that do not follow the opt-out process specified in the customer notices will be automatically enrolled, and service will begin at their next regularly scheduled meter read date following the date of automatic enrollment, subject to the service phase-in plan described in Chapter 5. The initial enrollment notices will be provided to customers in the March, 2018, with a second notice being provided in April, 2018.

Customers enrolled in the SBCCA Program will continue to have their electric meters read and to be billed for electric service by the distribution utility (SDGE). The electric bill for Program customers will show separate charges for generation procured by SBCCA as well as other charges related to electricity delivery and other utility charges assessed by SDGE.

After service cutover, customers will have approximately 60 days (two billing cycles) to opt-out of the SBCCA Program without penalty and return to the distribution utility (SDGE). SBCCA customers will be advised of these opportunities via the distribution of two additional enrollment notices provided within the first two months of service. Customers that opt-out between the initial cutover date and the close of the post enrollment opt-out period will be responsible for program charges for the time they were served by SBCCA but will not otherwise be subject to any penalty for leaving the program. Customers that have not opted-out within thirty days of the fourth enrollment notice will be deemed to have

SBCCA Implementation Plan

elected to become a participant in the SBCCA Program and to have agreed to the SBCCA Program's terms and conditions, including those pertaining to requests for termination of service, as further described in Chapter 8.

2.3 CONSEQUENCES OF AGGREGATION

2.3.1 Rate Impacts

SBCCA Customers will pay the generation charges set by the City and no longer pay the costs of SDGE generation. Customers enrolled in the Program will be subject to the Program's terms and conditions, including responsibility for payment of all Program charges as described in Chapter 9.

The City's rate setting policies described in Chapter 7 establish a goal of providing rates that are competitive with the projected generation rates offered by the incumbent distribution utility (SDGE). The City will establish rates sufficient to recover all costs related to operation of the Program, and the Solana Beach City Council will adopt actual rates.

Initial SBCCA Program rates will be established following approval of the City's inaugural program budget, reflecting final costs from the SBCCA Program's energy procurement. The City's rate policies and procedures are detailed in Chapter 7. Information regarding final SBCCA Program rates will be disclosed along with other terms and conditions of service in the pre-enrollment and post-enrollment notices sent to potential customers.

Once Solana Beach gives definitive notice to SDGE that it will commence service, SBCCA customers will generally not be responsible for costs associated with SDGE's future electricity procurement contracts or power plant investments. Certain pre-existing generation costs and new generation costs that are deemed to provide system-wide benefits will continue to be charged by SDGE to CCA customers through separate rate components, called the Cost Responsibility Surcharge and the New System Generation Charge. These charges are shown in SDGE's electric service tariffs, which can be accessed from the utility's website, and the costs are included in charges paid by both SDGE bundled customers as well as CCA and Direct Access customers.¹

2.3.2 Renewable Energy Impacts

A second consequence of the Program will be an increase in the proportion of energy generated and supplied by renewable resources. The resource plan includes procurement of renewable energy in excess of California's renewable energy procurement mandate, and SDGE's forecast renewable percentage, for all enrolled customers. SBCCA customers may also voluntarily participate in a higher renewable supply option, potentially up to 100%. To the extent that customers choose SBCCA's voluntary renewable energy option, the renewable content of SBCCA's aggregate supply portfolio will further increase. Initially, requisite renewable energy supply will be sourced through over-the-counter energy transactions. Over time, however, the City will consider independent development of new renewable generation resources.

¹ For SDGE bundled service customers, the Power Charge Indifference Adjustment element of the Cost Responsibility Surcharge is contained within the CCA-CRS rate tariff.

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2.3.3 Greenhouse Gas Reduction

A third consequence of the Program will be an anticipated reduction in the greenhouse gas emissions attributed to the SBCCA supply portfolio. An important objective of the SBCCA formation is to support the City's Climate Action Plan. Therefore, SBCCA will set aggressive GHG-emissions reduction targets and acquire zero or low GHG emitting supply to achieve those targets.

3 ORGANIZATION AND GOVERNANCE STRUCTURE

This section provides an overview of the organizational structure of SBCCA and its proposed implementation of the CCA program. Specifically, the key agreements, governance, management, and organizational functions of SBCCA are outlined and discussed below.

3.1 ORGANIZATIONAL OVERVIEW

The Solana Beach City Council is responsible for establishing SBCCA Program policies and objectives and overseeing SBCCA's operation. The Solana Beach City Manager will serve as the SBCCA Executive Director to manage the operations of SBCCA in accordance with policies adopted by the City Council.

3.2 GOVERNANCE

The SBCCA Program will be governed by the Solana Beach City Council. SBCCA is the CCA entity that will register with the CPUC, and it is responsible for implementing and managing the program pursuant to the City Council's direction. The City Council is comprised of five councilmembers, one of which, the Mayor, serves as the presiding officer at all meetings. The SBCCA Program will be operated under the direction of an Executive Director (City Manager) appointed by the City Council.

The City Council's primary duties are to establish program policies, approve rates and provide policy direction to the Executive Director, who has general responsibility for program operations, consistent with the policies established by the City Council. The City may form various standing and ad hoc committees, as appropriate, which would have responsibility for evaluating various issues that may affect the City and its customers, including rate-related and power contracting issues, and would provide analytical support and recommendations to the City Council in these regards.

3.3 MANAGEMENT

The SBCCA Executive Director has management responsibilities over the functional areas of Administration & Finance, Marketing & Public Affairs, Power Resources & Energy Programs, and Government Affairs. In performing the defined obligations to SBCCA, the Executive Director may utilize a combination of internal staff, partnerships with other CCA agencies, and/or contractors. Certain specialized functions needed for program operations, namely the electric supply and customer account management functions described below, will be performed by experienced third-party contractors.

Major functions of SBCCA that will be managed by the Executive Director are summarized below.

3.4 ADMINISTRATION

SBCCA's Executive Director will be responsible for managing the organization's human resources and administrative functions and will coordinate with the City Council, as necessary, with regard to these functions. The functional area of administration will include oversight of any employee hiring and termination, compensation and benefits management, identification and procurement of requisite office space and various other issues. It is likely that existing City staff will assist with this function.

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3.5 FINANCE

The Executive Director is also responsible for managing the financial affairs of SBCCA, including the development of an annual budget, revenue requirement and rates; managing and maintaining cash flow requirements; arranging potential bridge loans as necessary; and other financial tools.

Revenues via rates and other funding sources (such as a rate stabilization fund, when necessary) must, at a minimum, meet the annual budgetary revenue requirement, including recovery of all expenses and any reserves or coverage requirements set forth in bond covenants or other agreements. The City will have the flexibility to consider rate adjustments, administer a standardized set of electric rates, and may offer optional rates to encourage policy goals such as encouraging renewable generation and incentivizing peak demand reduction, provided that the overall revenue requirement is achieved.

In conjunction with the City's Finance Manager, SBCCA's finance function will be responsible for preparing the annual budget, arranging financing necessary for any capital projects, preparing financial reports, managing required audits and ensuring sufficient cash flow for successful operation of the SBCCA Program. The finance function will play an important role in risk management by monitoring the credit of energy suppliers so that credit risk is properly understood and mitigated. In the event that changes in a supplier's financial condition and/or credit rating are identified, the City will be able to take appropriate action, as would be provided for in the electric supply agreement(s).

3.6 MARKETING & PUBLIC AFFAIRS

The marketing and public affairs functions include general program marketing and communications as well as direct customer interface ranging from management of key account relationships to call center and billing operations. The City will conduct program marketing to raise consumer awareness of the SBCCA Program and to establish the SBCCA "brand" in the minds of the public, with the goal of retaining and attracting as many customers as possible into the SBCCA Program. Communications will also be directed at key policy-makers at the state and local level, community business and opinion leaders, and the media.

In addition to general program communications and marketing, a significant focus on customer service, particularly representation for key accounts, will enhance the SBCCA's ability to differentiate itself as a highly customer-focused organization that is responsive to the needs of the community. SBCCA, through its data services provider, will also establish a customer call center designed to field customer inquiries and routine interaction with customer accounts.

The customer service function also encompasses management of customer data. Customer data management services include retail settlements/billing-related activities and management of a customer database. This function processes customer service requests and administers customer enrollments and departures from the SBCCA Program, maintaining a current database of enrolled customers. This function coordinates the issuance of monthly bills through the distribution utility's billing process and tracks customer payments. Activities include the electronic exchange of usage, billing, and payments data with the distribution utility and SBCCA, tracking of customer payments and accounts receivable, issuance of late payment and/or service termination notices (which would return affected customers to bundled service), and administration of customer deposits in accordance with credit policies of the City.

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The customer data management services function also manages billing-related communications with customers, customer call centers, and routine customer notices. The City has contracted with an experienced third party to perform the customer account and billing services functions.

3.7 POWER RESOURCES & ENERGY PROGRAMS

Solana Beach must plan for meeting the electricity needs of its customers utilizing resources consistent with its policy goals and objectives as well as applicable legislative and/or regulatory mandates. SBCCA's long-term resource plans (addressing the 10-20 year planning horizon) will comply with California Law and other pertinent requirements of California regulatory bodies. The City may develop and administer complementary energy programs that may be offered to SBCCA customers, including green pricing, energy efficiency, net energy metering and various other programs that may be identified to support the overarching goals and objectives of the City.

SBCCA will develop integrated resource plans that meet program supply objectives and balance cost, risk and environmental considerations. Such integrated resource plans will also conform to applicable requirements imposed by the State of California. Integrated resource planning efforts of SBCCA will make use of demand side energy efficiency, distributed generation and demand response programs as well as traditional supply options, which rely on structured wholesale transactions to meet customer energy requirements. Integrated resource plans will be updated and adopted by the City Council on an annual basis.

3.7.1 Electric Supply Operations

Electric supply operations encompass the activities necessary for wholesale procurement of electricity to serve end use customers. These highly specialized activities include the following:

- *Electricity Procurement* – assemble a portfolio of electricity resources to supply the electric needs of Program customers.
- *Risk Management* – application of standard industry techniques to reduce exposure to the volatility of energy and credit markets and insulate customer rates from sudden changes in wholesale market prices.
- *Load Forecasting* – develop load forecasts, both long-term for resource planning, short-term for the electricity purchases, and sales needed to maintain a balance between hourly resources and loads.
- *Scheduling Coordination* – scheduling and settling electric supply transactions with the California Independent System Operator (“CAISO”).

The City has contracted with a third party not-for-profit wholesale energy services firm to perform most of the electric supply operations for the SBCCA Program. These requirements include the procurement of energy, capacity and ancillary services, scheduling coordinator services, short-term load forecasting and day-ahead and real-time electricity trading.

3.8 GOVERNMENTAL AFFAIRS & LEGAL SUPPORT

The SBCCA Program will require ongoing regulatory and legislative representation to manage various regulatory compliance filings related to resource plans, resource adequacy, compliance with California's Renewables Portfolio Standard ("RPS"), and overall representation on issues that will impact the City and SBCCA customers. The City will maintain an active role at the CPUC, the California Energy Commission, the California Independent System Operator, the California legislature and, as necessary, the Federal Energy Regulatory Commission.

The City may retain outside legal services, as necessary, to administer SBCCA, review contracts, and provide overall legal support related to activities of the SBCCA Program. In addition, SBCCA's wholesale services provider will assist with regulatory filings related to wholesale procurement.

4 STARTUP PLAN AND FUNDING

This Chapter presents the City's plans for the start-up period, including necessary expenses and capital outlays. As described in the previous Chapter, Solana Beach will utilize a mix of internal staff and contractors in its CCA Program implementation and operation.

4.1 STARTUP ACTIVITIES

The initial program startup activities include the following:

- Hire staff and/or contractors to manage implementation
- Identify qualified suppliers (of requisite energy products and related services) and negotiate supplier contracts
 - Electric supplier and scheduling coordinator
 - Data management provider (if separate from energy supply)
- Define and execute communications plan
 - Customer research/information gathering
 - Media campaign
 - Key customer/stakeholder outreach
 - Informational materials and customer notices
 - Customer call center
- Post CCA bond and complete requisite registration requirements
- Pay utility service initiation, notification and switching fees
- Perform customer notification, opt-out and transfers
- Conduct load forecasting
- Establish rates
- Legal and regulatory support
- Financial management and reporting

Other costs related to starting up the SBCCA Program will be the responsibility of the SBCCA Program's contractors (and are assumed to be covered by any fees/charges imposed by such contractors). These may include capital requirements needed for collateral/credit support for electric supply expenses, customer information system costs, electronic data exchange system costs, call center costs, and billing administration/settlements systems costs.

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4.2 STAFFING AND CONTRACT SERVICES

Personnel in the form of City staff or contractors will be utilized as needed to match workloads involved in forming SBCCA, managing contracts, and initiating customer outreach/marketing during the pre-operations period. During the startup period, minimal personnel requirements would include an Executive Director, legal support, and other personnel needed to support regulatory, procurement, finance, legal, and communications activities. This support will come from using existing city staff and contractors. Following this period, additional staff and/or contractors may be retained, as needed, to support the rollout of additional value-added services (e.g., efficiency projects) and local generation projects and programs.

4.3 CAPITAL REQUIREMENTS

The start-up of the CCA Program will require capital for three major functions: (1) staffing and contractor costs; (2) deposits and reserves; and (3) operating cash flow. Based on the City's anticipated start-up activities and implementation schedule, a total need of \$1,350,000 has been identified to support the aforementioned functions. Out of the \$1,350,000 in capital requirements, \$225,000 is related to the implementation/startup efforts (i.e., rate setting, power procurement and contract negotiations, marketing and communications, regulatory compliance, CPUC bond, SDGE security deposit, etc.) in order to serve customers by the June 2018. \$500,000 may be required as collateral for CAISO. The remaining \$625,000 is the "float" required for SBCCA to pay its monthly bills before the program generates enough internal cash to self-fund its working capital needs.

The finance plan in Chapter 7 provides additional detail regarding the City's expected capital requirements and general Program finances. All the capital required for start-up is provided through SBCCA's contracts with its service providers – through deferred fees and direct loans.

Related to the City's initial capital requirement, this amount is expected to cover staffing and contractor costs during startup and pre-startup activities, including direct costs related to public relations support, technical support, and customer communications. Requisite deposits and operating reserves are also reflected in the initial capital requirement, including the following items: 1) operating reserves to address anticipated cash flow variations; 2) deposit with the CAISO prior to commencing market operations (if required); 3) CCA bond (posted with the CPUC); and 4) SDGE service fee deposit, if required.

Operating revenues from sales of electricity will be remitted to SBCCA beginning approximately sixty days after the initial customer enrollments. This lag is due to the distribution utility's standard meter reading cycle of 30 days and a 30-day payment/collections cycle. SBCCA will need working capital to support electricity procurement and costs related to program management, which is included in the SBCCA's initial \$1,350 thousand capital requirement.

4.4 FINANCING PLAN

SBCCA's initial capital requirement will be met through credit supplied by the wholesale energy management services and data management services vendors. Solana Beach will pay back the principal and interest costs associated with the start-up funding via retail generation rates charged to SBCCA customers. It is anticipated that the start-up costs will be fully recovered through such customer

SBCCA Implementation Plan

generation rates within the first several years of operations. Other needs will be met using existing city staff and resources.

5 PROGRAM PHASE-IN

The plan is for Solana Beach will roll out its service offering to all eligible customers in a single phase at start-up. Given that there are only about 7200 eligible customer accounts within the City's boundaries, a one phase roll-out is reasonable and the most efficient way for SBCCA to serve customers beginning in June 2018. It is possible that NEM customers may be enrolled over multiple periods to mitigate the impact of SDGE NEM true-up treatment.

6 LOAD FORECAST & RESOURCE PLAN

6.1 INTRODUCTION

This Chapter describes the planned mix of electric resources that will meet the energy demands of SBCCA customers using a diversified portfolio of electricity supplies. Several overarching policies govern the resource plan and the ensuing resource procurement activities that will be conducted in accordance with the plan. These key policies are as follows:

- Develop a portfolio with more renewables and lower greenhouse gas emissions than SDGE
- Manage a diverse resource portfolio to increase control over energy costs and maintain competitive and stable electric rates.

The plan described in this section would accomplish the following:

- **Procure Competitive Supply:** Procure energy, RA, renewables and low-GHG supply through competitive processes in the open market using the enabling agreements and credit supplied by the City's wholesale services adviser.
- **Use Best Practices Risk Management:** Maintain rate competitiveness by using a dollar-cost-averaging approach with particular attention to the methodology used in the power charge indifference adjustment calculation. Use stochastic modeling to measure and achieve risk management objectives.
- **Achieve Environmental Objectives:** Procure supply to offer two distinct generation rate tariffs: 1) a voluntary 100% renewable energy offered to SBCCA customers on a price premium basis relative to the SBCCA default retail option; and 2) a default SBCCA service option that includes a proportion of renewable energy greater than SDGE.
- **Provide NEM Tariff:** Encourage distributed renewable generation in the local area through the offering of a net energy metering tariff that is more remunerative than SDGE's NEM tariff.

SBCCA will comply with regulatory rules applicable to California load serving entities. SBCCA will arrange for the scheduling of sufficient electric supplies to meet the demands of its customers. Solana Beach will adhere to capacity reserve requirements established by the CPUC and the CAISO designed to address uncertainty in load forecasts and potential supply disruptions caused by generator outages and/or transmission contingencies. These rules also ensure that physical generation capacity is in place to serve SBCCA's customers, even if there were a need for the SBCCA Program to cease operations and return customers to SDGE. In addition, the City will be responsible for ensuring that its resource mix contains sufficient production from renewable energy resources needed to comply with the statewide RPS mandate (33 percent renewable energy by 2020, increasing to 50 percent by 2030). The resource plan will meet or exceed all of the applicable regulatory requirements related to resource adequacy and the RPS.

6.2 RESOURCE PLAN OVERVIEW

To meet the aforementioned objectives and satisfy the applicable regulatory requirements pertaining to SBCCA's status as a California load serving entity, Solana Beach's resource plan includes a diverse mix of power purchases, renewable energy, and potentially, new energy efficiency programs, demand response, and distributed generation. A diversified resource plan minimizes risk and volatility that can occur from over-reliance on a single resource type or fuel source, and thus increases the likelihood of rate stability. The planned power supply is initially comprised of power purchases from third party electric suppliers and, in the longer-term, may include renewable generation assets owned and/or controlled by SBCCA.

Once the SBCCA Program demonstrates it can operate successfully, Solana Beach may begin evaluating opportunities for investment in renewable generating assets, subject to then-current market conditions, statutory requirements and regulatory considerations. Any renewable generation owned by SBCCA or controlled under long-term power purchase agreement with a proven public power developer, could provide a portion of Solana Beach's electricity requirements on a cost-of-service basis. Depending upon market conditions and, importantly, the applicability of tax incentives for renewable energy development, electricity purchased under a cost-of-service arrangement can be more cost-effective than purchasing renewable energy from third party developers, which will allow the SBCCA Program to pass on cost savings to its customers through competitive generation rates. Any investment decisions will be made following thorough environmental reviews and in consultation with qualified financial and legal advisors.

As an alternative to direct investment, Solana Beach may consider partnering with an experienced public power developer and could enter into a long-term (15-to-30 year) power purchase agreement that would support the development of new renewable generating capacity. Such an arrangement could be structured to reduce the SBCCA Program's operational risk associated with capacity ownership while providing its customers with all renewable energy generated by the facility under contract.

Solana Beach's indicative resource plan for the years 2017 through 2026 is summarized in the following table. Note that SBCCA's projections reflect a portfolio mix of renewable energy compliant with the annual RPS requirement and all other supply coming in the form of conventional resources or CAISO system power.

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Table 1: Proposed Resource Plan

City of Solana Beach Proposed Resource Plan (MWh) 2018-2027										
	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Demand (MWh)										
Retail Demand	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
Losses	2,079	3,099	3,130	3,162	3,193	3,225	3,257	3,290	3,323	3,356
Wholesale	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761
Supply (MWh)										
Renewable	22,120	32,971	33,300	33,633	33,970	34,309	34,652	34,999	35,349	35,702
System	24,199	36,070	36,430	36,795	37,163	37,534	37,910	38,289	38,672	39,058
Total Supply	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761
Net Position (MWh)	0	0	0	0	0	0	0	0	0	0

6.3 SUPPLY REQUIREMENTS

The starting point for Solana Beach’s resource plan is a projection of participating customers and associated electric consumption. Projected electric consumption is evaluated on an hourly basis, and matched with resources best suited to serving the aggregate of hourly demands or the program’s “load profile.” The electric sales forecast and load profile will be affected by Solana Beach’s plan to introduce the SBCCA Program to customers in one single phase and the degree to which customers choose to remain with SDGE during the customer enrollment and opt-out period. The City’s rollout plan and assumptions regarding customer participation rates are discussed below.

6.4 CUSTOMER PARTICIPATION RATES

Customers will be automatically enrolled in the SBCCA Program unless they opt-out during the customer notification process conducted during the 60-day period prior to enrollment and continuing through the 60-day period following commencement of service. The City anticipates an overall customer participation rate of approximately 90 percent of eligible SDGE bundled service customers, based on reported opt-out rates for already operating CCAs. It is assumed that customers taking direct access service from a competitive electricity provider will continue to remain with their current supplier.

The participation rate is not expected to vary significantly among customer classes, in part because the City will offer two distinct rate tariffs that will address the needs of cost-sensitive customers as well as the needs of both residential and business customers that prefer a highly renewable energy product. The assumed participation rates will be refined as Solana Beach’s public outreach and market research efforts continue to develop.

6.5 CUSTOMER FORECAST

Once customers enroll, they will be transferred to service by SBCCA on their regularly scheduled meter read date over an approximately thirty-day period. Approximately 240 service accounts per day will be

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transferred during the first month of service. The number of accounts anticipated to be served by Solana Beach at the end of the enrollment period is shown in Table 2.

Table 2: Total Customer Counts at the end of First Month of Operation, here presuming enrollment occurs in June, 2018.

	<u>Jun-18</u>
Residential	6,140
Commercial & Agriculture	1,116
Street Lighting & Traffic	9
Total	7,266

The City assumes that customer growth will generally offset customer attrition (opt-outs) over time, resulting in a relatively stable customer base (1% annual growth) over the noted planning horizon. While the successful operating track record of California CCA programs continues to grow, there is a relatively short history with regard to CCA operations, which makes it difficult to anticipate the actual levels of customer participation within the SBCCA Program. The City believes that its assumptions regarding the offsetting effects of growth and attrition are reasonable in consideration of the historical customer growth within the City and the potential for continuing customer opt-outs following mandatory customer notification periods. The following table shows the forecast of service accounts (customers) served by Solana Beach for each of the next ten years.

Table 3: Customer Accounts by Year

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Residential	6,140	6,201	6,263	6,326	6,389	6,453	6,518	6,583	6,649	6,715
Commercial & Agriculture	1,116	1,127	1,139	1,150	1,161	1,173	1,185	1,197	1,209	1,221
Street Lighting & Traffic	9	9	10	10	10	10	10	10	10	10
Total	7,266	7,338	7,412	7,486	7,561	7,636	7,713	7,790	7,868	7,946

6.6 SALES FORECAST

The City’s forecast of kWh sales reflects the rollout and customer enrollment schedule shown above. Annual energy requirements is shown in Table 4.

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Table 4: Demand Forecast in MWh, 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Demand (MWh)										
Retail Demand	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
Losses	2,079	3,099	3,130	3,162	3,193	3,225	3,257	3,290	3,323	3,356
Wholesale	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761

6.7 CAPACITY REQUIREMENTS

The CPUC’s resource adequacy standards applicable to the SBCCA Program require a demonstration one year in advance that SBCCA has secured physical capacity for 90 percent of its projected peak loads for each of the five months May through September, plus a minimum 15 percent reserve margin. On a month-ahead basis, Solana Beach must demonstrate 100 percent of the peak load plus a minimum 15 percent reserve margin.

A portion of SBCCA’s capacity requirements must be procured locally, from the San Diego – Imperial Valley local capacity area as defined by the CAISO. The City would be required to demonstrate its local capacity requirement for each month of the following calendar year. The local capacity requirement is a percentage of the total (SDGE service area) local capacity requirements adopted by the CPUC based on Solana Beach’s forecasted peak load. Solana Beach must demonstrate compliance or request a waiver from the CPUC requirement as provided for in cases where local capacity is not available.

SBCCA is also required to demonstrate that a specified portion of its capacity meets certain operational flexibility requirements under the CPUC and CAISO’s flexible resource adequacy framework.

The estimated forward resource adequacy requirements for 2017 through 2019 are shown in the following tables²:

² The figures shown in the table are estimates. Solana Beach’s resource adequacy requirements will be subject to modification due to application of certain coincidence adjustments and resource allocations relating to utility demand response and energy efficiency programs, as well as generation capacity allocated through the Cost Allocation Mechanism. These adjustments are addressed through the CPUC’s resource adequacy compliance process.

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Table 5: Forward Capacity Requirements (Total) for 2018-2020 in MW, presuming service starts in June, 2018

Month	<u>2018</u>	<u>2019</u>	<u>2020</u>
January		13.3	13.5
February		14.8	14.3
March		13.7	13.8
April		12.1	12.2
May		12.1	12.7
June	12.9	13.6	13.2
July	16.2	15.8	15.9
August	16.4	16.6	17.4
September	19.0	19.2	18.6
October	13.5	13.6	13.7
November	14.8	15.0	15.8
December	12.4	12.6	12.2

Solana Beach’s plan ensures that sufficient reserves will be procured to meet its peak load at all times. The projected SBCCA annual capacity requirements are shown in the following table:

Table 6: Annual Maximum Capacity Requirements 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Max Wholesale Demand	16.5	16.7	16.2	16.4	16.5	16.7	17.6	17.0	17.2	17.4
Reserve Requirement (15%)	2.5	2.5	2.4	2.5	2.5	2.5	2.6	2.6	2.6	2.6
Total Capacity Requirement	19.0	19.2	18.6	18.8	19.0	19.2	20.2	19.6	19.8	20.0

Local capacity requirements are a function of the SDGE area resource adequacy requirements and Solana Beach’s projected peak demand. SBCCA will need to work with the CPUC’s Energy Division and staff at the California Energy Commission to obtain the data necessary to calculate its monthly local capacity requirement. A preliminary estimate of SBCCA’s annual maximum local capacity requirement for the ten-year planning period ranges between 7-9 MW as shown in Table 7.

Table 7: Annual Maximum Local Capacity Requirements 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Total Capacity Requirement	16.5	16.7	16.2	16.4	16.5	16.7	17.6	17.0	17.2	17.4
Local Capacity (% of Total)	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
San Diego - IV (MW)	12.4	12.5	12.1	12.3	12.4	12.5	13.2	12.8	12.9	13.0

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The CPUC assigns local capacity requirements during the year prior to the compliance period; thereafter, the CPUC provides local capacity requirement true-ups for the second half of each compliance year.

SBCCA will coordinate with SDGE and appropriate state agencies to manage the transition of responsibility for resource adequacy from SDGE to Solana Beach during CCA program phase-in. For system resource adequacy requirements, SBCCA will make month-ahead showings for each month that SBCCA plans to serve load, and load migration issues would be addressed through the CPUC's approved procedures. Solana Beach will work with the California Energy Commission and CPUC prior to commencing service to customers to ensure it meets its local and system resource adequacy obligations through its agreement(s) with its chosen electric supplier(s).

6.8 RENEWABLES PORTFOLIO STANDARDS ENERGY REQUIREMENTS

6.8.1 Basic RPS Requirements

SBCCA will be required by law and ensuing CPUC regulations to procure a certain minimum percentage of its retail electricity sales from qualified renewable energy resources. For purposes of determining Solana Beach's renewable energy requirements, many of the same standards for RPS compliance that are applicable to the distribution utilities will apply to SBCCA.

California's RPS program is currently undergoing reform. On October 7, 2015, Governor Brown signed Senate Bill 350 ("SB 350"; De Leon and Leno), the Clean Energy and Pollution Reduction Act of 2015, which increased California's RPS procurement target from 33 percent by 2020 to 50 percent by 2030 amongst other clean-energy initiatives. Many details related to SB 350 implementation will be developed over time with oversight by designated regulatory agencies. However, it is reasonable to assume that interim annual renewable energy procurement targets will be imposed on CCAs and other retail electricity sellers to facilitate progress towards the 50 percent procurement mandate. For planning purposes, SBCCA has assumed straight-line annual increases (1.7 percent per year) to the RPS procurement target beginning in 2021, as the state advances on the 50 percent RPS. SBCCA will also adopt an integrated resource plan in compliance with SB 350. Solana Beach understands that various details related to this planning requirement have yet to be developed, and Solana Beach intends to monitor and participate, as appropriate, in pertinent proceedings to promote the preparation and submittal of a responsive planning document. Furthermore, SBCCA will ensure that all long-term renewable energy contracting requirements, as imposed by SB 350, will be satisfied through appropriate transactions with qualified suppliers and will also reflect this intent in ongoing resource planning and procurement efforts.

6.8.2 Solana Beach's Renewables Portfolio Standards Requirement

SBCCA's annual RPS procurement requirements, as specified under California's RPS program, are shown in Table 8.

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Table 8: Renewable Procurement Obligation and Target Percentages and Volumes 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Retail Load (MWh)	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
RPS % Target	29%	31%	33%	35%	36%	38%	40%	42%	43%	45%
RPS Obligation (MWh)	12,829	20,442	21,978	23,341	24,730	26,144	27,583	29,049	30,541	32,061
SBCCA % Target	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
SBCCA Target (MWh)	22,120	32,971	33,300	33,633	33,970	34,309	34,652	34,999	35,349	35,702

*Note: Specific details related to SB 350 implementation have yet to be identified. For purposes of this table, the City assumed a straight-line increase from California's 33 percent RPS procurement mandate in 2020 to California's new, 50 percent RPS procurement mandate in 2030.

6.9 PURCHASED POWER

Power purchased from power marketers, public agencies, generators, and/or utilities will be a significant source of supply during the first several years of SBCCA Program operation. Solana Beach will initially contract to obtain all of its electricity from one or more third party electric providers under one or more power supply agreements, and the supplier(s) will be responsible for procuring the specified resource mix, including the City's desired quantities of renewable energy, to provide a stable and cost-effective resource portfolio for the SBCCA Program.

6.10 RENEWABLE RESOURCES

SBCCA will initially secure necessary renewable power supply from its third party electric supplier(s). Solana Beach may supplement the renewable energy provided under the initial power supply contract(s) with direct purchases of renewable energy from renewable energy facilities or from renewable generation developed and owned by SBCCA. At this point in time, it is not possible to predict what projects might be proposed in response to future renewable energy solicitations administered by Solana Beach, unsolicited proposals or discussions with other agencies. Renewable projects that are located virtually anywhere in the Western Interconnection can be considered as long as the electricity is deliverable to the CAISO control area, as required to meet the Commission's RPS rules and any additional guidelines ultimately adopted by the City. The costs of transmission access and the risk of transmission congestion costs would need to be considered in the bid evaluation process if the delivery point is outside of SBCCA's load zone, as defined by the CAISO.

6.11 ENERGY EFFICIENCY

SBCCA does not currently anticipate running locally managed energy efficiency programs. In the future, should SBCCA expand its service territory it may become feasible to apply to become EE program administrators. In the meantime, SBCCA will support already existing energy efficiency efforts within its service territory.

7 FINANCIAL PLAN

This Chapter examines the monthly cash flows expected during the startup and customer phase-in period of the SBCCA Program and identifies the anticipated financing requirements. It includes estimates of program startup costs, including necessary expenses and capital outlays. It also describes the requirements for working capital and long-term financing for the potential investment in renewable generation, consistent with the resource plan contained in Chapter 6.

7.1 DESCRIPTION OF CASH FLOW ANALYSIS

The City's cash flow analysis estimates the level of capital that will be required during the startup and phase-in period. The analysis focuses on the SBCCA Program's monthly costs and revenues and the lags between when costs are incurred and revenues received.

7.2 COST OF CCA PROGRAM OPERATIONS

The first category of the cash flow analysis is the Cost of CCA Program Operations. To estimate the overall costs associated with CCA Program Operations, the following components were taken into consideration:

- Electricity Procurement;
- Ancillary Service Requirements;
- Exit Fees;
- Staffing and Professional Services;
- Data Management Costs;
- Administrative Overhead;
- Billing Costs;
- Scheduling Coordination;
- Grid Management and other CAISO Charges;
- CCA Bond and Security Deposit; and,
- Pre-Startup Cost Reimbursement.

7.3 REVENUES FROM CCA PROGRAM OPERATIONS

The cash flow analysis also provides estimates for revenues generated from CCA operations or from electricity sales to customers. In determining the level of revenues, the analysis assumes the customer phase-in schedule described herein, and assumes that Solana Beach charges a standard, default electricity tariff similar to the generation rates of SDGE for each customer class and an optional renewable energy tariff (with a renewable energy content that exceeds the SBCCA default retail option) at a premium reflective of incremental renewable power costs. More detail on SBCCA Program rates can be found in Chapter 8.

7.4 CASH FLOW ANALYSIS RESULTS

The results of the cash flow analysis provide an estimate of the level of capital required for the City to move through the CCA startup and phase-in periods. This estimated level of capital is determined by examining the monthly cumulative net cash flows (revenues from CCA operations minus cost of CCA operations) based on assumptions for payment of costs or other cash requirements (e.g., deposits) by Solana Beach, along with estimates for when customer payments will be received. This identifies, on a monthly basis, what level of cash flow is available in terms of a surplus or deficit.

The cash flow analysis identifies funding requirements in recognition of the potential lag between revenues received and payments made during the phase-in period. The estimated financing requirements for the startup and phase-in period, including working capital needs associated with the customer enrollments, was determined to be \$1,350,000. Out of the \$1,350,000 in capital requirements, \$225,000 is related to the implementation/startup efforts (i.e., rate setting, power procurement and contract negotiations, marketing and communications, regulatory compliance, CPUC bond, SDGE security deposit, etc.) in order to serve customers by June 2018. \$500,000 is required as collateral to CAISO. The other \$625,000 is the “float” required for SBCCA to pay its monthly bills before the program generates enough internal cash to self-fund its working capital needs. Working capital requirements peak soon after enrollment of all SBCCA customers.

7.5 CCA PROGRAM IMPLEMENTATION PRO FORMA

In addition to developing a cash flow analysis that estimates the level of working capital required to move Solana Beach through full CCA phase-in, a summary pro forma analysis that evaluates the financial performance of the CCA program during the phase-in period is shown in Table 9. The difference between the cash flow analysis and the CCA pro forma analysis is that the pro forma analysis does not include a lag associated with payment streams. In essence, costs and revenues are reflected in the month in which service is provided. All other items, such as costs associated with CCA Program operations and rates charged to customers remain the same. Cash provided by financing activities are not shown in the pro forma analysis, although payments for loan repayments are included as a cost item.

The results of the pro forma analysis is shown in Table 9. In particular, the summary of CCA program startup and phase-in addresses projected SBCCA Program operations for the period beginning January 2018 through December 2027. The City has also included a summary of Program reserves, which are expected to accrue over this same period.

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Table 9: Pro Forma including Reserves Accumulation 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Revenues from Operations (\$)										
Electric Sales Revenues	3,223,816	4,626,572	4,412,264	4,500,761	4,707,547	4,826,713	4,843,288	4,890,499	5,103,581	5,352,349
Uncollected Accounts	(9,671)	(13,880)	(13,237)	(13,502)	(14,123)	(14,480)	(14,530)	(14,671)	(15,311)	(16,057)
Total Revenues	3,214,144	4,612,693	4,399,027	4,487,259	4,693,424	4,812,233	4,828,758	4,875,827	5,088,270	5,336,292
Cost of Operations (\$)										
Staffing & Consulting	183,333	191,667	150,000	150,000	150,000	100,000	100,000	100,000	100,000	100,000
Wholesale Services	140,667	217,330	223,850	230,565	237,482	244,607	251,945	259,503	267,288	275,307
Data Management Services	75,562	117,911	122,663	127,606	132,748	138,098	143,663	149,453	155,476	161,742
IOU Fees	130,527	46,711	47,650	48,608	49,585	50,581	51,598	52,635	53,693	54,772
Energy Procurement	2,318,193	3,365,799	3,486,395	3,639,177	3,780,781	3,846,792	3,998,861	4,154,902	4,316,046	4,483,554
Total Operations	2,848,282	3,939,417	4,030,557	4,195,956	4,350,596	4,380,079	4,546,068	4,716,494	4,892,503	5,075,375
Net Program Revenues	365,862	673,275	368,470	291,303	342,828	432,154	282,690	159,333	195,767	260,917
Cumulative Reserves	365,862	1,039,137	1,407,607	1,698,910	2,041,738	2,473,893	2,756,583	2,915,916	3,111,683	3,372,600

The surpluses achieved during the phase-in period serve to build SBCCA's net financial position and credit profile and to provide operating reserves for SBCCA in the event that operating costs (such as power purchase costs) exceed collected revenues for short periods of time.

7.6 SBCCA FINANCINGS

It is not anticipated that SBCCA will need any additional financing for its start-up activities. SBCCA arranged that its service providers will amortize their start-up costs over the subsequent months following when revenues begin flowing. In addition, the wholesale service provider will float the initial power supply costs for the CCA and allow SBCCA to repay over the first 12 months of service. Subsequent capital requirements will be self-funded from accrued SBCCA financial reserves.

7.7 RENEWABLE RESOURCE PROJECT FINANCING

Solana Beach may consider project financings for renewable resources, likely local wind and solar projects. These financings would only occur after a sustained period of successful SBCCA Program operation and after appropriate project opportunities are identified and subjected to appropriate environmental review.

In the event that such financing occurs, funds would include any short-term financing for the renewable resource project development costs, and would likely extend over a 20 to 30-year term. The security for such bonds would be the revenue from sales to the retail customers of Solana Beach.

8 RATE SETTING, PROGRAM TERMS AND CONDITIONS

8.1 INTRODUCTION

This Chapter describes the initial policies proposed for Solana Beach in setting its rates for electric aggregation services. These include policies regarding rate design, rate objectives, and provision for due process in setting Program rates. Program rates are ultimately approved by the Solana Beach City Council. The City would retain authority to modify program policies from time to time at its discretion.

8.2 RATE POLICIES

The City will establish rates sufficient to recover all costs related to operation of the SBCCA Program, including any reserves that may be required as a condition of financing and other discretionary reserve funds that may be approved by Solana Beach. As a general policy, rates will be uniform for all similarly situated customers enrolled in the SBCCA Program throughout the City.

The primary objectives of the rate setting plan are to set rates that achieve the following:

- Rate competitive tariff option (default service offering), including a proportionate quantity of renewable energy in excess of California's prevailing renewable energy procurement mandate;
- Voluntary renewable energy supply option (renewable content greater than the SBCCA default retail service offering));
- Rate stability;
- Equity among customers in each tariff;
- Customer understanding; and
- Revenue sufficiency.

Each of these objectives is described below.

8.3 RATE COMPETITIVENESS

The primary goal is to offer competitive rates for electric services that SBCCA would provide to participating customers. For participants in the SBCCA standard Tariff, the goal would be for SBCCA Program rates to be initially one to five percent below, subject to actual energy product pricing and decisions of the City Council, similar generation rates offered by SDGE. For participants in the SBCCA Program's voluntary renewable energy Tariff, the goal would be to offer the lowest possible customer rates with an incremental monthly cost premium reflective of the actual cost of additional renewable energy supply required to serve such customers.

Competitive rates will be critical to attracting and retaining key customers. In order for SBCCA to be successful, the combination of price and value must be perceived as superior when compared to the bundled utility service alternative. As planned, the value provided by the SBCCA Program will include a community focus and local investment and control.

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As previously discussed, the SBCCA Program will increase renewable energy supply to program customers, relative to the incumbent utility, by offering two distinct rate tariffs. The default tariff for SBCCA Program customers will be the standard tariff, which will increase renewable energy supply while maintaining generation rates that are generally comparable to SDGE's. The initial renewable energy content provided under SBCCA's standard tariff will at a minimum meet California's prevailing renewable energy procurement mandate. SBCCA will also offer its customers a voluntary renewable energy tariff, which will supply participating customers with renewable energy above the minimum RPS mandate and potentially up to 100 percent, at rates that reflect SBCCA's cost for procuring related energy supplies.

Participating qualified low- or fixed-income households, such as those currently enrolled in the California Alternate Rates for Energy ("CARE") program, will be automatically enrolled in the standard tariff and will continue to receive related discounts on monthly electricity bills through SDGE.

8.4 RATE STABILITY

SBCCA will offer stable rates by hedging its supply costs over multiple time horizons and by including renewable energy supplies that exhibit stable costs. Rate stability considerations may prevent SBCCA Program rates from directly tracking similar rates offered by the distribution utility, SDGE, and may result in differences from the general rate-related targets initially established for the SBCCA Program. Solana Beach plans to offer the most competitive rates possible after all Program operating costs are recovered and reserve targets are achieved.

8.5 EQUITY AMONG CUSTOMER CLASSES

Initial rates of the SBCCA Program will be set based on cost-of-service considerations with reference to the rates customers would otherwise pay to SDGE. Rate differences among customer classes will reflect the rates charged by the local distribution utility as well as differences in the costs of providing service to each class. Rate benefits may also vary among customers within the major customer class categories, depending upon the specific rate designs adopted by the City.

8.6 CUSTOMER UNDERSTANDING

The goal of customer understanding involves rate designs that are relatively straightforward so that customers can readily understand how their bills are calculated. This not only minimizes customer confusion and dissatisfaction but will also result in fewer billing inquiries to the SBCCA Program's customer service call center. Customer understanding also requires rate structures to reflect rational rate design principles (i.e., there should not be differences in rates that are not justified by costs or by other policies such as providing incentives for conservation).

8.7 REVENUE SUFFICIENCY

SBCCA Program rates must collect sufficient revenue from participating customers to fully fund the annual SBCCA operating budget. Rates will be set to collect the adopted budget based on a forecast of electric sales for the budget year. Rates will be adjusted as necessary to maintain the ability to fully recover all costs of the SBCCA Program, subject to the disclosure and due process policies described

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later in this chapter. To ensure rate stability, funds available in SBCCA's rate stabilization reserve may be used from time to time to augment operating revenues.

8.8 RATE DESIGN

SBCCA will generally match the rate structures from SDGE's standard rates to avoid the possibility that customers would see significantly different bill impacts as a result of changes in rate structures that would take effect following enrollment in the SBCCA Program.

8.9 NET ENERGY METERING

As planned, customers with on-site generation eligible for net metering from SDGE will be offered a net energy metering rate from SBCCA. Net energy metering allows for customers with certain qualified solar or wind distributed generation to be billed on the basis of their net energy consumption. Solana Beach's net energy metering tariff will apply to the generation component of the bill, and the SDGE net energy metering tariff will apply to the utility's portion of the bill. SBCCA plans to pay customers for excess power produced from net energy metered generation systems in accordance with the rate designs adopted by the City. The goal is to offer a higher payout for surplus generation than SDGE.

8.10 DISCLOSURE AND DUE PROCESS IN SETTING RATES AND ALLOCATING COSTS AMONG PARTICIPANTS

Initial program rates will be adopted by Solana Beach following the establishment of the first year's operating budget prior to initiating the customer notification process. Subsequently, SBCCA will prepare an annual budget and corresponding customer rates. Following the commencement of service, any proposed rate adjustment will be made to the City Council and ample time will be given to affected customers to provide comment on the proposed rate changes.

After proposing a rate adjustment, SBCCA will furnish affected customers with a notice of its intent to adjust rates, either by mailing such notices postage prepaid to affected customers, by including such notices as an insert to the regular bill for charges transmitted to affected customers, or by including a related message directly on the customer's monthly electricity bill (on the page addressing SBCCA charges). The notice will provide a summary of the proposed rate adjustment and will include a link to the SBCCA Program website where information will be posted regarding the amount of the proposed adjustment, a brief statement of the reasons for the adjustment, and the mailing address of the SBCCA Program to which any customer inquiries relative to the proposed adjustment, including a request by the customer to receive notice of the date, time, and place of any hearing on the proposed adjustment, may be directed.

9 CUSTOMER RIGHTS AND RESPONSIBILITIES

This Chapter discusses customer rights, including the right to opt-out of the SBCCA Program and the right to privacy of customer usage information, as well as obligations customers undertake upon agreement to enroll in the CCA Program. All customers that do not opt out within 30 days of the fourth enrollment notice will have agreed to become full status program participants and must adhere to the obligations set forth below, as may be modified and expanded by the City Council from time to time.

By adopting this Implementation Plan, the City will have approved the customer rights and responsibilities policies contained herein to be effective at Program initiation. The City retains authority to modify program policies from time to time at its discretion.

9.1 CUSTOMER NOTICES

At the initiation of the customer enrollment process, four notices will be provided to customers describing the Program, informing them of their opt-out rights to remain with utility bundled generation service, and containing a simple mechanism for exercising their opt-out rights. The first notice will be mailed to customers approximately sixty days prior to the date of automatic enrollment. A second notice will be sent approximately thirty days later. The City will likely use its own mailing service for requisite enrollment notices rather than including the notices in SDGE's monthly bills. This is intended to increase the likelihood that customers will read the enrollment notices, which may otherwise be ignored if included as a bill insert. Customers may opt out by notifying SBCCA using the SBCCA Program's designated telephone-based or Internet opt-out processing service. Should customers choose to initiate an opt-out request by contacting SDGE, they would be transferred to the SBCCA Program's call center to complete the opt-out request. Consistent with CPUC regulations, notices returned as undelivered mail would be treated as a failure to opt out, and the customer would be automatically enrolled.

Following automatic enrollment, at least two notices will be mailed to customers within the first two billing cycles (approximately sixty days) after SBCCA service commences. Opt-out requests made on or before the sixtieth day following start of SBCCA Program service will result in customer transfer to bundled utility service with no penalty. Such customers will be obligated to pay charges associated with the electric services provided by SBCCA during the time the customer took service from the SBCCA Program, but will otherwise not be subject to any penalty or transfer fee from SBCCA.

Customers who establish new electric service accounts within the Program's service area will be automatically enrolled in the SBCCA Program and will have sixty days from the start of service to opt out if they so desire. Such customers will be provided with two enrollment notices within this sixty-day post enrollment period. Such customers will also receive a notice detailing SBCCA's privacy policy regarding customer usage information. Solana Beach will have the authority to implement entry fees for customers that initially opt out of the Program, but later decide to participate. Entry fees, if deemed necessary, would aid in resource planning by providing additional control over the SBCCA Program's customer base.

9.2 TERMINATION FEE

Customers that are automatically enrolled in the SBCCA Program can elect to transfer back to the incumbent utility without penalty within the first two months of service. After this free opt-out period, customers will be allowed to terminate their participation but may be subject to payment of a Termination Fee, which Solana Beach reserves the right to impose, if deemed necessary. Customers that relocate within SBCCA's service territory would have SBCCA service continued at their new address. If a customer relocating to an address within SBCCA's service territory elected to cancel CCA service, the Termination Fee could be applied. Program customers that move out of Solana Beach's service territory would not be subject to the Termination Fee. If deemed applicable by Solana Beach, SDGE would collect the Termination Fee from returning customers as part of SBCCA's final bill to the customer.

If adopted, the Termination Fee would be clearly disclosed in the four enrollment notices sent to customers during the sixty-day period before automatic enrollment and following commencement of service. The fee could also be changed prospectively by Solana Beach subject to applicable customer noticing requirements. Other CCAs have adopted small or zero-dollar termination fees, and SBCCA would likely do the same.

Customers electing to terminate service after the initial notification period would be transferred to SDGE on their next regularly scheduled meter read date if the termination notice is received a minimum of fifteen days prior to that date. Such customers would also be liable for the nominal reentry fees imposed by SDGE (currently \$1.12) and would be subject to SDGE's current terms and conditions, including being required to remain on bundled utility service for a period of one year, as described in the utility CCA tariffs.

9.3 CUSTOMER CONFIDENTIALITY

Solana Beach will establish policies covering confidentiality of customer data that are fully compliant with the required privacy protection rules for CCA customer energy usage information, as detailed within Decision 12-08-045. SBCCA will maintain the confidentiality of individual customers' names, service addresses, billing addresses, telephone numbers, account numbers, and electricity consumption, except where reasonably necessary to conduct business of the SBCCA Program or to provide services to customers, including but not limited to where such disclosure is necessary to (a) comply with the law or regulations; (b) enable Solana Beach to provide service to its customers; (c) collect unpaid bills; (d) obtain and provide credit reporting information; or (e) resolve customer disputes or inquiries. SBCCA will not disclose customer information for telemarketing, e-mail, or direct mail solicitation. Aggregate data may be released at Solana Beach's discretion.

9.4 RESPONSIBILITY FOR PAYMENT

Customers will be obligated to pay SBCCA Program charges for service provided through the date of transfer including any applicable Termination Fees. Pursuant to current CPUC regulations, SBCCA will not be able to direct that electricity service be shut off for failure to pay SBCCA bills. However, SDGE has the right to shut off electricity to customers for failure to pay electricity bills, and SDGE Electric Rule 23 mandates that partial payments are to be allocated pro rata between SDGE and the CCA. In most circumstances, customers would be returned to utility service for failure to pay bills in full and customer deposits (if any) would be withheld in the case of unpaid bills. SDGE would attempt to collect any

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outstanding balance from customers in accordance with Rule 23 and the related CCA Service Agreement. The proposed process is for two late payment notices to be provided to the customer within 30 days of the original bill due date. If payment is not received within 45 days from the original due date, service would be transferred to the utility on the next regular meter read date, unless alternative payment arrangements have been made. Consistent with the CCA tariffs, Rule 23, service cannot be discontinued to a residential customer for a disputed amount if that customer has filed a complaint with the CPUC, and that customer has paid the disputed amount into an escrow account.

9.5 CUSTOMER DEPOSITS

Under certain circumstances, SBCCA customers may be required to post a deposit equal to the estimated charges for two months of CCA service prior to obtaining service from the SBCCA Program. A deposit would be required for an applicant who previously had been a customer of SDGE or SBCCA and whose electric service has been discontinued by SDGE or SBCCA during the last twelve months of that prior service arrangement as a result of bill nonpayment. Such customers may be required to reestablish credit by depositing the prescribed amount. Additionally, a customer who fails to pay bills before they become past due as defined in SDGE Electric Rule 11 (Discontinuance and Restoration of Service), and who further fails to pay such bills within five days after presentation of a discontinuance of service notice for nonpayment of bills, may be required to pay said bills and reestablish credit by depositing the prescribed amount. This rule will apply regardless of whether or not service has been discontinued for such nonpayment³. Failure to post deposit as required would cause the account service transfer request to be rejected, and the account would remain with SDGE.

³ A customer whose service is discontinued by Solana Beach is returned to SDGE generation service.

10 PROCUREMENT PROCESS

10.1 INTRODUCTION

This Chapter describes Solana Beach's initial procurement policies and the key third party service agreements by which the City will obtain operational services for the SBCCA Program. By adopting this Implementation Plan, the City will have approved the general procurement policies contained herein to be effective at Program initiation. Solana Beach retains authority to modify Program policies from time to time at its discretion.

10.2 PROCUREMENT METHODS

Solana Beach will enter into agreements for a variety of services needed to support program development, operation and management. It is anticipated that SBCCA will generally utilize Competitive Procurement methods for services but may also utilize Direct Procurement or Sole Source Procurement, depending on the nature of the services to be procured. Direct Procurement is the purchase of goods or services without competition when multiple sources of supply are available. Sole Source Procurement is generally to be performed only in the case of emergency or when a competitive process would be an idle act.

SBCCA will utilize a competitive solicitation process to enter into agreements with entities providing electrical services for the program. Agreements with entities that provide professional legal or consulting services, and agreements pertaining to unique or time sensitive opportunities, may be entered into on a Direct Procurement or Sole Source basis at Solana Beach's discretion. Authority for terminating agreements will generally mirror the authority for entering into such agreements.

10.3 KEY CONTRACTS

10.3.1 Electric Supply

Solana Beach has signed an agreement with a wholesale services provider whereby that provider will procure energy and capacity on SBCCA's behalf through competitive solicitation in the over-the-counter electricity markets. The provider has enabling agreements with over a hundred counterparties and will procure standard market products to hedge SBCCA's financial risk, meet its capacity obligations and achieve its environmental objectives. Typically, energy procurement can be done within hours while Resource Adequacy and Renewable Energy take several days. Procurement will commence once this implementation plan has been approved and the Solana Beach City Council has made the final determination to proceed to going live with the CCA.

Procurement will be an ongoing process in order to achieve desired levels of risk mitigation by dollar-cost-averaging supply costs. In addition, particular strategies will be employed to mitigate the risk of changes to the PCIA impacting SBCCA's rate competitiveness. Specifically, this entails procuring a certain amount of supply annually during the month of October when the PCIA market price benchmark is set for the coming year.

SBCCA Implementation Plan

SBCCA's wholesale services provider will also serve as the Scheduling Coordinator for scheduling loads, resources and Inter-SC trades into the CAISO market. In addition, the provider will be responsible for ensuring Solana Beach's compliance with all applicable resource adequacy and regulatory requirements imposed by the CPUC or FERC.

10.3.2 Data Management Contract

A data manager will provide the retail customer services of billing and other customer account services (electronic data interchange or EDI with SDGE, billing, remittance processing, and account management). The data management contract has been awarded to an experienced data management services provider.

The data manager is responsible for the following services:

- Data exchange with SDGE;
- Technical testing;
- Customer information system;
- Customer call center;
- Billing administration/retail settlements; and
- Settlement quality meter data reporting
- Reporting and audits of utility billing.

Utilizing a third party for account services eliminates a significant expense associated with implementing a customer information system. Such systems can impose significant information technology costs and take significant time to deploy. Separation of the data management contract from the energy supply contract provides the City with greater flexibility to change energy suppliers, if desired, without facing an expensive data migration issue.

11 CONTINGENCY PLAN FOR PROGRAM TERMINATION

11.1 INTRODUCTION

This Chapter describes the process to be followed in the case of SBCCA Program termination. By adopting the original Implementation Plan, the City will have approved the general termination process contained herein to be effective at Program initiation. In the unexpected event that the City would terminate the SBCCA Program and return its customers to SDGE service, the proposed process is designed to minimize the impacts on its customers and on SDGE. The proposed termination plan follows the requirements set forth in SDGE's tariff Rule 27 governing service to CCAs. The City retains authority to modify program policies from time to time at its discretion.

11.2 TERMINATION BY SBCCA

Solana Beach will offer services for the long term with no planned Program termination date. In the unanticipated event that the City decides to terminate the Program, the City Council would vote on Program termination.

SBCCA Implementation Plan

After any applicable restrictions on such termination have been satisfied, notice would be provided to customers six months in advance that they will be transferred back to SDGE. A second notice would be provided during the final sixty-days in advance of the transfer. The notice would describe the applicable distribution utility bundled service requirements for returning customers then in effect, such as any transitional or bundled portfolio service rules.

At least one year advance notice would be provided to SDGE and the CPUC before transferring customers, and SBCCA would coordinate the customer transfer process to minimize impacts on customers and ensure no disruption in service. Once the customer notice period is complete, customers would be transferred *en masse* on the date of their regularly scheduled meter read date.

Solana Beach will post a bond or maintain funds held in reserve to pay for potential transaction fees charged to the Program for switching customers back to distribution utility service. Reserves would be maintained against the fees imposed for processing customer transfers (CCASRs). The Public Utilities Code requires demonstration of insurance or posting of a bond sufficient to cover reentry fees imposed on customers that are involuntarily returned to distribution utility service under certain circumstances. The cost of reentry fees are the responsibility of the energy services provider or the community choice aggregator, except in the case of a customer returned for default or because its contract has expired. SBCCA will post financial security in the appropriate amount as part of its registration materials and will maintain the financial security in the required amount, as necessary.

If program termination occurred during the period and under the terms of the initial services contracts, any financial obligations for services and power procurement incurred by SBCCA that remain after discontinuation of service would fall upon the "lockbox" that will be established to protect the City's general fund from SBCCA's liabilities.

12 APPENDIX A: CITY OF SOLANA BEACH RESOLUTION No. 2017-163 (ADOPTING IMPLEMENTATION PLAN)

RESOLUTION 2017 - 163

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, DIRECTING THE CITY MANAGER TO SUBMIT THE APPROVED COMMUNITY CHOICE AGGREGATION IMPLEMENTATION PLAN REQUIRED BY PUBLIC UTILITIES CODE SECTION 366.2(C)(3)

WHEREAS, the City of Solana Beach is pursuing alternative energy solutions in hopes of improving the current and future environmental and economic conditions of its community and region; and

WHEREAS, the City has been actively investigating options to procure and provide electric power to its citizens with the intent of achieving greater local involvement over the provision of electric services, increasing the renewable energy percentage content and promoting competitively priced renewable energy; and

WHEREAS, a technical study concluded that a Community Choice Aggregation Program would serve the City and provide benefits to include the use of renewable energy at or above the required Renewable Portfolio Standard level while providing competitive rates and economic benefits to the City; and

WHEREAS, an Implementation Plan and Statement of Intent was drafted and presented to the Solana Beach City Council at a duly noticed public hearing for its consideration and adoption on November 15, 2017; and

WHEREAS, pursuant to Public Utilities Code Section 366.2(c)(12)(A), the City Council introduced Ordinance No. 483 electing to implement a community choice aggregation program within the City's jurisdiction after having conducted a noticed public hearing and considering all materials and evidence presented.

SBCCA Implementation Plan

NOW, THEREFORE, the City Council of the City of Solana Beach, California, resolve as follows:

1. That the above recitations are true and correct.
2. That the Solana Beach Implementation Plan and Statement of Intent is approved.
3. That the City Manager is directed to file the Implementation Plan and Statement of Intent with the California Public Utilities Commission for certification.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –

NOES: Councilmembers –

ABSTAIN: Councilmembers –

ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk

ORDINANCE NO. 483

AN ORDINANCE OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, ESTABLISHING A COMMUNITY CHOICE AGGREGATION PROGRAM

WHEREAS, the City of Solana Beach (City) is pursuing alternative energy solutions in hopes of improving the current and future environmental and economic conditions of its community and region; and

WHEREAS, the City has been actively investigating options to procure and provide electric power to its citizens with the intent of achieving greater local involvement over the provision of electric services, the development of clean, local, renewable energy projects, reduced greenhouse gas emissions and the wider implementation of energy conservation and efficiency projects and programs, increasing the renewable energy percentage content and promoting competitively priced renewable energy and competitive electric rates; and

WHEREAS, Assembly Bill 117 and California Public Utilities Code Sections 218.3, 331.1, 366, 366.2, 381.1, 394 and 394.25 of the allow City to establish a Community Choice Aggregation (CCA); and

WHEREAS, an initial technical study and analysis concluded that a CCA program would serve the City and provide benefits to include the use of renewable energy at or above the required Renewable Portfolio Standard level while providing competitive rates and economic benefits to the City; and

WHEREAS, under Public Utilities Code section 366.2, customers have the right to opt out of a CCA Program and continue to receive service from the incumbent utility. Customers who wish to continue to receive service from the incumbent utility will be able to do so; and

WHEREAS, on November 15, 2017, the City Council held a public hearing at which time interested persons had an opportunity to testify either in support or opposition to implementation of a CCA program in the City; and

WHEREAS, the City Council has determined that it is in the public interest and welfare to establish a CCA program and has adopted Resolution No. 2017-163 and approved the Implementation Plan and Statement of Intent attached hereto as Exhibit A.

NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, DOES HEREBY ORDAIN AS FOLLOWS:

Section 1.

The City of Solana Beach has been actively investigating options to procure and provide electric power to citizens with the intent of achieving greater local

involvement over the provision of electric services and promoting competitively priced renewable energy.

Section 2.

On September 24, 2002, the Governor signed into law Assembly Bill 117 (Stat. 2002, ch. 838; see California Public Utilities Code section 366.2; hereinafter referred to as the "Act"), which authorizes any California city or county, whose governing body so elects, to combine the electricity load of its residents and businesses in a community-wide electricity aggregation program known as Community Choice Aggregation (CCA).

Section 3.

The Act expressly authorizes participation in a CCA program through and by local city government.

Section 4.

Through Docket No. R.03-10-003, the California Public Utilities Commission has issued various decisions and rulings addressing the implementation of CCA programs, including the issuance of a procedure by which the California Public Utilities Commission will review "Implementation Plans," which are required for submittal under the Act as the means of describing the CCA program and assuring compliance with various elements contained in the Act.

Section 5.

On November 15, 2017, the City passed Resolution 2017-163 adopting the Implementation Plan and Statement of Intent attached hereto as Exhibit A, which describes the formation of CCA program to be implemented by the City, and directing the City Manager to file the Implementation Plan and Statement of Intent with the California Public Utilities Commission for certification.

Section 6.

As described in the Implementation Plan, CCA by and through the City appears to provide a reasonable opportunity to accomplish all of the following:

- (a) To provide greater levels of local involvement in and collaboration on energy decisions;
- (b) To increase the amount of locally supplied renewable energy available to Solana Beach citizens; and
- (c) To provide initial price stability, long-term electricity cost savings and other benefits for the community.

Section 7.

The Act requires CCA program participants to adopt an ordinance electing to implement a CCA program within the jurisdiction of the local government agency.

Section 8.

Based upon all of the above, the City Council hereby approves the City proceeding with the implementation of a CCA program within the City's jurisdiction, as described in Resolution 2017-163 and the Implementation Plan and Statement of Intent in the form attached hereto as Exhibit A.

Section 9. SEVERABILITY

The City Council declares that, should any provision, section, paragraph, sentence or word of this ordinance be rendered or declared invalid by any final court action in a court of competent jurisdiction or by reason of any preemptive legislation, the remaining provisions, sections, paragraphs, sentences or words of this ordinance as hereby adopted shall remain in full force and effect.

Section 10. REPEAL OF CONFLICTING PROVISIONS

All the provisions of any of the City's ordinances as heretofore adopted by the City that are in conflict with the provisions of this ordinance are hereby repealed.

Section 11. ENVIRONMENTAL DETERMINATION

This ordinance is exempt from the requirements of the California Environmental Quality Act (CEQA) pursuant to the CEQA Guidelines, as it is not a "project" as it has no potential to result in a direct or reasonably foreseeable indirect physical change to the environment because energy will be transported through existing infrastructure. (14 Cal. Code Regs. section 15378(a).) Further, this ordinance is exempt from CEQA as there is no possibility that this ordinance or its implementation would have a significant effect on the environment. (14 Cal. Code Regs. section 15061(b)(3).) This ordinance is also categorically exempt because it is an action taken by a regulatory agency to assume the maintenance, restoration, enhancement or protection of the environment. (14 Cal. Code Regs. section 15308.) The City Manager's Office shall cause a Notice of Exemption to be filed as authorized by CEQA and the CEQA guidelines.

Section 12. EFFECTIVE DATE

This ordinance shall take effect and be in force thirty (30) days after its final adoption.

THE FOREGOING ORDINANCE WAS INTRODUCED at a meeting of the City Council held on the 15th day of November, 2017, by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSTAIN: Councilmembers –
ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk

EXHIBIT A

IMPLEMENTATION PLAN AND STATEMENT OF INTENT

CITY OF SOLANA BEACH

COMMUNITY CHOICE AGGREGATION IMPLEMENTATION PLAN AND STATEMENT OF INTENT - DRAFT

November 2017

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1 INTRODUCTION

The City of Solana Beach (“City” or “Solana Beach”), located within San Diego County, is pursuing the implementation of a community choice aggregation program (“CCA”), which has been temporarily named Solana Beach CCA (the “Program” or “SBCCA”). SBCCA will offer service to all eligible customers within the City’s geographic boundaries.

This Implementation Plan and Statement of Intent (“Implementation Plan”) describes the City’s plans to implement a voluntary CCA program for electric customers within the jurisdictional boundaries of Solana Beach that currently take bundled electric service from San Diego Gas and Electric (“SDGE”). The Program will provide electricity customers the opportunity to jointly procure electricity from competitive suppliers, with such electricity being delivered over SDGE’s transmission and distribution system. The planned start date for the Program is June 1, 2018. All current SDGE customers within the City’s service area will receive information describing the SBCCA Program and will have multiple opportunities to opt out and choose to remain full requirement (“bundled”) customers of SDGE, in which case they will not be enrolled. Thus, participation in the SBCCA Program is completely voluntary. However, customers, as provided by law, will be automatically enrolled according to the anticipated schedule later described in Chapter 5 unless they affirmatively elect to opt-out.

Implementation of SBCCA will enable customers within Solana Beach’s service area to take advantage of the opportunities granted by Assembly Bill 117 (“AB 117”), the Community Choice Aggregation Law. Solana Beach’s primary objectives in implementing this Program are to procure an electric supply portfolio with higher renewable content than SDGE; to provide cost competitive electric services; and to sustain long-term rate stability for residents and businesses through local control. The prospective benefits to consumers include increased renewable energy options, stable and competitive electric rates, and the opportunity for public participation in determining which technologies are utilized to meet local electricity needs.

To ensure successful operation of the Program, the City has contracted with a not-for-profit energy services company that will procure SBCCA’s initial supply portfolio in the open market. Information regarding the procurement process is contained in Chapter 10.

The California Public Utilities Code provides the relevant legal authority for the City to become a Community Choice Aggregator and invests the California Public Utilities Commission (“CPUC” or “Commission”) with the responsibility for establishing the cost recovery mechanism that must be in place before customers can begin receiving electrical service through the SBCCA Program. The CPUC also has responsibility for registering the City as a Community Choice Aggregator and ensuring compliance with basic consumer protection rules. The Public Utilities Code requires adoption of an Implementation Plan at a duly noticed public hearing. The plan must then be filed with the Commission.

On November 15, 2017 the City, at a duly noticed public hearing, introduced and adopted this Implementation Plan, through Resolution No. 2017-163 (a copy of which is included as part of Appendix A).

The Commission has established the methodology to use to determine the cost recovery mechanism, and SDGE has approved tariffs for imposition of the cost recovery mechanism. Having accomplished this

SBCCA Implementation Plan

milestone, the City submits this Implementation Plan to the CPUC. Following the CPUC's certification of its receipt of this Implementation Plan and resolution of any outstanding issues, the City will take the final steps needed to register as a CCA prior to initiating the customer notification and enrollment process.

1.1 STATEMENT OF INTENT

The content of this Implementation Plan complies with the statutory requirements of AB 117. As required by Public Utilities Code Section 366.2(c)(3), this Implementation Plan details the process and consequences of aggregation and provides the City's statement of intent for implementing a CCA program that includes all of the following:

- Universal access;
- Reliability;
- Equitable treatment of all customer classes; and
- Any requirements established by state law or by the CPUC concerning aggregated service.

1.2 ORGANIZATION OF THIS IMPLEMENTATION PLAN

The remainder of this Implementation Plan is organized as follows:

Chapter 2: Aggregation Process

Chapter 3: Organizational Structure

Chapter 4: Startup Plan & Funding

Chapter 5: Program Phase-In

Chapter 6: Load Forecast & Resource Plan

Chapter 7: Financial Plan

Chapter 8: Rate setting

Chapter 9: Customer Rights and Responsibilities

Chapter 10: Procurement Process

Chapter 11: Contingency Plan for Program Termination

Appendix A: City of Solana Beach Resolution No. 2017-163 (Adopting Implementation Plan)

The requirements of AB 117 are cross-referenced to Chapters of this Implementation Plan in the following table.

AB 117 Cross References

AB 117 REQUIREMENT	IMPLEMENTATION PLAN CHAPTER
Statement of Intent	Chapter 1: Introduction
Process and consequences of aggregation	Chapter 2: Aggregation Process
Organizational structure of the program, its operations and funding	Chapter 3: Organizational Structure Chapter 4: Startup Plan & Funding Chapter 7: Financial Plan
Disclosure and due process in setting rates and allocating costs among participants	Chapter 8: Rate setting
Rate setting and other costs to participants	Chapter 8: Rate setting Chapter 9: Customer Rights and Responsibilities
Participant rights and responsibilities	Chapter 9: Customer Rights and Responsibilities
Methods for entering and terminating agreements with other entities	Chapter 10: Procurement Process
Description of third parties that will be supplying electricity under the program, including information about financial, technical and operational capabilities	Chapter 10: Procurement Process
Termination of the program	Chapter 11: Contingency Plan for Program Termination

2 AGGREGATION PROCESS

2.1 INTRODUCTION

This Chapter describes the background leading to the development of this Implementation Plan and describes the process and consequences of aggregation, consistent with the requirements of AB 117.

SBCCA Implementation Plan

In early 2016 Solana Beach engaged the assistance of California Clean Power to evaluate the feasibility of Solana Beach operating a standalone CCA program. The initial study revealed that a CCA program was viable, offering customers rates competitive with SDGE. The City has subsequently contracted with EES to validate the results of the initial feasibility study as some time had passed. EES also found a Solana Beach CCA to be viable. Finally, in 2017, the City contracted with The Energy Authority (TEA) to be its wholesale services provider. TEA has refreshed the feasibility analysis and finds SBCCA to be feasible as reflected in this implementation plan.

The City created SBCCA with the following objectives: 1) procure a power supply with greater renewable content than SDGE; 2) help meet the goals of the Climate Action Plan to reduce GHG emissions; 3) provide cost-competitive electric services to the residents of Solana Beach; 4) gain local control of the City's energy procurement needs; and 5) provide local clean energy programs and benefits.

The City released a draft Implementation Plan in September 2017, which described the planned organization, governance and operation of the CCA Program. Following consideration of comments related to the draft document, a final Implementation Plan was prepared and duly adopted by the Solana Beach City Council.

The SBCCA Program represents a culmination of planning efforts that are responsive to the expressed needs and priorities of the residents and business community within Solana Beach. The City plans to expand the energy choices available to eligible customers through creation of innovative new programs for voluntary purchases of renewable energy and net energy metering to promote customer-owned renewable generation.

2.2 PROCESS OF AGGREGATION

Before they are enrolled in the Program, prospective SBCCA customers will receive two written notices in the mail, from Solana Beach, that will provide information needed to understand the Program's terms and conditions of service and explain how customers can opt-out of the Program, if desired. All customers that do not follow the opt-out process specified in the customer notices will be automatically enrolled, and service will begin at their next regularly scheduled meter read date following the date of automatic enrollment, subject to the service phase-in plan described in Chapter 5. The initial enrollment notices will be provided to customers in the March, 2018, with a second notice being provided in April, 2018.

Customers enrolled in the SBCCA Program will continue to have their electric meters read and to be billed for electric service by the distribution utility (SDGE). The electric bill for Program customers will show separate charges for generation procured by SBCCA as well as other charges related to electricity delivery and other utility charges assessed by SDGE.

After service cutover, customers will have approximately 60 days (two billing cycles) to opt-out of the SBCCA Program without penalty and return to the distribution utility (SDGE). SBCCA customers will be advised of these opportunities via the distribution of two additional enrollment notices provided within the first two months of service. Customers that opt-out between the initial cutover date and the close of the post enrollment opt-out period will be responsible for program charges for the time they were served by SBCCA but will not otherwise be subject to any penalty for leaving the program. Customers that have not opted-out within thirty days of the fourth enrollment notice will be deemed to have

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elected to become a participant in the SBCCA Program and to have agreed to the SBCCA Program's terms and conditions, including those pertaining to requests for termination of service, as further described in Chapter 8.

2.3 CONSEQUENCES OF AGGREGATION

2.3.1 Rate Impacts

SBCCA Customers will pay the generation charges set by the City and no longer pay the costs of SDGE generation. Customers enrolled in the Program will be subject to the Program's terms and conditions, including responsibility for payment of all Program charges as described in Chapter 9.

The City's rate setting policies described in Chapter 7 establish a goal of providing rates that are competitive with the projected generation rates offered by the incumbent distribution utility (SDGE). The City will establish rates sufficient to recover all costs related to operation of the Program, and the Solana Beach City Council will adopt actual rates.

Initial SBCCA Program rates will be established following approval of the City's inaugural program budget, reflecting final costs from the SBCCA Program's energy procurement. The City's rate policies and procedures are detailed in Chapter 7. Information regarding final SBCCA Program rates will be disclosed along with other terms and conditions of service in the pre-enrollment and post-enrollment notices sent to potential customers.

Once Solana Beach gives definitive notice to SDGE that it will commence service, SBCCA customers will generally not be responsible for costs associated with SDGE's future electricity procurement contracts or power plant investments. Certain pre-existing generation costs and new generation costs that are deemed to provide system-wide benefits will continue to be charged by SDGE to CCA customers through separate rate components, called the Cost Responsibility Surcharge and the New System Generation Charge. These charges are shown in SDGE's electric service tariffs, which can be accessed from the utility's website, and the costs are included in charges paid by both SDGE bundled customers as well as CCA and Direct Access customers.¹

2.3.2 Renewable Energy Impacts

A second consequence of the Program will be an increase in the proportion of energy generated and supplied by renewable resources. The resource plan includes procurement of renewable energy in excess of California's renewable energy procurement mandate, and SDGE's forecast renewable percentage, for all enrolled customers. SBCCA customers may also voluntarily participate in a higher renewable supply option, potentially up to 100%. To the extent that customers choose SBCCA's voluntary renewable energy option, the renewable content of SBCCA's aggregate supply portfolio will further increase. Initially, requisite renewable energy supply will be sourced through over-the-counter energy transactions. Over time, however, the City will consider independent development of new renewable generation resources.

¹ For SDGE bundled service customers, the Power Charge Indifference Adjustment element of the Cost Responsibility Surcharge is contained within the CCA-CRS rate tariff.

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2.3.3 Greenhouse Gas Reduction

A third consequence of the Program will be an anticipated reduction in the greenhouse gas emissions attributed to the SBCCA supply portfolio. An important objective of the SBCCA formation is to support the City's Climate Action Plan. Therefore, SBCCA will set aggressive GHG-emissions reduction targets and acquire zero or low GHG emitting supply to achieve those targets.

3 ORGANIZATION AND GOVERNANCE STRUCTURE

This section provides an overview of the organizational structure of SBCCA and its proposed implementation of the CCA program. Specifically, the key agreements, governance, management, and organizational functions of SBCCA are outlined and discussed below.

3.1 ORGANIZATIONAL OVERVIEW

The Solana Beach City Council is responsible for establishing SBCCA Program policies and objectives and overseeing SBCCA's operation. The Solana Beach City Manager will serve as the SBCCA Executive Director to manage the operations of SBCCA in accordance with policies adopted by the City Council.

3.2 GOVERNANCE

The SBCCA Program will be governed by the Solana Beach City Council. SBCCA is the CCA entity that will register with the CPUC, and it is responsible for implementing and managing the program pursuant to the City Council's direction. The City Council is comprised of five councilmembers, one of which, the Mayor, serves as the presiding officer at all meetings. The SBCCA Program will be operated under the direction of an Executive Director (City Manager) appointed by the City Council.

The City Council's primary duties are to establish program policies, approve rates and provide policy direction to the Executive Director, who has general responsibility for program operations, consistent with the policies established by the City Council. The City may form various standing and ad hoc committees, as appropriate, which would have responsibility for evaluating various issues that may affect the City and its customers, including rate-related and power contracting issues, and would provide analytical support and recommendations to the City Council in these regards.

3.3 MANAGEMENT

The SBCCA Executive Director has management responsibilities over the functional areas of Administration & Finance, Marketing & Public Affairs, Power Resources & Energy Programs, and Government Affairs. In performing the defined obligations to SBCCA, the Executive Director may utilize a combination of internal staff, partnerships with other CCA agencies, and/or contractors. Certain specialized functions needed for program operations, namely the electric supply and customer account management functions described below, will be performed by experienced third-party contractors.

Major functions of SBCCA that will be managed by the Executive Director are summarized below.

3.4 ADMINISTRATION

SBCCA's Executive Director will be responsible for managing the organization's human resources and administrative functions and will coordinate with the City Council, as necessary, with regard to these functions. The functional area of administration will include oversight of any employee hiring and termination, compensation and benefits management, identification and procurement of requisite office space and various other issues. It is likely that existing City staff will assist with this function.

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3.5 FINANCE

The Executive Director is also responsible for managing the financial affairs of SBCCA, including the development of an annual budget, revenue requirement and rates; managing and maintaining cash flow requirements; arranging potential bridge loans as necessary; and other financial tools.

Revenues via rates and other funding sources (such as a rate stabilization fund, when necessary) must, at a minimum, meet the annual budgetary revenue requirement, including recovery of all expenses and any reserves or coverage requirements set forth in bond covenants or other agreements. The City will have the flexibility to consider rate adjustments, administer a standardized set of electric rates, and may offer optional rates to encourage policy goals such as encouraging renewable generation and incentivizing peak demand reduction, provided that the overall revenue requirement is achieved.

In conjunction with the City's Finance Manager, SBCCA's finance function will be responsible for preparing the annual budget, arranging financing necessary for any capital projects, preparing financial reports, managing required audits and ensuring sufficient cash flow for successful operation of the SBCCA Program. The finance function will play an important role in risk management by monitoring the credit of energy suppliers so that credit risk is properly understood and mitigated. In the event that changes in a supplier's financial condition and/or credit rating are identified, the City will be able to take appropriate action, as would be provided for in the electric supply agreement(s).

3.6 MARKETING & PUBLIC AFFAIRS

The marketing and public affairs functions include general program marketing and communications as well as direct customer interface ranging from management of key account relationships to call center and billing operations. The City will conduct program marketing to raise consumer awareness of the SBCCA Program and to establish the SBCCA "brand" in the minds of the public, with the goal of retaining and attracting as many customers as possible into the SBCCA Program. Communications will also be directed at key policy-makers at the state and local level, community business and opinion leaders, and the media.

In addition to general program communications and marketing, a significant focus on customer service, particularly representation for key accounts, will enhance the SBCCA's ability to differentiate itself as a highly customer-focused organization that is responsive to the needs of the community. SBCCA, through its data services provider, will also establish a customer call center designed to field customer inquiries and routine interaction with customer accounts.

The customer service function also encompasses management of customer data. Customer data management services include retail settlements/billing-related activities and management of a customer database. This function processes customer service requests and administers customer enrollments and departures from the SBCCA Program, maintaining a current database of enrolled customers. This function coordinates the issuance of monthly bills through the distribution utility's billing process and tracks customer payments. Activities include the electronic exchange of usage, billing, and payments data with the distribution utility and SBCCA, tracking of customer payments and accounts receivable, issuance of late payment and/or service termination notices (which would return affected customers to bundled service), and administration of customer deposits in accordance with credit policies of the City.

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The customer data management services function also manages billing-related communications with customers, customer call centers, and routine customer notices. The City has contracted with an experienced third party to perform the customer account and billing services functions.

3.7 POWER RESOURCES & ENERGY PROGRAMS

Solana Beach must plan for meeting the electricity needs of its customers utilizing resources consistent with its policy goals and objectives as well as applicable legislative and/or regulatory mandates. SBCCA's long-term resource plans (addressing the 10-20 year planning horizon) will comply with California Law and other pertinent requirements of California regulatory bodies. The City may develop and administer complementary energy programs that may be offered to SBCCA customers, including green pricing, energy efficiency, net energy metering and various other programs that may be identified to support the overarching goals and objectives of the City.

SBCCA will develop integrated resource plans that meet program supply objectives and balance cost, risk and environmental considerations. Such integrated resource plans will also conform to applicable requirements imposed by the State of California. Integrated resource planning efforts of SBCCA will make use of demand side energy efficiency, distributed generation and demand response programs as well as traditional supply options, which rely on structured wholesale transactions to meet customer energy requirements. Integrated resource plans will be updated and adopted by the City Council on an annual basis.

3.7.1 Electric Supply Operations

Electric supply operations encompass the activities necessary for wholesale procurement of electricity to serve end use customers. These highly specialized activities include the following:

- *Electricity Procurement* – assemble a portfolio of electricity resources to supply the electric needs of Program customers.
- *Risk Management* – application of standard industry techniques to reduce exposure to the volatility of energy and credit markets and insulate customer rates from sudden changes in wholesale market prices.
- *Load Forecasting* – develop load forecasts, both long-term for resource planning, short-term for the electricity purchases, and sales needed to maintain a balance between hourly resources and loads.
- *Scheduling Coordination* – scheduling and settling electric supply transactions with the California Independent System Operator (“CAISO”).

The City has contracted with a third party not-for-profit wholesale energy services firm to perform most of the electric supply operations for the SBCCA Program. These requirements include the procurement of energy, capacity and ancillary services, scheduling coordinator services, short-term load forecasting and day-ahead and real-time electricity trading.

3.8 GOVERNMENTAL AFFAIRS & LEGAL SUPPORT

The SBCCA Program will require ongoing regulatory and legislative representation to manage various regulatory compliance filings related to resource plans, resource adequacy, compliance with California’s Renewables Portfolio Standard (“RPS”), and overall representation on issues that will impact the City and SBCCA customers. The City will maintain an active role at the CPUC, the California Energy Commission, the California Independent System Operator, the California legislature and, as necessary, the Federal Energy Regulatory Commission.

The City may retain outside legal services, as necessary, to administer SBCCA, review contracts, and provide overall legal support related to activities of the SBCCA Program. In addition, SBCCA’s wholesale services provider will assist with regulatory filings related to wholesale procurement.

4 STARTUP PLAN AND FUNDING

This Chapter presents the City's plans for the start-up period, including necessary expenses and capital outlays. As described in the previous Chapter, Solana Beach will utilize a mix of internal staff and contractors in its CCA Program implementation and operation.

4.1 STARTUP ACTIVITIES

The initial program startup activities include the following:

- Hire staff and/or contractors to manage implementation
- Identify qualified suppliers (of requisite energy products and related services) and negotiate supplier contracts
 - Electric supplier and scheduling coordinator
 - Data management provider (if separate from energy supply)
- Define and execute communications plan
 - Customer research/information gathering
 - Media campaign
 - Key customer/stakeholder outreach
 - Informational materials and customer notices
 - Customer call center
- Post CCA bond and complete requisite registration requirements
- Pay utility service initiation, notification and switching fees
- Perform customer notification, opt-out and transfers
- Conduct load forecasting
- Establish rates
- Legal and regulatory support
- Financial management and reporting

Other costs related to starting up the SBCCA Program will be the responsibility of the SBCCA Program's contractors (and are assumed to be covered by any fees/charges imposed by such contractors). These may include capital requirements needed for collateral/credit support for electric supply expenses, customer information system costs, electronic data exchange system costs, call center costs, and billing administration/settlements systems costs.

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4.2 STAFFING AND CONTRACT SERVICES

Personnel in the form of City staff or contractors will be utilized as needed to match workloads involved in forming SBCCA, managing contracts, and initiating customer outreach/marketing during the pre-operations period. During the startup period, minimal personnel requirements would include an Executive Director, legal support, and other personnel needed to support regulatory, procurement, finance, legal, and communications activities. This support will come from using existing city staff and contractors. Following this period, additional staff and/or contractors may be retained, as needed, to support the rollout of additional value-added services (e.g., efficiency projects) and local generation projects and programs.

4.3 CAPITAL REQUIREMENTS

The start-up of the CCA Program will require capital for three major functions: (1) staffing and contractor costs; (2) deposits and reserves; and (3) operating cash flow. Based on the City's anticipated start-up activities and implementation schedule, a total need of \$1,350,000 has been identified to support the aforementioned functions. Out of the \$1,350,000 in capital requirements, \$225,000 is related to the implementation/startup efforts (i.e., rate setting, power procurement and contract negotiations, marketing and communications, regulatory compliance, CPUC bond, SDGE security deposit, etc.) in order to serve customers by the June 2018. \$500,000 may be required as collateral for CAISO. The remaining \$625,000 is the "float" required for SBCCA to pay its monthly bills before the program generates enough internal cash to self-fund its working capital needs.

The finance plan in Chapter 7 provides additional detail regarding the City's expected capital requirements and general Program finances. All the capital required for start-up is provided through SBCCA's contracts with its service providers – through deferred fees and direct loans.

Related to the City's initial capital requirement, this amount is expected to cover staffing and contractor costs during startup and pre-startup activities, including direct costs related to public relations support, technical support, and customer communications. Requisite deposits and operating reserves are also reflected in the initial capital requirement, including the following items: 1) operating reserves to address anticipated cash flow variations; 2) deposit with the CAISO prior to commencing market operations (if required); 3) CCA bond (posted with the CPUC); and 4) SDGE service fee deposit, if required.

Operating revenues from sales of electricity will be remitted to SBCCA beginning approximately sixty days after the initial customer enrollments. This lag is due to the distribution utility's standard meter reading cycle of 30 days and a 30-day payment/collections cycle. SBCCA will need working capital to support electricity procurement and costs related to program management, which is included in the SBCCA's initial \$1,350 thousand capital requirement.

4.4 FINANCING PLAN

SBCCA's initial capital requirement will be met through credit supplied by the wholesale energy management services and data management services vendors. Solana Beach will pay back the principal and interest costs associated with the start-up funding via retail generation rates charged to SBCCA customers. It is anticipated that the start-up costs will be fully recovered through such customer

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generation rates within the first several years of operations. Other needs will be met using existing city staff and resources.

5 PROGRAM PHASE-IN

The plan is for Solana Beach will roll out its service offering to all eligible customers in a single phase at start-up. Given that there are only about 7200 eligible customer accounts within the City's boundaries, a one phase roll-out is reasonable and the most efficient way for SBCCA to serve customers beginning in June 2018. It is possible that NEM customers may be enrolled over multiple periods to mitigate the impact of SDGE NEM true-up treatment.

6 LOAD FORECAST & RESOURCE PLAN

6.1 INTRODUCTION

This Chapter describes the planned mix of electric resources that will meet the energy demands of SBCCA customers using a diversified portfolio of electricity supplies. Several overarching policies govern the resource plan and the ensuing resource procurement activities that will be conducted in accordance with the plan. These key policies are as follows:

- Develop a portfolio with more renewables and lower greenhouse gas emissions than SDGE
- Manage a diverse resource portfolio to increase control over energy costs and maintain competitive and stable electric rates.

The plan described in this section would accomplish the following:

- **Procure Competitive Supply:** Procure energy, RA, renewables and low-GHG supply through competitive processes in the open market using the enabling agreements and credit supplied by the City's wholesale services adviser.
- **Use Best Practices Risk Management:** Maintain rate competitiveness by using a dollar-cost-averaging approach with particular attention to the methodology used in the power charge indifference adjustment calculation. Use stochastic modeling to measure and achieve risk management objectives.
- **Achieve Environmental Objectives:** Procure supply to offer two distinct generation rate tariffs: 1) a voluntary 100% renewable energy offered to SBCCA customers on a price premium basis relative to the SBCCA default retail option; and 2) a default SBCCA service option that includes a proportion of renewable energy greater than SDGE.
- **Provide NEM Tariff:** Encourage distributed renewable generation in the local area through the offering of a net energy metering tariff that is more remunerative than SDGE's NEM tariff.

SBCCA will comply with regulatory rules applicable to California load serving entities. SBCCA will arrange for the scheduling of sufficient electric supplies to meet the demands of its customers. Solana Beach will adhere to capacity reserve requirements established by the CPUC and the CAISO designed to address uncertainty in load forecasts and potential supply disruptions caused by generator outages and/or transmission contingencies. These rules also ensure that physical generation capacity is in place to serve SBCCA's customers, even if there were a need for the SBCCA Program to cease operations and return customers to SDGE. In addition, the City will be responsible for ensuring that its resource mix contains sufficient production from renewable energy resources needed to comply with the statewide RPS mandate (33 percent renewable energy by 2020, increasing to 50 percent by 2030). The resource plan will meet or exceed all of the applicable regulatory requirements related to resource adequacy and the RPS.

6.2 RESOURCE PLAN OVERVIEW

To meet the aforementioned objectives and satisfy the applicable regulatory requirements pertaining to SBCCA's status as a California load serving entity, Solana Beach's resource plan includes a diverse mix of power purchases, renewable energy, and potentially, new energy efficiency programs, demand response, and distributed generation. A diversified resource plan minimizes risk and volatility that can occur from over-reliance on a single resource type or fuel source, and thus increases the likelihood of rate stability. The planned power supply is initially comprised of power purchases from third party electric suppliers and, in the longer-term, may include renewable generation assets owned and/or controlled by SBCCA.

Once the SBCCA Program demonstrates it can operate successfully, Solana Beach may begin evaluating opportunities for investment in renewable generating assets, subject to then-current market conditions, statutory requirements and regulatory considerations. Any renewable generation owned by SBCCA or controlled under long-term power purchase agreement with a proven public power developer, could provide a portion of Solana Beach's electricity requirements on a cost-of-service basis. Depending upon market conditions and, importantly, the applicability of tax incentives for renewable energy development, electricity purchased under a cost-of-service arrangement can be more cost-effective than purchasing renewable energy from third party developers, which will allow the SBCCA Program to pass on cost savings to its customers through competitive generation rates. Any investment decisions will be made following thorough environmental reviews and in consultation with qualified financial and legal advisors.

As an alternative to direct investment, Solana Beach may consider partnering with an experienced public power developer and could enter into a long-term (15-to-30 year) power purchase agreement that would support the development of new renewable generating capacity. Such an arrangement could be structured to reduce the SBCCA Program's operational risk associated with capacity ownership while providing its customers with all renewable energy generated by the facility under contract.

Solana Beach's indicative resource plan for the years 2017 through 2026 is summarized in the following table. Note that SBCCA's projections reflect a portfolio mix of renewable energy compliant with the annual RPS requirement and all other supply coming in the form of conventional resources or CAISO system power.

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Table 1: Proposed Resource Plan

City of Solana Beach Proposed Resource Plan (MWh) 2018-2027										
	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Demand (MWh)										
Retail Demand	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
Losses	2,079	3,099	3,130	3,162	3,193	3,225	3,257	3,290	3,323	3,356
Wholesale	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761
Supply (MWh)										
Renewable	22,120	32,971	33,300	33,633	33,970	34,309	34,652	34,999	35,349	35,702
System	24,199	36,070	36,430	36,795	37,163	37,534	37,910	38,289	38,672	39,058
Total Supply	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761
Net Position (MWh)	0	0	0	0	0	0	0	0	0	0

6.3 SUPPLY REQUIREMENTS

The starting point for Solana Beach’s resource plan is a projection of participating customers and associated electric consumption. Projected electric consumption is evaluated on an hourly basis, and matched with resources best suited to serving the aggregate of hourly demands or the program’s “load profile.” The electric sales forecast and load profile will be affected by Solana Beach’s plan to introduce the SBCCA Program to customers in one single phase and the degree to which customers choose to remain with SDGE during the customer enrollment and opt-out period. The City’s rollout plan and assumptions regarding customer participation rates are discussed below.

6.4 CUSTOMER PARTICIPATION RATES

Customers will be automatically enrolled in the SBCCA Program unless they opt-out during the customer notification process conducted during the 60-day period prior to enrollment and continuing through the 60-day period following commencement of service. The City anticipates an overall customer participation rate of approximately 90 percent of eligible SDGE bundled service customers, based on reported opt-out rates for already operating CCAs. It is assumed that customers taking direct access service from a competitive electricity provider will continue to remain with their current supplier.

The participation rate is not expected to vary significantly among customer classes, in part because the City will offer two distinct rate tariffs that will address the needs of cost-sensitive customers as well as the needs of both residential and business customers that prefer a highly renewable energy product. The assumed participation rates will be refined as Solana Beach’s public outreach and market research efforts continue to develop.

6.5 CUSTOMER FORECAST

Once customers enroll, they will be transferred to service by SBCCA on their regularly scheduled meter read date over an approximately thirty-day period. Approximately 240 service accounts per day will be

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transferred during the first month of service. The number of accounts anticipated to be served by Solana Beach at the end of the enrollment period is shown in Table 2.

Table 2: Total Customer Counts at the end of First Month of Operation, here presuming enrollment occurs in June, 2018.

	<u>Jun-18</u>
Residential	6,140
Commercial & Agriculture	1,116
Street Lighting & Traffic	9
Total	7,266

The City assumes that customer growth will generally offset customer attrition (opt-outs) over time, resulting in a relatively stable customer base (1% annual growth) over the noted planning horizon. While the successful operating track record of California CCA programs continues to grow, there is a relatively short history with regard to CCA operations, which makes it difficult to anticipate the actual levels of customer participation within the SBCCA Program. The City believes that its assumptions regarding the offsetting effects of growth and attrition are reasonable in consideration of the historical customer growth within the City and the potential for continuing customer opt-outs following mandatory customer notification periods. The following table shows the forecast of service accounts (customers) served by Solana Beach for each of the next ten years.

Table 3: Customer Accounts by Year

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Residential	6,140	6,201	6,263	6,326	6,389	6,453	6,518	6,583	6,649	6,715
Commercial & Agriculture	1,116	1,127	1,139	1,150	1,161	1,173	1,185	1,197	1,209	1,221
Street Lighting & Traffic	9	9	10	10	10	10	10	10	10	10
Total	7,266	7,338	7,412	7,486	7,561	7,636	7,713	7,790	7,868	7,946

6.6 SALES FORECAST

The City's forecast of kWh sales reflects the rollout and customer enrollment schedule shown above. Annual energy requirements is shown in Table 4.

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Table 4: Demand Forecast in MWh, 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Demand (MWh)										
Retail Demand	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
Losses	2,079	3,099	3,130	3,162	3,193	3,225	3,257	3,290	3,323	3,356
Wholesale	46,319	69,040	69,731	70,428	71,132	71,844	72,562	73,288	74,021	74,761

6.7 CAPACITY REQUIREMENTS

The CPUC’s resource adequacy standards applicable to the SBCCA Program require a demonstration one year in advance that SBCCA has secured physical capacity for 90 percent of its projected peak loads for each of the five months May through September, plus a minimum 15 percent reserve margin. On a month-ahead basis, Solana Beach must demonstrate 100 percent of the peak load plus a minimum 15 percent reserve margin.

A portion of SBCCA’s capacity requirements must be procured locally, from the San Diego – Imperial Valley local capacity area as defined by the CAISO. The City would be required to demonstrate its local capacity requirement for each month of the following calendar year. The local capacity requirement is a percentage of the total (SDGE service area) local capacity requirements adopted by the CPUC based on Solana Beach’s forecasted peak load. Solana Beach must demonstrate compliance or request a waiver from the CPUC requirement as provided for in cases where local capacity is not available.

SBCCA is also required to demonstrate that a specified portion of its capacity meets certain operational flexibility requirements under the CPUC and CAISO’s flexible resource adequacy framework.

The estimated forward resource adequacy requirements for 2017 through 2019 are shown in the following tables²:

² The figures shown in the table are estimates. Solana Beach’s resource adequacy requirements will be subject to modification due to application of certain coincidence adjustments and resource allocations relating to utility demand response and energy efficiency programs, as well as generation capacity allocated through the Cost Allocation Mechanism. These adjustments are addressed through the CPUC’s resource adequacy compliance process.

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Table 5: Forward Capacity Requirements (Total) for 2018-2020 in MW, presuming service starts in June, 2018

Month	<u>2018</u>	<u>2019</u>	<u>2020</u>
January		13.3	13.5
February		14.8	14.3
March		13.7	13.8
April		12.1	12.2
May		12.1	12.7
June	12.9	13.6	13.2
July	16.2	15.8	15.9
August	16.4	16.6	17.4
September	19.0	19.2	18.6
October	13.5	13.6	13.7
November	14.8	15.0	15.8
December	12.4	12.6	12.2

Solana Beach’s plan ensures that sufficient reserves will be procured to meet its peak load at all times. The projected SBCCA annual capacity requirements are shown in the following table:

Table 6: Annual Maximum Capacity Requirements 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Max Wholesale Demand	16.5	16.7	16.2	16.4	16.5	16.7	17.6	17.0	17.2	17.4
Reserve Requirement (15%)	2.5	2.5	2.4	2.5	2.5	2.5	2.6	2.6	2.6	2.6
Total Capacity Requirement	19.0	19.2	18.6	18.8	19.0	19.2	20.2	19.6	19.8	20.0

Local capacity requirements are a function of the SDGE area resource adequacy requirements and Solana Beach’s projected peak demand. SBCCA will need to work with the CPUC’s Energy Division and staff at the California Energy Commission to obtain the data necessary to calculate its monthly local capacity requirement. A preliminary estimate of SBCCA’s annual maximum local capacity requirement for the ten-year planning period ranges between 7-9 MW as shown in Table 7.

Table 7: Annual Maximum Local Capacity Requirements 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Total Capacity Requirement	16.5	16.7	16.2	16.4	16.5	16.7	17.6	17.0	17.2	17.4
Local Capacity (% of Total)	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
San Diego - IV (MW)	12.4	12.5	12.1	12.3	12.4	12.5	13.2	12.8	12.9	13.0

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The CPUC assigns local capacity requirements during the year prior to the compliance period; thereafter, the CPUC provides local capacity requirement true-ups for the second half of each compliance year.

SBCCA will coordinate with SDGE and appropriate state agencies to manage the transition of responsibility for resource adequacy from SDGE to Solana Beach during CCA program phase-in. For system resource adequacy requirements, SBCCA will make month-ahead showings for each month that SBCCA plans to serve load, and load migration issues would be addressed through the CPUC's approved procedures. Solana Beach will work with the California Energy Commission and CPUC prior to commencing service to customers to ensure it meets its local and system resource adequacy obligations through its agreement(s) with its chosen electric supplier(s).

6.8 RENEWABLES PORTFOLIO STANDARDS ENERGY REQUIREMENTS

6.8.1 Basic RPS Requirements

SBCCA will be required by law and ensuing CPUC regulations to procure a certain minimum percentage of its retail electricity sales from qualified renewable energy resources. For purposes of determining Solana Beach's renewable energy requirements, many of the same standards for RPS compliance that are applicable to the distribution utilities will apply to SBCCA.

California's RPS program is currently undergoing reform. On October 7, 2015, Governor Brown signed Senate Bill 350 ("SB 350"; De Leon and Leno), the Clean Energy and Pollution Reduction Act of 2015, which increased California's RPS procurement target from 33 percent by 2020 to 50 percent by 2030 amongst other clean-energy initiatives. Many details related to SB 350 implementation will be developed over time with oversight by designated regulatory agencies. However, it is reasonable to assume that interim annual renewable energy procurement targets will be imposed on CCAs and other retail electricity sellers to facilitate progress towards the 50 percent procurement mandate. For planning purposes, SBCCA has assumed straight-line annual increases (1.7 percent per year) to the RPS procurement target beginning in 2021, as the state advances on the 50 percent RPS. SBCCA will also adopt an integrated resource plan in compliance with SB 350. Solana Beach understands that various details related to this planning requirement have yet to be developed, and Solana Beach intends to monitor and participate, as appropriate, in pertinent proceedings to promote the preparation and submittal of a responsive planning document. Furthermore, SBCCA will ensure that all long-term renewable energy contracting requirements, as imposed by SB 350, will be satisfied through appropriate transactions with qualified suppliers and will also reflect this intent in ongoing resource planning and procurement efforts.

6.8.2 Solana Beach's Renewables Portfolio Standards Requirement

SBCCA's annual RPS procurement requirements, as specified under California's RPS program, are shown in Table 8.

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Table 8: Renewable Procurement Obligation and Target Percentages and Volumes 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Retail Load (MWh)	44,239	65,941	66,600	67,266	67,939	68,619	69,305	69,998	70,698	71,405
RPS % Target	29%	31%	33%	35%	36%	38%	40%	42%	43%	45%
RPS Obligation (MWh)	12,829	20,442	21,978	23,341	24,730	26,144	27,583	29,049	30,541	32,061
SBCCA % Target	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
SBCCA Target (MWh)	22,120	32,971	33,300	33,633	33,970	34,309	34,652	34,999	35,349	35,702

*Note: Specific details related to SB 350 implementation have yet to be identified. For purposes of this table, the City assumed a straight-line increase from California's 33 percent RPS procurement mandate in 2020 to California's new, 50 percent RPS procurement mandate in 2030.

6.9 PURCHASED POWER

Power purchased from power marketers, public agencies, generators, and/or utilities will be a significant source of supply during the first several years of SBCCA Program operation. Solana Beach will initially contract to obtain all of its electricity from one or more third party electric providers under one or more power supply agreements, and the supplier(s) will be responsible for procuring the specified resource mix, including the City's desired quantities of renewable energy, to provide a stable and cost-effective resource portfolio for the SBCCA Program.

6.10 RENEWABLE RESOURCES

SBCCA will initially secure necessary renewable power supply from its third party electric supplier(s). Solana Beach may supplement the renewable energy provided under the initial power supply contract(s) with direct purchases of renewable energy from renewable energy facilities or from renewable generation developed and owned by SBCCA. At this point in time, it is not possible to predict what projects might be proposed in response to future renewable energy solicitations administered by Solana Beach, unsolicited proposals or discussions with other agencies. Renewable projects that are located virtually anywhere in the Western Interconnection can be considered as long as the electricity is deliverable to the CAISO control area, as required to meet the Commission's RPS rules and any additional guidelines ultimately adopted by the City. The costs of transmission access and the risk of transmission congestion costs would need to be considered in the bid evaluation process if the delivery point is outside of SBCCA's load zone, as defined by the CAISO.

6.11 ENERGY EFFICIENCY

SBCCA does not currently anticipate running locally managed energy efficiency programs. In the future, should SBCCA expand its service territory it may become feasible to apply to become EE program administrators. In the meantime, SBCCA will support already existing energy efficiency efforts within its service territory.

7 FINANCIAL PLAN

This Chapter examines the monthly cash flows expected during the startup and customer phase-in period of the SBCCA Program and identifies the anticipated financing requirements. It includes estimates of program startup costs, including necessary expenses and capital outlays. It also describes the requirements for working capital and long-term financing for the potential investment in renewable generation, consistent with the resource plan contained in Chapter 6.

7.1 DESCRIPTION OF CASH FLOW ANALYSIS

The City's cash flow analysis estimates the level of capital that will be required during the startup and phase-in period. The analysis focuses on the SBCCA Program's monthly costs and revenues and the lags between when costs are incurred and revenues received.

7.2 COST OF CCA PROGRAM OPERATIONS

The first category of the cash flow analysis is the Cost of CCA Program Operations. To estimate the overall costs associated with CCA Program Operations, the following components were taken into consideration:

- Electricity Procurement;
- Ancillary Service Requirements;
- Exit Fees;
- Staffing and Professional Services;
- Data Management Costs;
- Administrative Overhead;
- Billing Costs;
- Scheduling Coordination;
- Grid Management and other CAISO Charges;
- CCA Bond and Security Deposit; and,
- Pre-Startup Cost Reimbursement.

7.3 REVENUES FROM CCA PROGRAM OPERATIONS

The cash flow analysis also provides estimates for revenues generated from CCA operations or from electricity sales to customers. In determining the level of revenues, the analysis assumes the customer phase-in schedule described herein, and assumes that Solana Beach charges a standard, default electricity tariff similar to the generation rates of SDGE for each customer class and an optional renewable energy tariff (with a renewable energy content that exceeds the SBCCA default retail option) at a premium reflective of incremental renewable power costs. More detail on SBCCA Program rates can be found in Chapter 8.

7.4 CASH FLOW ANALYSIS RESULTS

The results of the cash flow analysis provide an estimate of the level of capital required for the City to move through the CCA startup and phase-in periods. This estimated level of capital is determined by examining the monthly cumulative net cash flows (revenues from CCA operations minus cost of CCA operations) based on assumptions for payment of costs or other cash requirements (e.g., deposits) by Solana Beach, along with estimates for when customer payments will be received. This identifies, on a monthly basis, what level of cash flow is available in terms of a surplus or deficit.

The cash flow analysis identifies funding requirements in recognition of the potential lag between revenues received and payments made during the phase-in period. The estimated financing requirements for the startup and phase-in period, including working capital needs associated with the customer enrollments, was determined to be \$1,350,000. Out of the \$1,350,000 in capital requirements, \$225,000 is related to the implementation/startup efforts (i.e., rate setting, power procurement and contract negotiations, marketing and communications, regulatory compliance, CPUC bond, SDGE security deposit, etc.) in order to serve customers by June 2018. \$500,000 is required as collateral to CAISO. The other \$625,000 is the “float” required for SBCCA to pay its monthly bills before the program generates enough internal cash to self-fund its working capital needs. Working capital requirements peak soon after enrollment of all SBCCA customers.

7.5 CCA PROGRAM IMPLEMENTATION PRO FORMA

In addition to developing a cash flow analysis that estimates the level of working capital required to move Solana Beach through full CCA phase-in, a summary pro forma analysis that evaluates the financial performance of the CCA program during the phase-in period is shown in Table 9. The difference between the cash flow analysis and the CCA pro forma analysis is that the pro forma analysis does not include a lag associated with payment streams. In essence, costs and revenues are reflected in the month in which service is provided. All other items, such as costs associated with CCA Program operations and rates charged to customers remain the same. Cash provided by financing activities are not shown in the pro forma analysis, although payments for loan repayments are included as a cost item.

The results of the pro forma analysis is shown in Table 9. In particular, the summary of CCA program startup and phase-in addresses projected SBCCA Program operations for the period beginning January 2018 through December 2027. The City has also included a summary of Program reserves, which are expected to accrue over this same period.

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Table 9: Pro Forma including Reserves Accumulation 2018-2027

	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Revenues from Operations (\$)										
Electric Sales Revenues	3,223,816	4,626,572	4,412,264	4,500,761	4,707,547	4,826,713	4,843,288	4,890,499	5,103,581	5,352,349
Uncollected Accounts	(9,671)	(13,880)	(13,237)	(13,502)	(14,123)	(14,480)	(14,530)	(14,671)	(15,311)	(16,057)
Total Revenues	3,214,144	4,612,693	4,399,027	4,487,259	4,693,424	4,812,233	4,828,758	4,875,827	5,088,270	5,336,292
Cost of Operations (\$)										
Staffing & Consulting	183,333	191,667	150,000	150,000	150,000	100,000	100,000	100,000	100,000	100,000
Wholesale Services	140,667	217,330	223,850	230,565	237,482	244,607	251,945	259,503	267,288	275,307
Data Management Services	75,562	117,911	122,663	127,606	132,748	138,098	143,663	149,453	155,476	161,742
IOU Fees	130,527	46,711	47,650	48,608	49,585	50,581	51,598	52,635	53,693	54,772
Energy Procurement	2,318,193	3,365,799	3,486,395	3,639,177	3,780,781	3,846,792	3,998,861	4,154,902	4,316,046	4,483,554
Total Operations	2,848,282	3,939,417	4,030,557	4,195,956	4,350,596	4,380,079	4,546,068	4,716,494	4,892,503	5,075,375
Net Program Revenues	365,862	673,275	368,470	291,303	342,828	432,154	282,690	159,333	195,767	260,917
Cumulative Reserves	365,862	1,039,137	1,407,607	1,698,910	2,041,738	2,473,893	2,756,583	2,915,916	3,111,683	3,372,600

The surpluses achieved during the phase-in period serve to build SBCCA's net financial position and credit profile and to provide operating reserves for SBCCA in the event that operating costs (such as power purchase costs) exceed collected revenues for short periods of time.

7.6 SBCCA FINANCINGS

It is not anticipated that SBCCA will need any additional financing for its start-up activities. SBCCA arranged that its service providers will amortize their start-up costs over the subsequent months following when revenues begin flowing. In addition, the wholesale service provider will float the initial power supply costs for the CCA and allow SBCCA to repay over the first 12 months of service. Subsequent capital requirements will be self-funded from accrued SBCCA financial reserves.

7.7 RENEWABLE RESOURCE PROJECT FINANCING

Solana Beach may consider project financings for renewable resources, likely local wind and solar projects. These financings would only occur after a sustained period of successful SBCCA Program operation and after appropriate project opportunities are identified and subjected to appropriate environmental review.

In the event that such financing occurs, funds would include any short-term financing for the renewable resource project development costs, and would likely extend over a 20 to 30-year term. The security for such bonds would be the revenue from sales to the retail customers of Solana Beach.

8 RATE SETTING, PROGRAM TERMS AND CONDITIONS

8.1 INTRODUCTION

This Chapter describes the initial policies proposed for Solana Beach in setting its rates for electric aggregation services. These include policies regarding rate design, rate objectives, and provision for due process in setting Program rates. Program rates are ultimately approved by the Solana Beach City Council. The City would retain authority to modify program policies from time to time at its discretion.

8.2 RATE POLICIES

The City will establish rates sufficient to recover all costs related to operation of the SBCCA Program, including any reserves that may be required as a condition of financing and other discretionary reserve funds that may be approved by Solana Beach. As a general policy, rates will be uniform for all similarly situated customers enrolled in the SBCCA Program throughout the City.

The primary objectives of the rate setting plan are to set rates that achieve the following:

- Rate competitive tariff option (default service offering), including a proportionate quantity of renewable energy in excess of California’s prevailing renewable energy procurement mandate;
- Voluntary renewable energy supply option (renewable content greater than the SBCCA default retail service offering));
- Rate stability;
- Equity among customers in each tariff;
- Customer understanding; and
- Revenue sufficiency.

Each of these objectives is described below.

8.3 RATE COMPETITIVENESS

The primary goal is to offer competitive rates for electric services that SBCCA would provide to participating customers. For participants in the SBCCA standard Tariff, the goal would be for SBCCA Program rates to be initially one to five percent below, subject to actual energy product pricing and decisions of the City Council, similar generation rates offered by SDGE. For participants in the SBCCA Program’s voluntary renewable energy Tariff, the goal would be to offer the lowest possible customer rates with an incremental monthly cost premium reflective of the actual cost of additional renewable energy supply required to serve such customers.

Competitive rates will be critical to attracting and retaining key customers. In order for SBCCA to be successful, the combination of price and value must be perceived as superior when compared to the bundled utility service alternative. As planned, the value provided by the SBCCA Program will include a community focus and local investment and control.

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As previously discussed, the SBCCA Program will increase renewable energy supply to program customers, relative to the incumbent utility, by offering two distinct rate tariffs. The default tariff for SBCCA Program customers will be the standard tariff, which will increase renewable energy supply while maintaining generation rates that are generally comparable to SDGE's. The initial renewable energy content provided under SBCCA's standard tariff will at a minimum meet California's prevailing renewable energy procurement mandate. SBCCA will also offer its customers a voluntary renewable energy tariff, which will supply participating customers with renewable energy above the minimum RPS mandate and potentially up to 100 percent, at rates that reflect SBCCA's cost for procuring related energy supplies.

Participating qualified low- or fixed-income households, such as those currently enrolled in the California Alternate Rates for Energy ("CARE") program, will be automatically enrolled in the standard tariff and will continue to receive related discounts on monthly electricity bills through SDGE.

8.4 RATE STABILITY

SBCCA will offer stable rates by hedging its supply costs over multiple time horizons and by including renewable energy supplies that exhibit stable costs. Rate stability considerations may prevent SBCCA Program rates from directly tracking similar rates offered by the distribution utility, SDGE, and may result in differences from the general rate-related targets initially established for the SBCCA Program. Solana Beach plans to offer the most competitive rates possible after all Program operating costs are recovered and reserve targets are achieved.

8.5 EQUITY AMONG CUSTOMER CLASSES

Initial rates of the SBCCA Program will be set based on cost-of-service considerations with reference to the rates customers would otherwise pay to SDGE. Rate differences among customer classes will reflect the rates charged by the local distribution utility as well as differences in the costs of providing service to each class. Rate benefits may also vary among customers within the major customer class categories, depending upon the specific rate designs adopted by the City.

8.6 CUSTOMER UNDERSTANDING

The goal of customer understanding involves rate designs that are relatively straightforward so that customers can readily understand how their bills are calculated. This not only minimizes customer confusion and dissatisfaction but will also result in fewer billing inquiries to the SBCCA Program's customer service call center. Customer understanding also requires rate structures to reflect rational rate design principles (i.e., there should not be differences in rates that are not justified by costs or by other policies such as providing incentives for conservation).

8.7 REVENUE SUFFICIENCY

SBCCA Program rates must collect sufficient revenue from participating customers to fully fund the annual SBCCA operating budget. Rates will be set to collect the adopted budget based on a forecast of electric sales for the budget year. Rates will be adjusted as necessary to maintain the ability to fully recover all costs of the SBCCA Program, subject to the disclosure and due process policies described

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later in this chapter. To ensure rate stability, funds available in SBCCA's rate stabilization reserve may be used from time to time to augment operating revenues.

8.8 RATE DESIGN

SBCCA will generally match the rate structures from SDGE's standard rates to avoid the possibility that customers would see significantly different bill impacts as a result of changes in rate structures that would take effect following enrollment in the SBCCA Program.

8.9 NET ENERGY METERING

As planned, customers with on-site generation eligible for net metering from SDGE will be offered a net energy metering rate from SBCCA. Net energy metering allows for customers with certain qualified solar or wind distributed generation to be billed on the basis of their net energy consumption. Solana Beach's net energy metering tariff will apply to the generation component of the bill, and the SDGE net energy metering tariff will apply to the utility's portion of the bill. SBCCA plans to pay customers for excess power produced from net energy metered generation systems in accordance with the rate designs adopted by the City. The goal is to offer a higher payout for surplus generation than SDGE.

8.10 DISCLOSURE AND DUE PROCESS IN SETTING RATES AND ALLOCATING COSTS AMONG PARTICIPANTS

Initial program rates will be adopted by Solana Beach following the establishment of the first year's operating budget prior to initiating the customer notification process. Subsequently, SBCCA will prepare an annual budget and corresponding customer rates. Following the commencement of service, any proposed rate adjustment will be made to the City Council and ample time will be given to affected customers to provide comment on the proposed rate changes.

After proposing a rate adjustment, SBCCA will furnish affected customers with a notice of its intent to adjust rates, either by mailing such notices postage prepaid to affected customers, by including such notices as an insert to the regular bill for charges transmitted to affected customers, or by including a related message directly on the customer's monthly electricity bill (on the page addressing SBCCA charges). The notice will provide a summary of the proposed rate adjustment and will include a link to the SBCCA Program website where information will be posted regarding the amount of the proposed adjustment, a brief statement of the reasons for the adjustment, and the mailing address of the SBCCA Program to which any customer inquiries relative to the proposed adjustment, including a request by the customer to receive notice of the date, time, and place of any hearing on the proposed adjustment, may be directed.

9 CUSTOMER RIGHTS AND RESPONSIBILITIES

This Chapter discusses customer rights, including the right to opt-out of the SBCCA Program and the right to privacy of customer usage information, as well as obligations customers undertake upon agreement to enroll in the CCA Program. All customers that do not opt out within 30 days of the fourth enrollment notice will have agreed to become full status program participants and must adhere to the obligations set forth below, as may be modified and expanded by the City Council from time to time.

By adopting this Implementation Plan, the City will have approved the customer rights and responsibilities policies contained herein to be effective at Program initiation. The City retains authority to modify program policies from time to time at its discretion.

9.1 CUSTOMER NOTICES

At the initiation of the customer enrollment process, four notices will be provided to customers describing the Program, informing them of their opt-out rights to remain with utility bundled generation service, and containing a simple mechanism for exercising their opt-out rights. The first notice will be mailed to customers approximately sixty days prior to the date of automatic enrollment. A second notice will be sent approximately thirty days later. The City will likely use its own mailing service for requisite enrollment notices rather than including the notices in SDGE's monthly bills. This is intended to increase the likelihood that customers will read the enrollment notices, which may otherwise be ignored if included as a bill insert. Customers may opt out by notifying SBCCA using the SBCCA Program's designated telephone-based or Internet opt-out processing service. Should customers choose to initiate an opt-out request by contacting SDGE, they would be transferred to the SBCCA Program's call center to complete the opt-out request. Consistent with CPUC regulations, notices returned as undelivered mail would be treated as a failure to opt out, and the customer would be automatically enrolled.

Following automatic enrollment, at least two notices will be mailed to customers within the first two billing cycles (approximately sixty days) after SBCCA service commences. Opt-out requests made on or before the sixtieth day following start of SBCCA Program service will result in customer transfer to bundled utility service with no penalty. Such customers will be obligated to pay charges associated with the electric services provided by SBCCA during the time the customer took service from the SBCCA Program, but will otherwise not be subject to any penalty or transfer fee from SBCCA.

Customers who establish new electric service accounts within the Program's service area will be automatically enrolled in the SBCCA Program and will have sixty days from the start of service to opt out if they so desire. Such customers will be provided with two enrollment notices within this sixty-day post enrollment period. Such customers will also receive a notice detailing SBCCA's privacy policy regarding customer usage information. Solana Beach will have the authority to implement entry fees for customers that initially opt out of the Program, but later decide to participate. Entry fees, if deemed necessary, would aid in resource planning by providing additional control over the SBCCA Program's customer base.

9.2 TERMINATION FEE

Customers that are automatically enrolled in the SBCCA Program can elect to transfer back to the incumbent utility without penalty within the first two months of service. After this free opt-out period, customers will be allowed to terminate their participation but may be subject to payment of a Termination Fee, which Solana Beach reserves the right to impose, if deemed necessary. Customers that relocate within SBCCA's service territory would have SBCCA service continued at their new address. If a customer relocating to an address within SBCCA's service territory elected to cancel CCA service, the Termination Fee could be applied. Program customers that move out of Solana Beach's service territory would not be subject to the Termination Fee. If deemed applicable by Solana Beach, SDGE would collect the Termination Fee from returning customers as part of SBCCA's final bill to the customer.

If adopted, the Termination Fee would be clearly disclosed in the four enrollment notices sent to customers during the sixty-day period before automatic enrollment and following commencement of service. The fee could also be changed prospectively by Solana Beach subject to applicable customer noticing requirements. Other CCAs have adopted small or zero-dollar termination fees, and SBCCA would likely do the same.

Customers electing to terminate service after the initial notification period would be transferred to SDGE on their next regularly scheduled meter read date if the termination notice is received a minimum of fifteen days prior to that date. Such customers would also be liable for the nominal reentry fees imposed by SDGE (currently \$1.12) and would be subject to SDGE's current terms and conditions, including being required to remain on bundled utility service for a period of one year, as described in the utility CCA tariffs.

9.3 CUSTOMER CONFIDENTIALITY

Solana Beach will establish policies covering confidentiality of customer data that are fully compliant with the required privacy protection rules for CCA customer energy usage information, as detailed within Decision 12-08-045. SBCCA will maintain the confidentiality of individual customers' names, service addresses, billing addresses, telephone numbers, account numbers, and electricity consumption, except where reasonably necessary to conduct business of the SBCCA Program or to provide services to customers, including but not limited to where such disclosure is necessary to (a) comply with the law or regulations; (b) enable Solana Beach to provide service to its customers; (c) collect unpaid bills; (d) obtain and provide credit reporting information; or (e) resolve customer disputes or inquiries. SBCCA will not disclose customer information for telemarketing, e-mail, or direct mail solicitation. Aggregate data may be released at Solana Beach's discretion.

9.4 RESPONSIBILITY FOR PAYMENT

Customers will be obligated to pay SBCCA Program charges for service provided through the date of transfer including any applicable Termination Fees. Pursuant to current CPUC regulations, SBCCA will not be able to direct that electricity service be shut off for failure to pay SBCCA bills. However, SDGE has the right to shut off electricity to customers for failure to pay electricity bills, and SDGE Electric Rule 23 mandates that partial payments are to be allocated pro rata between SDGE and the CCA. In most circumstances, customers would be returned to utility service for failure to pay bills in full and customer deposits (if any) would be withheld in the case of unpaid bills. SDGE would attempt to collect any

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outstanding balance from customers in accordance with Rule 23 and the related CCA Service Agreement. The proposed process is for two late payment notices to be provided to the customer within 30 days of the original bill due date. If payment is not received within 45 days from the original due date, service would be transferred to the utility on the next regular meter read date, unless alternative payment arrangements have been made. Consistent with the CCA tariffs, Rule 23, service cannot be discontinued to a residential customer for a disputed amount if that customer has filed a complaint with the CPUC, and that customer has paid the disputed amount into an escrow account.

9.5 CUSTOMER DEPOSITS

Under certain circumstances, SBCCA customers may be required to post a deposit equal to the estimated charges for two months of CCA service prior to obtaining service from the SBCCA Program. A deposit would be required for an applicant who previously had been a customer of SDGE or SBCCA and whose electric service has been discontinued by SDGE or SBCCA during the last twelve months of that prior service arrangement as a result of bill nonpayment. Such customers may be required to reestablish credit by depositing the prescribed amount. Additionally, a customer who fails to pay bills before they become past due as defined in SDGE Electric Rule 11 (Discontinuance and Restoration of Service), and who further fails to pay such bills within five days after presentation of a discontinuance of service notice for nonpayment of bills, may be required to pay said bills and reestablish credit by depositing the prescribed amount. This rule will apply regardless of whether or not service has been discontinued for such nonpayment³. Failure to post deposit as required would cause the account service transfer request to be rejected, and the account would remain with SDGE.

³ A customer whose service is discontinued by Solana Beach is returned to SDGE generation service.

10 PROCUREMENT PROCESS

10.1 INTRODUCTION

This Chapter describes Solana Beach's initial procurement policies and the key third party service agreements by which the City will obtain operational services for the SBCCA Program. By adopting this Implementation Plan, the City will have approved the general procurement policies contained herein to be effective at Program initiation. Solana Beach retains authority to modify Program policies from time to time at its discretion.

10.2 PROCUREMENT METHODS

Solana Beach will enter into agreements for a variety of services needed to support program development, operation and management. It is anticipated that SBCCA will generally utilize Competitive Procurement methods for services but may also utilize Direct Procurement or Sole Source Procurement, depending on the nature of the services to be procured. Direct Procurement is the purchase of goods or services without competition when multiple sources of supply are available. Sole Source Procurement is generally to be performed only in the case of emergency or when a competitive process would be an idle act.

SBCCA will utilize a competitive solicitation process to enter into agreements with entities providing electrical services for the program. Agreements with entities that provide professional legal or consulting services, and agreements pertaining to unique or time sensitive opportunities, may be entered into on a Direct Procurement or Sole Source basis at Solana Beach's discretion. Authority for terminating agreements will generally mirror the authority for entering into such agreements.

10.3 KEY CONTRACTS

10.3.1 Electric Supply

Solana Beach has signed an agreement with a wholesale services provider whereby that provider will procure energy and capacity on SBCCA's behalf through competitive solicitation in the over-the-counter electricity markets. The provider has enabling agreements with over a hundred counterparties and will procure standard market products to hedge SBCCA's financial risk, meet its capacity obligations and achieve its environmental objectives. Typically, energy procurement can be done within hours while Resource Adequacy and Renewable Energy take several days. Procurement will commence once this implementation plan has been approved and the Solana Beach City Council has made the final determination to proceed to going live with the CCA.

Procurement will be an ongoing process in order to achieve desired levels of risk mitigation by dollar-cost-averaging supply costs. In addition, particular strategies will be employed to mitigate the risk of changes to the PCIA impacting SBCCA's rate competitiveness. Specifically, this entails procuring a certain amount of supply annually during the month of October when the PCIA market price benchmark is set for the coming year.

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SBCCA's wholesale services provider will also serve as the Scheduling Coordinator for scheduling loads, resources and Inter-SC trades into the CAISO market. In addition, the provider will be responsible for ensuring Solana Beach's compliance with all applicable resource adequacy and regulatory requirements imposed by the CPUC or FERC.

10.3.2 Data Management Contract

A data manager will provide the retail customer services of billing and other customer account services (electronic data interchange or EDI with SDGE, billing, remittance processing, and account management). The data management contract has been awarded to an experienced data management services provider.

The data manager is responsible for the following services:

- Data exchange with SDGE;
- Technical testing;
- Customer information system;
- Customer call center;
- Billing administration/retail settlements; and
- Settlement quality meter data reporting
- Reporting and audits of utility billing.

Utilizing a third party for account services eliminates a significant expense associated with implementing a customer information system. Such systems can impose significant information technology costs and take significant time to deploy. Separation of the data management contract from the energy supply contract provides the City with greater flexibility to change energy suppliers, if desired, without facing an expensive data migration issue.

11 CONTINGENCY PLAN FOR PROGRAM TERMINATION

11.1 INTRODUCTION

This Chapter describes the process to be followed in the case of SBCCA Program termination. By adopting the original Implementation Plan, the City will have approved the general termination process contained herein to be effective at Program initiation. In the unexpected event that the City would terminate the SBCCA Program and return its customers to SDGE service, the proposed process is designed to minimize the impacts on its customers and on SDGE. The proposed termination plan follows the requirements set forth in SDGE's tariff Rule 27 governing service to CCAs. The City retains authority to modify program policies from time to time at its discretion.

11.2 TERMINATION BY SBCCA

Solana Beach will offer services for the long term with no planned Program termination date. In the unanticipated event that the City decides to terminate the Program, the City Council would vote on Program termination.

SBCCA Implementation Plan

After any applicable restrictions on such termination have been satisfied, notice would be provided to customers six months in advance that they will be transferred back to SDGE. A second notice would be provided during the final sixty-days in advance of the transfer. The notice would describe the applicable distribution utility bundled service requirements for returning customers then in effect, such as any transitional or bundled portfolio service rules.

At least one year advance notice would be provided to SDGE and the CPUC before transferring customers, and SBCCA would coordinate the customer transfer process to minimize impacts on customers and ensure no disruption in service. Once the customer notice period is complete, customers would be transferred *en masse* on the date of their regularly scheduled meter read date.

Solana Beach will post a bond or maintain funds held in reserve to pay for potential transaction fees charged to the Program for switching customers back to distribution utility service. Reserves would be maintained against the fees imposed for processing customer transfers (CCASRs). The Public Utilities Code requires demonstration of insurance or posting of a bond sufficient to cover reentry fees imposed on customers that are involuntarily returned to distribution utility service under certain circumstances. The cost of reentry fees are the responsibility of the energy services provider or the community choice aggregator, except in the case of a customer returned for default or because its contract has expired. SBCCA will post financial security in the appropriate amount as part of its registration materials and will maintain the financial security in the required amount, as necessary.

If program termination occurred during the period and under the terms of the initial services contracts, any financial obligations for services and power procurement incurred by SBCCA that remain after discontinuation of service would fall upon the “lockbox” that will be established to protect the City’s general fund from SBCCA’s liabilities.

12 APPENDIX A: CITY OF SOLANA BEACH RESOLUTION No. 2017-163 (ADOPTING IMPLEMENTATION PLAN)

RESOLUTION 2017 - 163

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, DIRECTING THE CITY MANAGER TO SUBMIT THE APPROVED COMMUNITY CHOICE AGGREGATION IMPLEMENTATION PLAN REQUIRED BY PUBLIC UTILITIES CODE SECTION 366.2(C)(3)

WHEREAS, the City of Solana Beach is pursuing alternative energy solutions in hopes of improving the current and future environmental and economic conditions of its community and region; and

WHEREAS, the City has been actively investigating options to procure and provide electric power to its citizens with the intent of achieving greater local involvement over the provision of electric services, increasing the renewable energy percentage content and promoting competitively priced renewable energy; and

WHEREAS, a technical study concluded that a Community Choice Aggregation Program would serve the City and provide benefits to include the use of renewable energy at or above the required Renewable Portfolio Standard level while providing competitive rates and economic benefits to the City; and

WHEREAS, an Implementation Plan and Statement of Intent was drafted and presented to the Solana Beach City Council at a duly noticed public hearing for its consideration and adoption on November 15, 2017; and

WHEREAS, pursuant to Public Utilities Code Section 366.2(c)(12)(A), the City Council introduced Ordinance No. 483 electing to implement a community choice aggregation program within the City's jurisdiction after having conducted a noticed public hearing and considering all materials and evidence presented.

SBCCA Implementation Plan

NOW, THEREFORE, the City Council of the City of Solana Beach, California, resolve as follows:

1. That the above recitations are true and correct.
2. That the Solana Beach Implementation Plan and Statement of Intent is approved.
3. That the City Manager is directed to file the Implementation Plan and Statement of Intent with the California Public Utilities Commission for certification.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSTAIN: Councilmembers –
ABSENT: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk

RESOLUTION 2017 - 163

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MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: City Manager's Office
SUBJECT: FY 2017-18 Community Grant Program Requests

BACKGROUND:

On May 4, 2004, the City Council adopted Resolution No. 2004-68 approving Council Policy No. 14 establishing the Community Grant Program ("Grant Program") and Application Guidelines for the Grant Program.

At the September 27, 2017 City Council Meeting, the City Council authorized the Fiscal Year (FY) 2017-18 Community Grant Program. The FY 2017-18 Adopted Budget contains an appropriation in the amount of \$25,000 to fund the Community Grants Program. The City receives a combined \$10,000 in contributions from EDCO and Waste Management as part of their community enhancement efforts, which is used to fund a portion of this program.

Following the approval of the FY 2017-18 Community Grant Program, Staff distributed a request for proposals for community grants. Staff utilized the City's "e-blast" notification system, social media accounts (Facebook and Twitter), the City's website and City Council Mayor's Announcements to notify the community that the request for proposals application period had started. The deadline for submission was October 31, 2017.

This item is before the City Council to review the grant applications received and to allow the applicants to make a brief presentation regarding their proposed programs.

DISCUSSION:

The community grant criteria approved by the City Council on September 27, 2017 was incorporated into the application guidelines of the "Request for Financial Assistance" document for FY 2017-18 (Attachment 1). The highlights of the application are as follows:

Application Criteria

1. Preferences will be given towards non-profits that provide services/goods to Solana Beach groups or individuals with special economic needs that are not being met in the

CITY COUNCIL ACTION: _____

economic environment. These can be non-profits whose funding has been reduced or eliminated and are unable to serve the populations in need.

2. A non-profit 501(c)3, community-based organization serving the Solana Beach community.
3. Fair and justifiable program costs (budget required).
4. Collaboration/Partnerships.
5. Leverage of matching funds/resources.
6. Applicants must submit a financial conditions (Balance Sheet) statement as well as the applicant(s) revenue/expenditure statements and tax return statements for the current and prior operating year.
7. Completion of project between the date of grant approval through December 31, 2018.
8. Grant funds are only intended for non-governmental agencies.

Qualifying Criteria for Financial Assistance

The main qualifying criteria for financial assistance under Council Policy No. 14 are summarized below:

Non-Profit Organizations

Nonprofit organizations which have officially filed as a nonprofit with the State of California and have a 501(c)3 certification must attach a copy of their current year non-profit certification form along with a Request for Financial Assistance Application. For organizations that are "recognized" nonprofits within the community but have never formally filed with the State, the City Council, at its discretion, may consider their application. It has been the practice in the past to allow applicants to submit a letter from either the Internal Revenue Service (IRS) or the California State Board of Equalization declaring the entity's tax-exempt status for the 501c3 certification.

Threshold Qualifying Criteria

Request for Financial Assistance Applications are limited to secular non-governmental, nonprofit organizations serving the Solana Beach community. Excluded entities include the following: County of San Diego, municipal organizations, special or water districts, school districts, schools (but not their supporting organizations) and private individuals. Applicants should have a State of California non-profit status certification or be a recognized Solana Beach "nonprofit" service, civic or youth organization.

Grant Requests FY 2017-18

The following ten (10) applications were received by the City during the solicitation period (in alphabetical order).

Applicant	Amount Requested
American Association of University Women	\$1,000 - \$5,000
Assistance League Rancho San Dieguito	\$3,000
Boys and Girls Club of San Dieguito	\$5,000
Casa De Amistad	\$5,000
Community Resource Center	\$5,000
La Colonia de Eden Gardens	\$5,000
North Coast Repertory Theatre	\$5,000
North County Immigration & Citizenship Center	\$5,000
Reality Changers	\$5,000
Solana Beach Civic and Historical Society	\$5,000
Total	\$44,000 - \$48,000

The complete applications were included in a separate binder that was distributed to Council along with the agenda packet prior to the City Council meeting.

Santa Fe Christian (SFC) Schools Cooperation

Six years ago, the City and SFC created a unique partnership to more efficiently and effectively assist the non-profit organizations that specifically serve the Eden Gardens community. This partnership, which has included a \$15,000 contribution from SFC in past years, has allowed for both the City and SFC to maximize its limited resources to provide the most benefit for this underserved population. Staff has reached out to SFC to inquire if they will be partnering with the City again this year but as of the time of writing this Staff Report, the City has not heard back whether or not SFC will be participating again this year. Once the City receives confirmation of whether or not SFC will participate again this year, Staff will relay the information to the Council.

CEQA COMPLIANCE STATEMENT:

Not a project as defined by CEQA.

FISCAL IMPACT:

The FY 2017-18 Adopted Budget contains an appropriation in the amount of \$25,000 to be used to fund community grants, subject to the City Council's discretion. All fiscal appropriations are budgeted under the City Council budget unit 001-5000-5100-6532 – Contribution to Other Agencies.

In past years, the Council has authorized an additional \$5,000 from the Reserve Public Arts Account to be used to fund the North Coast Repertory Theatre grant application.

WORK PLAN: N/A

OPTIONS:

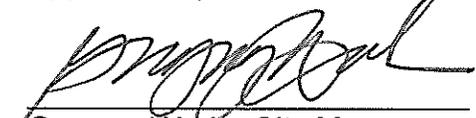
- Approve Staff recommendation
- Approve Staff recommendation with modifications
- Deny Staff recommendation and provide direction

DEPARTMENT RECOMMENDATION:

Staff recommends that the City Council receive the Staff Report, Community Grant applications and consider the presentations from the grant applicants. This item will come back to the City Council at the December 13, 2017 City Council Meeting for Council's grant allocations.

CITY MANAGER RECOMMENDATION:

Approve Department Recommendation



Gregory Wade, City Manager

Attachments:

1. City of Solana Beach Community Grant Program "Request for Financial Assistance" FY 2017 -18
2. Grant Applications (Separate Binder)

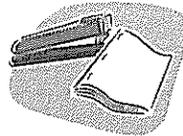


**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18**

APPLICATION GUIDELINES

The City of Solana Beach is soliciting grant applications until **5:00 p.m., Tuesday, October 31, 2017**. The City Council has a total of \$25,000 available for community organizations. A maximum of two grant applications may be submitted per community organization. Grants will be awarded with a maximum award of \$5,000.

Request for Grants are limited to non-governmental, nonprofit organizations serving the Solana Beach community. Excluded entities include the following: County of San Diego, Municipal Organizations, Special or Water Districts, school districts or schools (but not their supporting organizations), and private individuals.



Grant Application & Documents Required

Applicants must complete the attached application form and provide the following documents:

- Summary of organization's (overall) budget
- Proposed program budget detailing costs which are fair and reasonable.
- Financial Statements including the Balance Sheet and Revenue/Expenditure Statement, and the Tax Statements filed for the prior year.
- W-9 Form
- Calif. Nonprofit Corp. certificate or California Certification Number

○ **Non-Profit Organizations**

Nonprofit organizations which have officially filed as a nonprofit with the State of California must attach a copy of its current year 501 (c) 3 nonprofit certification form. For organizations that are "recognized" nonprofits within the community but have never formally filed with the State, the City Council at its discretion may consider their application. Note, any decision made by City Council is final in regards to the community grants process.

Program Requirements:

- Must serve the residents of Solana Beach.
- Preferred to be a new program or one that provides a new or unique aspect to an existing program. Funds are available as one-time seed-money to augment a community program.

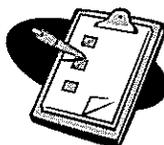
Application Submittal and Deadline: NO LATER THAN 5:00 p.m. Tuesday, October 31, 2017

Completed forms should be received at City of Solana Beach, Office of the City Manager, 635 South Highway 101, Solana Beach, CA. 92075, Attn: Community Grants Program. The City will

accept applications via e-mail as well.

Email applications should be sent to dking@cosb.org and copied to pletts@cosb.org.

Please contact Dan King, Assistant City Manager, at (858) 720-2477 if you need additional information.



Applications will be judged and selected on the following criteria:

1. Preferences will be given towards non-profits that provide services/goods to Solana Beach groups or individuals with special economic needs that are not being met in the economic environment. These can be non-profits whose funding has been reduced or eliminated and are unable to serve these populations in need.
2. Program costs that are fair and justifiable.
3. Program originality (new and unique).
4. Consideration may be given to applications that collaborate or partner with other organizations.
5. Consideration may be given to applications which receive matching funds from other organizations.
6. Consideration may be given to applications as decided by the City Council.
7. Information provided on application will be used to review prior grant management and performance history. Significant non-compliance issues will be taken into consideration and may affect future funding decisions by the City Council.

Grant Award and Expenditures:

The City Council, at its discretion, may modify the grant award to qualified recipients based on qualifying criteria, number of qualified applicants received, and purpose of request to meet areas as enumerated by the City Council that benefit the Solana Beach community. The total of all grant awards may not exceed \$25,000.

Grants will be funded after the approval of the awards by the City Council. Expenses must be directly related to services or materials of proposed activity during the grant award period (Date of Grant Approval through December 31, 2018). Grantees will be required to maintain records to support claimed expenditures and project accomplishments. Funds for the proposed project must not be used to replace or offset funding sources normally available for any portion of the project, nor be used by the applicant to fund/supplement its own monetary giving.

Final Report and Receipts:

The City Manager's Office will review submitted copies of paid receipts/invoices and a written report to ensure that funds were spent in compliance with the approved application. Applicant(s) will be required to reimburse the City of Solana Beach all inappropriately spent funds.



PROGRAM FY 2017-18 KEY DATES:

- October 2, 2017** Distribute Grant Program Application, have it available and solicit for applications.
- October 31, 2017** **DEADLINE for Request for Financial Assistance Applications (5:00pm)**. The City Manager's Office will review each application and make recommendations based upon:
- 1) Completed application;
 - 2) Clear indication of the grant amount requested;
 - 3) Receipt of grant application before the deadline WITH attachments;
 - 4) Benefit to Solana Beach community and conformity with threshold criteria.
- November 15, 2017** **First Council Review**: All eligible grant applications for Fiscal Year 2017-18 will be considered by City Council. Review and public comment/presentations will be accepted.
- December 13, 2017** **Final Council Review**: Council makes decision and approves grant recipients. The City Manager will be directed to issue awards to recipients. Announcement of grant award recipients is made to community via public notification.
- December 1, 2018** Letter will be sent to FY 2017-18 grant recipients reminding them to submit their reports and copies of receipts by October 31, 2018. (Exception to the 10/31/18 completion date can be made with proof of good cause.)
- December 31, 2018** All FY 2017-18 grant recipients must submit copies of paid receipts/invoices and written report, that includes the number of citizens served and outcome of grant funded activity. If no paid receipts/invoices are received, recipient will be required to immediately reimburse City of Solana Beach grant funds.

All grant recipients' final reports will be submitted before the City Council for approval of expenditures. If determination is made that funds were expended inappropriately, Council will direct Grant recipients to reimburse the City of Solana Beach for the designated amount of award.



SOLANA BEACH

COMMUNITY GRANTS

FISCAL YEAR 2017-2018



CITY OF SOLANA BEACH COMMUNITY GRANT AWARD PROGRAM

1. AMERICAN ASSOCIATION OF UNIVERSITY WOMEN	\$5,000.00
2. ASSISTANCE LEAGUE OF RANCHO SAN DIEGUITO	\$3,000.00
3. BOYS AND GIRLS CLUBS OF SAN DIEGUITO	\$5,000.00
4. CASA DE AMISTAD	\$5,000.00
5. COMMUNITY RESOURCE CENTER	\$5,000.00
6. LA COLONIA DE EDEN GARDENS	\$5,000.00
7. NORTH COAST REPERTORY THEATER	\$5,000.00
8. NORTH COUNTY IMMIGRATION & CITIZENSHIP CENTER	\$5,000.00
9. REALITY CHANGERS	\$5,000.00
10. SOLANA BEACH CIVIC & HISTORICAL SOCIETY	\$5,000.00



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: American Assoc. of University Women, Del Mar-Leucadia Branch

Mailing Address: P.O. Box 543

City Solana Beach State CA Zip 92075

Contact Person: Dr. Andrea Henne, Co-President

Daytime Phone: 858-481-6572

Evening Phone: 858-361-5002

Email address: president@aauwdml.org

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 01-0563236
3. Has your organization received financial assistance from the City before?
Yes No
If yes, what activities and which fiscal year? _____
4. Amount requested for FY 2017-18 \$ 1,000.00 to \$5,000.00
5. Proposed Total Program Costs: It costs \$1,000.00 per student for AAUW's Tech Trek STEM Camp (<http://techtrek-sandiego.aauw.net/>) to cover the costs of educational materials, field trips, housing and meals for the one-week camp at UCSD. Our goal for 2017-18 is to fund 8-10 students. Please see Tech Trek budget item on attached budget document.
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: Tech Trek STEM (Science, Technology, Engineering, Math) Program

7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:

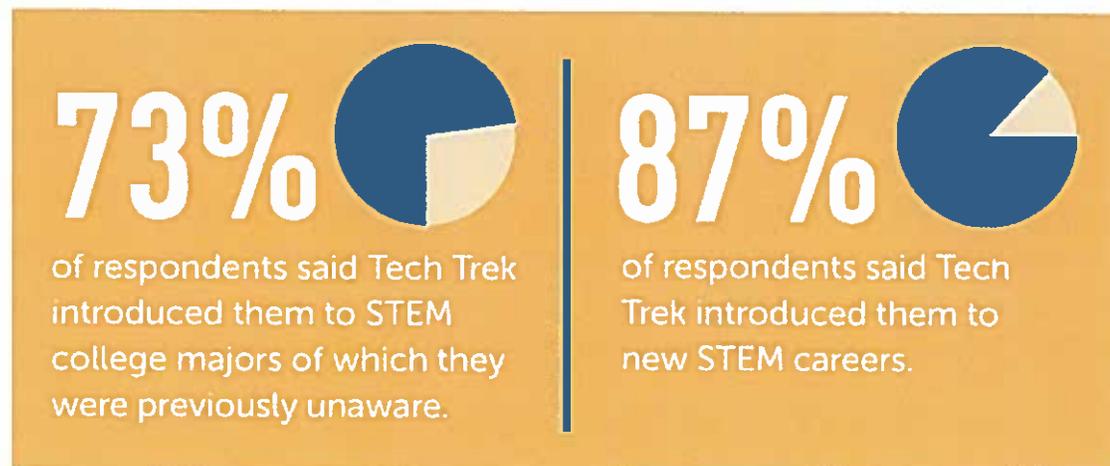
The project that we are seeking support through the Solana Beach Community Grant Program is to promote education in STEM (Science, Technology, Engineering and Math) for middle-school girls in the community through AAUW's Tech Trek program.

We are a local branch of the American Association of University Women. Our branch was founded in 1955 to serve the San Diego North County coastal communities of La Costa, Leucadia, Encinitas, Olivenhain, Cardiff-by-the-Sea, Rancho Santa Fe, Solana Beach, Del Mar, and Carmel Valley.

AAUW of California member Marie Wolbach founded Tech Trek in 1998. Since then, AAUW has helped change girls' lives through Tech Trek, an experiential summer camp backed by research and designed to make STEM exciting and accessible to girls in middle school--the age when research shows girls' participation in these fields drops. For many girls, the weeklong camp sparks their curiosity and places them on a path toward success.

A 2013 survey of AAUW Tech Trek alumnae from California demonstrates the program's lasting effects on many levels, including interest and confidence in STEM fields, decision to pursue those fields, and future career plans.

AAUW Tech Trek alumnae surpass the national average in most advanced math and science courses: Girls learn about STEM careers that align with their passions and help them solve big problems.



Source: <http://www.aauw.org/what-we-do/stem-education/tech-trek/>

8. Estimated number of S.B. residents to be served by proposed program:_____

8-10 local middle school students

9. Program Dates/Location:

Tech Trek STEM Camp is scheduled for one week in July 2018 at the UCSD Campus

10. Anticipated Program Objectives or Accomplishments:

Whether it's building rockets or extracting DNA, campers are involved in daily math or science classes and hands-on workshops.

Girls see STEM in action. A daylong field trip and professional meet-and-greet offer girls an up-close view of a STEM career and a way to connect with role models.

Girls see themselves going to college — literally. Campers spend a week on a local college or university campus, so envisioning themselves in college four years later is easy.

The camp is cutting edge. Every camp takes advantage of the latest technology. Developed by a group of leading experts, the course will teach girls the foundation of real-world tech skills for future tech professions.

Local support for Solana Beach middle schools. AAUW members work with teachers, parents, campuses, and local STEM professionals to personalize the program for the community.

The methods are proven. Girls learn how to perform basic coding in an MIT-developed mobile app inventor course.

Supports Diversity. Thanks to sponsors and donors, we can ensure that girls from a range of backgrounds are able to attend.

Your grant funding will support these bright young women as they pursue their dreams.

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

The City of Solana Beach's financial contribution to our Tech Trek STEM camp activity will be acknowledged in several ways to express our gratitude. Tech Trek sponsors will be recognized on our website at <http://delmarleucadia-ca.aauw.net/programs/techtrek/>, in our *Coastline* newsletter that is distributed quarterly to the branch members, in articles published in the local newspapers, on our Facebook page at <https://www.facebook.com/AAUWDML/>, and at our annual Tech Trek program in May 2018, where the families and community members are invited.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

If awarded this grant, matching funds will be provided by our branch treasury through fund-raising activities and by AAUW member donations to sponsor the Tech Trek STEM program so that we are able to send 8-10 students.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Yes, AAUW members, parents and teachers volunteer at the Tech Trek STEM camp to help reduce the expenses.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

If awarded partial funding, we will make our best effort to send as many students as possible. Our goal of sending 8-10 girls, at a total cost of \$8,000.00 - \$10,000.00 may need to be scaled back, but we will still move forward with supporting as many students as we can.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

Lindrea Henne

October 17, 2017

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

Net Worth	4/19/2012	3/20/2013	4/4/2014	4/4/2015 x/x/2016	5/10/2017
Assets					
Operating Account	\$15,415.50	\$13,765.57	\$11,029.52	\$11,469.18	\$17,707.23
Funds					
Amazon Fund			-\$29.81	\$1,066.99	\$1,062.89
Angel Fund			\$574.00	\$447.00	\$446.00
LAF Fund	\$3,319.07	\$2,019.07	\$459.07	\$1,144.08	
AAUW Fund					\$1,332.98
Misc Funds					\$472.02
Scholarship Fund	\$4,700.80	\$75.80	\$0.00	\$1,381.58	\$1,841.63
Tech Trek Fund	\$886.19	\$166.19	\$0.00	\$3,691.58	\$2,089.46
Total	\$24,321.56	\$16,026.63	\$12,032.78	\$19,200.41	\$22,862.75

2012-2015 Betty's #s

	2015-2016	2016-2017	2017-2018	2017-2018	2017-2018	
	Actual	Budget	Actual	Budget	Actual	col. 7
Operating Income:						
Operating Fund Carryover	\$ 12,663.88					
Nat membership Income (100 mbr)	\$ 6,139.50	\$ 2,300.00	\$ 2,078.98	\$ 2,300.00	\$ 714.00	
Room reimburseal			\$ 455.00			
Misc. Income (Seacrest/dona/inter)	\$ 1,151.54	\$ 930.00	\$ 510.94	\$ 230.00	\$ 0.55	
Installation Lunch	\$ 745.00		\$ 1,394.85			
Event income 3/12/16	\$ 3,160.00					
Angel Fund carryover/income	\$ 446.00		\$ 446.00		\$ 446.00	subtract amount
Amazon	\$ 1,114.02	\$ 1,100.00	\$ 1,416.91	\$ 1,200.00	\$ 349.44	
Total Income	\$ 25,419.94	\$ 4,330.00	\$ 6,302.68	\$ 3,730.00	\$ 1,509.99	
Operating Expense:						
Angel Fund	\$ 1.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 22.00	
Branch Directory	\$ 220.46	\$ 225.00	\$ 222.32	\$ 250.00	\$ 248.47	
CA Ally General Annual Registration	\$ 25.00	\$ 25.00	\$ 0.00	\$ 25.00	\$ 0.00	
Incorporation Taxes	\$ 20.00	\$ 20.00	\$ 0.00	\$ 20.00	\$ 0.00	
Insurance through AAUW CA	\$ 390.56	\$ 400.00	\$ 370.00	\$ 400.00	\$ 378.76	
Interbranch Dues	\$ 20.00	\$ 70.00	\$ 70.00	\$ 70.00	\$ 70.00	
Mailbox	\$ 86.00	\$ 86.00	\$ 90.00	\$ 90.00	\$ 0.00	
Membership dues passed on	\$ 3,995.00					
Misc. Expense	\$ 0.00	\$ 49.00	\$ 81.40	\$ 90.00	\$ 0.00	
Philanthropy (AAUW Fund Donation)	\$ 1,500.00	\$ 750.00	\$ 0.00	\$ 0.00	\$ 0.00	
Registration Fees (Migs/Convention)	\$ 299.00	\$ 700.00	\$ 549.00	\$ 600.00	\$ 0.00	
President Expenses	\$ 7.56	\$ 75.00	\$ 0.00	\$ 75.00	\$ 0.00	
Membership Expenses	\$ 49.26	\$ 100.00	\$ 0.00	\$ 200.00	\$ 0.00	
Programs	\$ 372.34	\$ 500.00	\$ 100.34	\$ 480.00	\$ 0.00	
Programs Meeting Room Fees	\$ 185.00	\$ 700.00	\$ 940.00	\$ 840.00	\$ 735.00	
Event 3/12/16	\$ 1,199.64					
Programs Installation Branch	\$ 1,002.56	\$ 100.00	\$ 1,473.97	\$ 150.00	\$ 0.00	
Public Policy	\$ 47.62	\$ 100.00	\$ 23.80	\$ 65.00	\$ 0.00	
Treasurer	\$ 107.46	\$ 150.00	\$ 48.55	\$ 75.00	\$ 12.79	
Marketing	\$ 119.88	\$ 230.00	\$ 157.52	\$ 250.00	\$ 41.95	
Social Events	\$ 0.00	\$ 50.00	\$ 65.00	\$ 50.00	\$ 0.00	
Total Expense	\$ 9,648.34	\$ 4,330.00	\$ 4,191.90	\$ 3,730.00	\$ 1,508.97	

	2015-2016	2016-2017	2016-2017	2016-2017	2017-2018	2017-2018
	Actual	Budget	Actual	Budget	Actual	Actual
General (non-event, donations, fundraisers, etc)		\$ 7,500.00	\$ 14,647.80	\$ 11,000.00	\$ 14,647.80	\$ 14,647.80
Tech Trek	\$8,251.00					
College scholarship	\$2,655.00					
Undesignated	\$9,530.00					
Besos Concert	\$0.00	\$0	\$ 2,058.00	\$0		
AAUW Fund (branch contribution)	\$1,935.00	\$ 750.00	\$ 50.00	\$ -	\$ 50.00	\$ 50.00
AAUW Fund (carryover)	\$1,144.08	\$ 1,440.00	\$ 1,440.00	\$ 1,266.98	\$ 1,266.98	\$ 1,266.98
College Scholarships (carryover)	\$3,686.84	\$ 3,240.00	\$ 3,240.00	\$ 1,711.63	\$ 1,711.63	\$ 1,711.63
Tech Trek (carryover from 2015/6)	\$4,328.25	\$ 3,370.00	\$ 3,370.00	\$ 2,316.46	\$ 2,316.46	\$ 2,316.46
Total Income	\$31,530.17	\$ 16,300.00	\$ 24,805.80	\$ 16,295.07	\$ 19,992.86	
Philanthropic Expense:						
AAUW Fund (Named Gift Honorees + CA Annual Fund Assessment)	\$1,640.01	\$2,350.00	\$533.02	\$1,600.00	\$533.02	\$533.02
College Scholarships (3 @ \$1500 + \$200)	\$3,100.00	\$4,700.00	\$7,665.26	\$5,420.07	\$0.00	\$0.00
Tech Trek (10 campers @ \$900 + \$250)	\$9,260.13	\$9,250.00	\$9,267.43	\$9,275.00	\$0.00	\$0.00
General (non-event, donations, fundraisers, etc)	\$9,530.05					
Besos Concert			\$1,980.00			
Total Expense	\$23,530.19	\$16,300.00	\$19,445.70	\$16,295.07	\$533.02	
Event: Tech Trek						
Tech Trek (carryover from last year)			\$ 3,370.00		\$ 2,316.46	\$ 2,316.46
Tech Trek (funds raised this year)			\$ 8,213.88	\$ 2,316.46	\$ -	\$ -
subtotal		\$ 11,583.88	\$ 9,000.00	\$ 2,316.46	\$ -	\$ -
Tech Trek scholarships given			\$267.42		\$0.00	\$0.00
other Tech Trek expenses			\$ 2,316.46		\$ 2,316.46	\$ 2,316.46
Total						
Event: College Scholar						
College Scholarship (carryover)			\$ 3,240.00		\$ 1,711.63	\$ 1,711.63
College Scholarship (this year funds)			\$ 6,136.88	\$ 1,811.63	\$ 100.00	\$ 100.00
subtotal	\$0.00	\$ 9,376.88	\$ 7,500.00	\$ 1,811.63	\$ -	\$ -
College Scholarships given			\$165.26		\$0.00	\$0.00
other college scholarship expenses			\$ 1,711.63		\$ 1,811.63	\$ 1,811.63
Total						

Operating Expenses

2017/2018

Check #	Date	PAYEE	PURPOSE	CATEGORY	AMOUNT	COMMENTS
1274	7/24/17	dummy line			\$0.00	
1275	7/25/17	City of Encinitas Linda Quinby	initial payment for room rentals branch domain names	Misc. Expense Programs Meeting Room Fees Marketing	\$735.00 \$24.00	
1276	7/25/17	branch	take \$22 from Angel Fund for Cheryl Aiden	Angel Fund	\$22.00	
1278	8/29/17	Linda Quinby	branch bookmarks	Marketing	\$17.95	
1279	9/20/17	Del Mar Blue Print	print directory	Branch Directory	\$248.47	next year raise budget to \$275
1281	9/20/17	AAUW	liability insurance	Insurance through AAUW CA	\$378.76	same check with funds assess (total \$443.76)
1282	10/1/17	AAUW/SDIBC	interbranch annual assessment	Interbranch Dues	\$70.00	
	10/1/17	Katherine White	stamps (\$9.80 and envelopes)	Treasurer	\$12.79	
		end line				
			Total		\$1,508.97	
			Cost by Category:			Comments
			Angel Fund		\$22.00	
			Branch Directory		\$248.47	
			CA Atty General Annual Registration		\$0.00	
			Incorporation Taxes		\$0.00	
			Insurance through AAUW CA		\$378.76	
			Interbranch Dues		\$70.00	
			Mailbox		\$0.00	
			Misc. Expense		\$0.00	
			Philanthropy (AAUW Fund Donation)		\$0.00	
			Registration Fees (Mtg/Convention)		\$0.00	
			President Expenses		\$0.00	
			Membership Expenses		\$0.00	
			Programs		\$0.00	
			Programs Meeting Room Fees		\$735.00	
			Programs Installation Branch		\$0.00	
			Public Policy		\$0.00	
			Treasurer		\$12.79	
			Marketing		\$41.95	
			Social Events		\$0.00	
			Sum by Category		\$1,508.97	

DO NOT TOUCH THESE CELLS BELOW

Angel Fund
Branch Directory
CA Atty General Annual Registration
Incorporation Taxes
Insurance through AAUW CA
Interbranch Dues
Mailbox
Misc. Expense
Philanthropy (AAUW Fund Donation)
Registration Fees (Migs/Convention)
President Expenses
Membership Expenses
Programs
Programs Meeting Room Fees
Programs Installation Brunch
Public Policy
Treasurer
Marketing
Social Events

2017/2018

Operating Income

Check Date	Deposit Date	FROM	PURPOSE	CATEGORY	AMOUNT	COMMENTS
7/23/17	7/20/17	AAUW branch	dummy line	Miscellaneous Income	\$0.00	
7/11/17	7/25/17	Dale Ordas	Membership deposit to AAUW for part of membership dues	Membership Income	\$138.00	
6/27/17	7/25/17	Arlene Lighthall	Membership dues (\$92)	Membership Income	-\$1,104.00	for 16 members check #1273 deposit group #1
6/26/17	7/25/17	Charlote Gumbrell	Membership dues (\$92)	Membership Income	\$92.00	
6/25/17	7/25/17	Susan Kaboulian	Membership dues (\$92)	Membership Income	\$92.00	
6/24/17	7/25/17	Laura Eliz Pasquale	Membership dues (\$92)	Membership Income	\$92.00	
6/21/17	7/25/17	Judith Newton	Membership dues (\$92)	Membership Income	\$92.00	
6/19/17	7/25/17	Barbara Mead	Membership dues (\$92)	Membership Income	\$92.00	
6/19/17	7/25/17	Jane Fenyo	Membership dues (\$92)	Membership Income	\$92.00	deposit group #2
6/10/17	7/25/17	Marlene Gale	Membership dues (\$92)	Membership Income	\$92.00	
6/10/17	7/25/17	Janet English	Membership dues (\$92)	Membership Income	\$92.00	
6/19/17	7/25/17	Ruth Vermilyea	Membership dues (\$92)	Membership Income	\$92.00	
6/15/17	7/25/17	Nancy Hand	Membership dues (\$92)	Membership Income	\$92.00	
6/21/17	7/25/17	Frances Moore	Membership dues (\$92)	Membership Income	\$92.00	
6/19/17	7/25/17	Donna Gofich	Membership dues (\$92)	Membership Income	\$92.00	
6/16/17	7/25/17	Constance Yanicka	Membership dues (\$92)	Membership Income	\$92.00	
6/15/17	7/25/17	Carol Smith	Membership dues (\$92)	Membership Income	\$92.00	deposit group #3
7/7/17	7/25/17	Norelynn Pion-Goureau	Membership dues (\$92)	Membership Income	\$92.00	
6/10/17	7/25/17	Mary Dobrin	Membership dues (\$92)	Membership Income	\$92.00	
6/29/17	7/25/17	Karen Anastasi-Gallegher	Membership dues (\$92)	Membership Income	\$92.00	check total was \$192 with rest donation
6/8/17	7/25/17	Vera Wilene Emrick	membership dues for life member	Membership Income	\$43.00	
6/20/17	7/25/17	Cheryl Bastian Aiken	membership dues (\$92)	Membership Income	\$70.00	needs \$22 from Angel Fund
	7/31/17	Amazon	autodeposit	Amazon	\$77.58	
	7/31/17	Union Bank	interest	Miscellaneous Income	\$0.19	
	8/17/17	Amazon Smile	Amazon Smile autodeposit	Amazon	\$59.54	
8/29/17	7/27/17	branch	to AAUW for part of membership dues	Membership Income	-\$434.00	for 6 members check #1277
8/31/17	7/25/17	Lynne D'Agostino	Membership dues (\$92)	Membership Income	\$92.00	
8/31/17	7/25/17	Susan Stahl	Membership dues (\$92)	Membership Income	\$92.00	
8/31/17	7/19/17	Donna Lilly	Membership dues (\$23)	Membership Income	\$23.00	
9/20/17	7/19/17	branch	to AAUW for part of membership dues	Membership Income	-\$69.00	for 2 members check #1280
9/29/17	8/29/17	Muriel Roth	Membership dues (\$23)	Membership Income	\$23.00	
9/29/17	8/29/17	Dianne Nichols	Membership dues (\$92)	Membership Income	\$92.00	
	8/29/17	Amazon	autodeposit	Amazon	\$110.39	
	8/31/17	Union Bank	interest	Miscellaneous Income	\$0.19	
	9/29/17	Amazon	autodeposit	Amazon	\$101.93	
	9/29/17	Union Bank	interest	Miscellaneous Income	\$0.17	
		TBD		AAUW Fund Branch Contribution	\$0.00	
			Total		\$1,063.99	

Comments

Income and Cost by Category:

Membership Income	\$714.00
Room Reimburseal	\$0.00
Miscellaneous Income	\$0.55
Amazon	\$349.44
Installation Branch	\$0.00
Sum by Category	\$1,063.99

Philanthropic Expenses

2017/2018

Check #	Date	PAYEE	PURPOSE	CATEGORY	AMOUNT	COMMENTS
1279	9/20/2017	AAUW	dummy line funds assessment	General Income AAUW Fund	\$0.00 \$65.00	same check with liability insurance (total \$443.76)
			Total		\$65.00	
Expense and Cost by Category:						
			General Income		\$0.00	Comments
			AAUW Fund Branch Contribution		\$0.00	
			AAUW Fund Carryover		\$0.00	
			College Scholarship Carryover		\$0.00	
			TechTrek Carryover		\$0.00	
			AAUW Fund		\$65.00	
			College Scholarships		\$0.00	
			TechTrek		\$0.00	
			Besos de Coco		\$0.00	
			Sum by Category		\$65.00	

Philanthropic Income

2017/2018

Deposit Date	FROM	PURPOSE	CATEGORY	AMOUNT	COMMENTS
7/1/16	carryover	dummy line	General Income	\$0.00	
7/1/16	carryover	carryover from 2016/7	AAUW Fund Carryover	\$1,266.98	
7/1/16	carryover	carryover from 2016/7	College Scholarship Carryover	\$1,711.63	
7/25/17	Karen Anastasi-Gallagher	local scholarship (with dues check)	TechTrek Carryover	\$2,316.46	
7/17/17	Karen J Dellinger	in memory of Linda's brother	College Scholarships	\$100.00	total check amount was \$192 (thank you sent 7/25)
7/28/17	Fidelity Charitable	donation from Melinda Smith	AAUW Fund	\$100.00	in memory of Gary Barr (brother of Linda Quinby) (thank you sent 7/25)
		non-event from spreadsheet	General Income	\$0.00	thank you sent 10/1/17
		non-event from spreadsheet	TechTrek	\$0.00	
		non-event from spreadsheet	College Scholarships	\$0.00	
		non-event from spreadsheet	General Income	\$0.00	
	TBD		AAUW Fund Branch Contribution	\$0.00	
		Total		\$5,595.07	

Income and Cost by Category:

General Income	\$100.00
AAUW Fund Branch Contribution	\$0.00
AAUW Fund Carryover	\$1,266.98
College Scholarship Carryover	\$1,711.63
TechTrek Carryover	\$2,316.46
AAUW Fund	\$100.00
College Scholarships	\$0.00
TechTrek	\$0.00
Besos de Coco	\$0.00
Sum by Category	\$5,595.07

Comments

Non-event 2017/2018

Dep Date	FROM	PURPOSE	CATEGORY	AMOUNT	Thankyou	COMMENTS
	TBD	dummy line	General Income	\$0.00		
			AAUW Fund Branch Contribution	\$0.00		
		Total		\$0.00		
		Income and Cost by Category:				
		General Non-event		\$0.00		Comments
		Tech Trek non-event		\$0.00		
		College Scholar non-event		\$0.00		
		Non-event misc		\$0.00		
		Sum by Category		\$0.00		

	2015-2016	2016-2017	2016-2017	2016-2017	2016-2017	comment
	Actual	Budget	Actual	Actual	Actual	
Operating Fund Carryover	\$ 12,663.88					
Net membership income (100 mbr)	\$ 6,139.50	\$ 2,300.00	\$ 2,078.98			
Room reimbursal			\$ 455.00			
Misc. Income (Seacrest/donat/inter)	\$ 1,151.54	\$ 930.00	\$ 510.94			
Installation Lunch	\$ 745.00		\$ 1,394.85			
Event income 3/12/16	\$ 3,160.00					
Angel Fund carryover/income	\$ 446.00		\$ 446.00			
Amazon	\$ 1,114.02	\$ 1,100.00	\$ 1,416.91			
Total Income	\$ 25,419.94	\$ 4,330.00	\$ 6,302.68			
Angel Fund	\$ 1.00	\$ 0.00	\$ 0.00			
Branch Directory	\$ 220.46	\$ 225.00	\$ 222.32			
CA Atty General Annual Registration	\$ 25.00	\$ 25.00	\$ 0.00			didn't owe this year
Incorporation Taxes	\$ 20.00	\$ 20.00	\$ 0.00			
Insurance through AAUW CA	\$ 390.56	\$ 400.00	\$ 370.00			
Interbranch Dues	\$ 20.00	\$ 70.00	\$ 70.00			
Mailbox	\$ 86.00	\$ 86.00	\$ 90.00			
Membership dues passed on	\$ 3,995.00					
Misc. Expense	\$ 0.00	\$ 49.00	\$ 81.40			
Philanthropy (AAUW Fund Donation)	\$ 1,500.00	\$ 750.00	\$ 0.00			
Registration Fees (Mtgs/Convention)	\$ 299.00	\$ 700.00	\$ 549.00			
President Expenses	\$ 7.56	\$ 75.00	\$ 0.00			
Membership Expenses	\$ 49.26	\$ 100.00	\$ 0.00			
Programs	\$ 372.34	\$ 500.00	\$ 100.34			
Programs Meeting Room Fees	\$ 185.00	\$ 700.00	\$ 940.00			\$ 485.00 adjusted
Event 3/12/16	\$ 1,199.64					
Programs Installation Brunch	\$ 1,002.56	\$ 100.00	\$ 1,473.97			\$ 79.12 adjusted
Public Policy	\$ 47.62	\$ 100.00	\$ 23.80			
Treasurer	\$ 107.46	\$ 150.00	\$ 48.55			
Marketing	\$ 119.88	\$ 230.00	\$ 157.52			
Social Events	\$ 0.00	\$ 50.00	\$ 65.00			
Total Expense	\$ 9,648.34	\$ 4,330.00	\$ 4,191.90			

	2015-2016	2016-2017	2016-2017
	Actual	Budget	Actual
Philanthropic Income:			
General (non-event, donations, fundraisers, etc)		\$ 7,500.00	\$ 14,647.80
Tech Trek	\$8,251.00		
College scholarship	\$2,655.00		
Undesignated	\$9,530.00		
Besos Concert	\$0.00	\$0	\$ 2,058.00
AAUW Fund (branch contribution)	\$1,935.00	\$ 750.00	\$ 50.00 plus general AAUW Fund
AAUW Fund (carryover)	\$1,144.08	\$ 1,440.00	\$ 1,440.00
College Scholarships (carryover)	\$3,686.84	\$ 3,240.00	\$ 3,240.00
Tech Trek (carryover from 2015/6)	\$4,328.25	\$ 3,370.00	\$ 3,370.00
Total Income	\$31,530.17	\$ 16,300.00	\$ 24,805.80
Philanthropic Expense:			
AAUW Fund (Named Gift Honorees + CA Annual Fund Assessment)	\$1,640.01	\$2,350.00	\$533.02 subtracted donation of services
College Scholarships (3 @ \$1500 + \$200)	\$3,100.00	\$4,700.00	\$7,665.26
Tech Trek (10 campers @ \$900 + \$250)	\$9,260.13	\$9,250.00	\$9,267.43
General (non-event, donations, fundraisers, etc)			
Besos Concert	\$9,530.05		\$1,980.00
Total Expense	\$23,530.19	\$16,300.00	\$19,445.70
Event: Tech Trek			
Tech Trek (carryover from last year)			\$ 3,370.00
Tech Trek (funds raised this year)			\$ 8,213.88
subtotal		\$ 11,583.88	\$ 9,000.00
Tech Trek scholarships given other Tech Trek expenses			\$267.42
Total			\$ 2,316.46 so carryover for next year
Event: College Scholar			
College Scholarship (carryover)			\$ 3,240.00
College Scholarship (this year funds)			\$ 6,136.88
subtotal	\$0.00	\$ 9,376.88	\$ 7,500.00
College Scholarships given other college scholarship expenses			\$165.26
Total			\$ 1,711.63 so this is carryover for next year
Non-designated Income			
General carryover			\$0.00
General income (undesignated)			\$297.04 include the IBC luncheon income (not centerpiece part)
Total			\$297.04
Event: AAUW			
AAUW Fund (carryover from last year)			\$ 1,440.00
AAUW Fund (money raised this year)			\$ 50.00
AAUW money from Besos			\$940.00
subtotal	\$0.00	\$ 2,430.00	\$1,350.00 includes money from Besos

	Actual	Budget	Actual
Expenses			\$173.02
Total			\$ 1,266.98
Event: IBC Lunch			
Income			\$189.00
Expenses			\$42.02 just flowers so far
Total			\$146.98 Money not allocated to anything yet
Events: Besos			
Income			\$2,058.00
amount donated to AAUW Fund			\$940.00
other expenses			\$1,040.00 \$ donated items not included in cost/
Total			\$76.00

Operating Income

2016/2017

Check #	Check Date	Deposit Date	FROM	PURPOSE	CATEGORY	AMOUNT	COMMENTS
1216	7/8/16		branch	dummy line	Miscellaneous Income	\$0.00	
1219	7/8/16		branch	to AAUW for part of membership dues	Membership Income	-\$365.00	for 6 members
105842	6/28/16	7/29/16	Seacrest Village	to AAUW for part of membership dues	Membership Income	-\$69.00	for 1 member
6894	7/11/16	7/11/16	Willene Emrick	payment for programs 7/5/16	Miscellaneous Income	\$70.00	life member Willene Emrick - deposit amount \$595
1219	6/20/16	7/11/16	Adrienne Falzon	Membership dues (\$43) - deposit 7/11/16	Membership Income	\$43.00	
6982	6/20/16	7/11/16	Mariene Gale	Membership dues (\$92) - deposit 7/11/16	Membership Income	\$92.00	
2928	6/23/16	7/11/16	Nancy Hand	Membership dues (\$92) - deposit 7/11/16	Membership Income	\$92.00	
1591	6/29/16	7/11/16	Barbara Mead	Membership dues (\$92) - deposit 7/11/16	Membership Income	\$92.00	
10263	6/20/16	7/11/16	Marilyn Palade	Membership dues (\$92) - deposit 7/11/16	Membership Income	\$92.00	new member
3373	6/28/16	7/21/16	Ann Appleton	Membership deposit	Membership Income	\$46.00	e-mail 7/29/16
		7/29/16	AAUW	autodeposit	Membership Income	\$50.84	
		7/29/16	Amazon	interest	Amazon	\$0.17	
		7/29/16	Union Bank	autodeposit	Miscellaneous Income	\$0.17	
		8/15/16	Amazon Smile	payment for programs 8/2/16	Amazon	\$28.65	
106212	8/1/16	8/22/16	Seacrest Village	Membership dues (\$43) - deposit 8/22/16	Miscellaneous Income	\$70.00	was deposited 8/20/16 but next business day total \$135 deposit
8226	7/18/16	8/22/16	Carol Tupper	Membership dues (\$92) - deposit 8/20/16	Membership Income	\$43.00	was deposited 8/20/16 but next business day
248	8/10/16	8/22/16	N. Perry Sherkan	Membership dues (\$92)	Membership Income	\$92.00	
6678	8/21/16	8/25/16	Barbara Mendell	Membership dues (\$92)	Membership Income	\$92.00	
		8/26/16	AAUW	Membership deposit	Membership Income	\$46.00	
		8/29/16	Amazon	autodeposit	Amazon	\$70.82	
106253	8/1/16	8/31/16	Seacrest Village	payment for programs 8/16/16	Miscellaneous Income	\$70.00	
		8/31/16	Union Bank	interest	Miscellaneous Income	\$0.20	
1221	8/25/16	8/25/16	branch	to AAUW for part of membership dues	Membership Income	-\$89.00	for 2 members
1222	8/25/16	8/25/16	branch	to AAUW for part of membership dues	Membership Income	-\$69.00	for 1 member
		9/29/16	Amazon	autodeposit	Amazon	\$118.73	
		9/27/16	AAUW	Membership deposit	Membership Income	\$23.00	
		9/30/16	Union Bank	interest	Miscellaneous Income	\$0.18	
		10/31/16	Amazon	autodeposit	Amazon	\$107.97	
		10/31/16	Union Bank	interest	Miscellaneous Income	\$0.19	
107486	11/1/16	11/1/16	Seacrest Village	payment for program 11/8/16	Miscellaneous Income	\$70.00	
		11/1/16	Amazon smile	autodeposit	Miscellaneous Income	\$51.31	
		11/18/16	AAUW	Membership deposit	Membership Income	\$23.00	
		11/29/16	Amazon	autodeposit	Amazon	\$84.89	
		11/30/17	Union Bank	interest	Miscellaneous Income	\$0.19	
1237	12/4/16	12/5/16	AAUW	to AAUW for part of membership dues	Miscellaneous Income	-\$113.50	
3530	10/10/16	12/5/16	Angela D'Amico	Membership dues (\$92)	Membership Income	\$92.00	
265	10/8/16	12/29/17	Marjorie Frye	Shape the Future Membership (\$67.50)	Membership Income	\$67.50	
		12/30/17	Amazon	autodeposit	Amazon	\$92.09	
		1/30/17	Union Bank	interest	Miscellaneous Income	\$0.23	
		1/31/17	Amazon	autodeposit	Amazon	\$226.90	
		2/6/17	Union Bank	interest	Miscellaneous Income	\$0.26	
		2/15/17	AAUW COV	share of the ECC room rental	Amazon	\$52.06	take off room rental expense
3767	2/5/17	2/28/17	AAUW COV	autodeposit	Room Reimursal	\$410.00	
		2/28/17	Union Bank	interest	Miscellaneous Income	\$0.24	
		2/28/17	Amazon	autodeposit	Amazon	\$100.24	
2340	2/21/17	3/28/17	Virginia Spence	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
4602	2/1/17	3/28/17	Nia Rodriguez	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
7667	1/19/17	3/28/17	Jane Schatt	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
1048	3/11/17	3/28/17	Stephanie Hall	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
512	1/18/17	3/28/17	Kathryn Culligan	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
2485	1/15/17	3/28/17	Wendy Hill	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
7543	2/9/17	3/28/17	Teryl Calthoun	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
661	2/11/17	3/28/17	Patricia Johnson-Khalifa	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	
5559	2/11/17	3/28/17	Hellen Hill	shape the Future Membership (\$67.50)17/18	Membership Income	\$67.50	in second deposit with other items
5644	3/12/17	3/28/17	Marylou Henry	silent auction income	Membership Income	\$67.50	
3626	3/11/17	3/28/17	Eleanor Burton	silent auction income	Miscellaneous Income	\$25.00	

266	3/11/17	3/28/17	Ashley Simpkins	silent auction income	Miscellaneous Income	\$40.00	
1464	3/12/17	3/28/17	Many Frances Miller	silent auction income (cash consolidation)	Miscellaneous Income	\$70.00	
2491	3/5/17	3/29/17	Ruth Vermilyea	payment for March event - owe to COV	Miscellaneous Income	\$20.00	
		3/29/17	Amazon	autodeposit	Amazon	\$78.39	
		3/31/17	Union Bank	interest	Miscellaneous Income	\$0.24	
		4/19/17	branch	move centerpiece IBC part to operations	Membership Income	\$146.98	voted 4/19/17 branch meeting
		4/27/17	AAUW	membership deposit	Membership Income	\$345.00	
		4/28/17	Union Bank	interest	Miscellaneous Income	\$0.17	
		5/1/17	Amazon	autodeposit	Amazon	\$82.04	
		5/12/17	Amazon smile	autodeposit	Amazon	\$56.44	
3225	5/7/17	5/30/17	Sue Eilen Leroy	installation brunch reservation	Installation Brunch	\$25.00	batch one of 8 checks
1766	5/8/17	5/30/17	Betty Reed	installation brunch reservation	Installation Brunch	\$25.00	
1324	5/7/17	5/30/17	Jackie Stone	installation brunch reservation	Installation Brunch	\$25.00	
2471	5/15/17	5/30/17	Janice Muller	installation brunch reservation	Installation Brunch	\$25.00	
3356	5/10/17	5/30/17	Aileen von Schlieder	installation brunch reservation	Installation Brunch	\$25.00	
4921	5/15/17	5/30/17	Karen Dorney	installation brunch reservation	Installation Brunch	\$25.00	
3621	5/7/17	5/30/17	Rancho Del Mar Travel	installation brunch reservation	Installation Brunch	\$25.00	
1200	5/18/17	5/30/17	Darlene Palmer	installation brunch reservation	Installation Brunch	\$25.00	for Barbara Jenkins-Lee
10652	5/17/17	5/30/17	Pat Moran	installation brunch reservation	Installation Brunch	\$25.00	batch two of 8 checks
5121	5/24/17	5/30/17	Barbara Bladen	installation brunch reservation	Installation Brunch	\$25.00	#10
6557	5/12/17	5/30/17	Bobbi Karnes	installation brunch reservation	Installation Brunch	\$25.00	
2375	5/10/17	5/30/17	Linda Quinby	installation brunch reservation	Installation Brunch	\$25.00	
2376	5/15/17	5/30/17	Dave Quinby	installation brunch reservation	Installation Brunch	\$25.00	
1606	5/13/17	5/30/17	Norelynn Pion-Goureau	installation brunch reservation	Installation Brunch	\$25.00	
2602	5/12/17	5/30/17	Fran Miller + 7?	installation brunch reservation	Installation Brunch	\$50.00	self plus one guest scholarship (sent thank you)
8230	5/11/17	5/30/17	Karen Vanderwerken + 1	installation brunch reservation	Installation Brunch	\$50.00	for self + guest scholarship (thank you sent)
1132	5/11/17	5/30/17	Parry Enterprise	installation brunch reservation	Installation Brunch	\$50.00	#20 batch 3 Sharon Corbett-Parry + spouse Bob
3955	5/29/17	5/30/17	Katherine White	installation brunch reservation	Installation Brunch	\$25.00	for guest scholarship (sent thank you)
2603	5/14/17	5/30/17	Fran Miller cash for	installation brunch reservation	Installation Brunch	\$25.00	cash payment for Nancy Kohrs (total check amount \$52)
17005919	5/3/17	5/30/17	City of Encinitas	room reimbursement for June	Room Reimbursement	\$45.00	
		5/25/17	AAUW	membership deposit	Membership Income	\$230.00	
		5/30/17	Amazon	autodeposit	Amazon	\$118.98	
		5/31/17	Union Bank	interest	Miscellaneous Income	\$0.19	
4841	5/27/17	6/19/17	Sharon McKenzie	installation brunch reservation	Installation Brunch	\$25.00	
1981	6/15/17	6/19/17	Carolyn Dahl	installation brunch reservation	Installation Brunch	\$25.00	
1659	6/10/17	6/19/17	Rebecca Hill	installation brunch reservation	Installation Brunch	\$25.00	
8067	6/9/17	6/19/17	Janet English	installation brunch reservation	Installation Brunch	\$25.00	
958	6/4/17	6/19/17	Jessamine Gadsby	installation brunch reservation	Installation Brunch	\$25.00	
6640	5/30/17	6/19/17	Charlotte Gumbrell	installation brunch reservation	Installation Brunch	\$25.00	
7870	5/30/17	6/19/17	Anne Marie Ebeling	installation brunch reservation	Installation Brunch	\$25.00	#30
2870	5/26/17	6/19/17	Kathleen DeGraffenreid	installation brunch reservation	Installation Brunch	\$25.00	
2505	5/29/17	6/19/17	Beverly Boggs	installation brunch reservation	Installation Brunch	\$25.00	
9462	5/25/17	6/19/17	Nancy Telford	installation brunch reservation	Installation Brunch	\$25.00	
8234	5/30/17	6/19/17	Karen Vanderwerken	installation brunch reservation	Installation Brunch	\$50.00	#34 for Anne Omstead and Roni Saay
1269	6/18/17	6/19/17	branch	to AAUW for part of membership dues	Installation Brunch	\$50.00	for 16 members
1971	4/26/17	6/20/17	Carolyn Dahl	Membership dues (\$92)	Membership Income	\$92.00	
6353	3/25/17	6/20/17	Sky Magdalin	Membership dues (\$92)	Membership Income	\$92.00	
3944	4/30/17	6/20/17	Katherine White	Membership dues (\$92)	Membership Income	\$92.00	
1102	4/25/17	6/20/17	Joanna Schwend	Membership dues (\$92)	Membership Income	\$92.00	
2295	4/25/17	6/20/17	Dorothy Roll	Membership dues (\$92)	Membership Income	\$92.00	
5327	4/25/17	6/20/17	Barbara Stinson	Membership dues (\$92)	Membership Income	\$92.00	
2452	4/19/17	6/20/17	Janice Muller	Membership dues (\$92)	Membership Income	\$92.00	
4911	4/18/17	6/20/17	Karen Dorney	Membership dues (\$92)	Membership Income	\$92.00	deposit group 2 starts here
1623	5/5/17	6/20/17	Rosemary DuAlme	Membership dues (\$92)	Membership Income	\$92.00	
1007	5/21/17	6/20/17	Nancy Lombardi-Kohrs	Membership dues (\$92)	Membership Income	\$92.00	membership for Christopher Kohrs
4891	5/23/17	6/20/17	Karen Dellinger	Membership dues (\$92)	Membership Income	\$92.00	
1006	5/21/17	6/20/17	Nancy Lombardi-Kohrs	Membership dues (\$92)	Membership Income	\$92.00	
3555	6/4/17	6/20/17	Ann Appleton	Membership dues (\$92)	Membership Income	\$92.00	
1119	5/15/17	6/20/17	Shariene Bergant	Membership dues (\$92)	Membership Income	\$92.00	
1322	5/9/17	6/20/17	Jackie Stone	Membership dues (\$92)	Membership Income	\$92.00	
7866	5/30/17	6/20/17	Anne Marie Ebeling	Membership dues (\$92)	Membership Income	\$92.00	check amount was \$93 so \$1 donation to general fund
7866	5/30/17	6/20/17	Anne Marie Ebeling	extra money in membership check	Miscellaneous Income	\$1.00	check amount was \$100 so \$8 donation to general fund
7798	5/17/17	6/20/17	Veronica Seay	Membership dues (\$92)	Membership Income	\$92.00	
7798	5/17/17	6/20/17	Veronica Seay	extra money in membership check	Miscellaneous Income	\$8.00	

1197	4/8/17	Patrice Moran	shape the Future Membership (\$67.50)	Membership Income	\$67.50	
1197	4/8/17	Patrice Moran	extra money in membership check	Miscellaneous Income	\$24.50	check amount was \$92 so \$24.50 donation to general fund
3222	4/10/17	Sue Ellen Leroy	shape the Future Membership (\$67.50)	Membership Income	\$62.50	
	6/20/17	Sue Ellen Leroy	rest of money owed in cash	Membership Income	\$5.00	
8237	6/12/17	Karen Vandenwerken	cash jar from installation brunch	Installation Brunch	\$35.00	
	6/23/17	AAUW	Membership deposit	Membership Income	\$299.00	
2610	6/20/17	Mary Frances Miller	return of funds for brunch she was paid	Installation Brunch	\$409.85	Katherine paid venue directly
	6/29/17	Amazon	autodeposit	Amazon	\$96.56	
	6/30/17	Union Bank	interest	Miscellaneous Income	\$0.18	
			pay for 4 lunches for scholarships	Installation Brunch	\$100.00	
		TBD		AAUW Fund Branch Contribution	\$0.00	
			Total		\$5,856.68	

Income and Cost by Category:

Membership Income	\$2,078.98	
Room Reimbursal	\$455.00	
Miscellaneous Income	\$510.94	
Amazon	\$1,416.91	
Installation Brunch	\$1,384.85	
Sum by Category	\$5,856.68	

Comments

Philanthropic Expenses

2016/2017

Check #	Date	PAYEE	PURPOSE	CATEGORY	AMOUNT	COMMENTS
1227	9/11/2016	Betty Reed	dummy line	General Income	\$0.00	
1228	9/11/2017	AAUW CA	stamps and mailing envelopes for Tech Trek 2016 annual fund assessment	TechTrek	\$38.77	
1234	11/15/16	Barbara Bladen	100 stamps for non-event invitation	AAUW Fund	\$65.00	total \$46.75 - 1/2 each
			100 copies non-event invite	College Scholarships	\$23.38	
				TechTrek	\$11.88	donated was \$23.76
				College Scholarships	\$11.88	
1236	11/18/16	City of Encinitas	rental of room for Besos concert on 1/15/17	TechTrek	\$270.00	total \$1010. - - Besos concert separated
1238	12/8/16	Sophia Hernandez	scholarship at Mira Costa	Besos de Coco	\$1,000.00	
1239	12/8/16	Carolina Quirante	scholarship at CSU San Marcos	College Scholarships	\$1,000.00	
1240	12/8/16	Maylin Caldwell	scholarship at CSU San Marcos	College Scholarships	\$1,000.00	
1241	12/8/16	Uju Nwizu	scholarship at CSU San Marcos	College Scholarships	\$1,000.00	
1242	12/8/16	Jolene Navatta	scholarship at CSU San Marcos	College Scholarships	\$1,000.00	
1244	1/8/17	City of Encinitas	more room rental	College Scholarships	\$20.00	stage rental for Besos concert
1245	1/8/17	Besos de Coco	payment for artists for concert	Besos de Coco	\$750.00	
			donated expenses for concert	Besos de Coco	\$0.00	refreshments \$12 and printing \$335.59
1246	1/15/17	assorted		Besos de Coco	\$750.00	
1247	12/31/16	AAUW Fund	contribution for fund 9110	Besos de Coco	\$0.00	
1247	1/30/17	Arleen von Schlieder	flowers for IBC luncheon	AAUW Fund	\$410.00	
1250	3/4/17	AAUW Fund	Besos profit for AAUW Fund	AAUW Fund	\$42.02	
1252	2/5/17	Tech Trek	campers	Besos de Coco	\$940.00	
1254	3/27/17	Betty Reed	totes, pens, pads and notebook for campers	TechTrek	\$9,000.00	gift items for Tech Trek campers
1257	3/27/17	Sophia Hernandez	scholarship at Mira Costa	TechTrek	\$101.56	
1259	3/27/17	Carolina Quirante	scholarship at CSU San Marcos	College Scholarships	\$500.00	
1260	3/27/17	Maylin Caldwell	scholarship at CSU San Marcos	College Scholarships	\$500.00	
1261	3/27/17	Uju Nwizu	scholarship at CSU San Marcos	College Scholarships	\$500.00	
1258	3/27/17	Jolene Navatta	scholarship at CSU San Marcos	College Scholarships	\$500.00	
			cancel check #1259 - she lost check	College Scholarships	-\$500.00	
			stop payment for check #1259	College Scholarships	\$30.00	replaces ccheck #1259 which she lost
1266	5/5/17	Union Bank	scholarship at CSU San Marcos	College Scholarships	\$500.00	
1267	5/8/17	Carolina Quirante	Tech Trek programs, certificates and water bottles	College Scholarships	\$30.00	
1271	6/25/17	Karen Vandenwerken	named gift honoree pins for installation brunch	TechTrek	\$91.84	check total was \$135
1271	6/25/17	Karen Vandenwerken	note cards for named gift honorees at brunch	AAUW Fund	\$36.00	check total was \$135
			pay for 4 scholarship lunches for install. Brunch	AAUW Fund	\$100.00	
				College Scholarships	\$0.00	
				AAUW Fund Branch Contribution	\$0.00	
			Total		\$19,495.70	includes donated amount

Expense and Cost by Category:

General Income	\$0.00
AAUW Fund Branch Contribution	\$0.00
AAUW Fund Carryover	\$0.00
College Scholarship Carryover	\$0.00
TechTrek Carryover	\$0.00
AAUW Fund	\$583.02
College Scholarships	\$7,665.26
TechTrek	\$9,267.43
Besos de Coco	\$1,980.00
Sum by Category	\$19,495.70

Besos

\$1,040.00

Comments

Philanthropic Income

2016/2017

Deposit Date	FROM	PURPOSE	CATEGORY	AMOUNT	COMMENTS
7/1/16	carryover	dummy line	General Income	\$0.00	
7/1/16	carryover	carryover from 2015/2016	AAUW Fund Carryover	\$1,440.00	
7/1/16	carryover	carryover from 2015/2016	College Scholarship Carryover	\$3,240.00	
11/14/16	ticket sales	carryover from 2015/2016	TechTrek Carryover	\$3,370.00	
11/23/16	ticket sales	Besos de Coco	Besos de Coco	\$100.00	N. Dion-Gourve, L. Quinbyx2, E. Reed, MF Miller
11/15/16	Barbara Bladen	Besos de Coco	Besos de Coco	\$160.00	K. Vanderweikenx3, J. Gadsby, Stone, Danielsx2, R. Medeiros donated by Barbara - total \$23.76
12/28/16	ticket sales	100 copies non-event invite	College Scholarships	\$11.88	
12/28/16	ticket sales	Besos de Coco	TechTrek	\$11.88	
12/28/16	ticket sales	Besos de Coco	Besos de Coco	\$240.00	S. Carneiro, A. vSchlieder-2, S. Hori, N. Telford-2, J. Schwend-2, S. Bergart, M. McNeil-2, M. Monroy
12/30/16	Karen Dorney	Besos de Coco	Besos de Coco	\$200.00	M. Senese, C. Dahl, J. Boyd-2, J. Muller, L. Brown-2, B. Karnes, F. Miller -2 guests
12/30/16	ticket sales	donation since can't make event	Besos de Coco	\$100.00	A. Henne-2, W. Emrick-2, M-O Jain, cash Jane Savage
12/30/16	ticket sales	donation for college students	Besos de Coco	\$20.00	check dated 12/20/16 - thank you sent
1/31/17	Norelynn Pion-Goureau	Besos de Coco	Besos de Coco	\$120.00	L. Barker-2, B. Berrier, M. Hall-2, J. Howarter (Berrier- cash)
1/31/17	Shari Green	donation to event in honor of K. Vanderweiken	Besos de Coco	\$20.00	K. Vanderweiken check for Nicki Jurewicz who sent Karen cash \$20
1/31/17	Katherine White	donation for college students	Besos de Coco	\$40.00	check dated 1/12/17 - thank you sent
1/31/17	Karen Vanderweiken	cash donation at Besos de Coco concert	Besos de Coco	\$50.00	check dated 1/19/17 - thank you sent
1/31/17	ticket sales	cash donation at Besos de Coco - paid at door	Besos de Coco	\$40.00	check dated 1/8/17 - thank you sent
1/31/17	ticket sales	Besos de Coco	Besos de Coco	\$83.00	
1/31/17	ticket sales at door	Besos de Coco	Besos de Coco	\$120.00	
2/13/17	Linda Quinby	Besos de Coco	Besos de Coco	\$320.00	S. Parry-2, J. Mastrogany-4, B. Bladen, J. Kay-3, J. Newton-2, S. Baker, N. L. Kohrs-2, B. Reed
4/14/17	Barbara Bladen	IBC luncheon donations	Besos de Coco	\$220.00	L. Sterling, L. Magnusson, N. Noble, J. English-2, L. Rosenstein, J. Lighton, E. Brady-2, E. Lavender-2
4/14/17	Barbara Bladen	donation for college scholarships	Besos de Coco	\$125.00	M. Gale- 2, W. Hill, J. Stone -2, R. Hill (+\$5)
4/14/17	Beverly Boggs	donation for college scholarships	General Income	\$189.00	check date 1/28/17
4/14/17	Susan Hori	donation	College Scholarships	\$100.00	check date 1/19/17 - thank you sent
4/19/17	Norelynn Pion-Goureau	donation	College Scholarships	\$250.00	
4/19/17	branch	move flower proceeds to Operating Fund	General Income	\$50.00	
5/5/17	Home Depot	donation	General Income	\$25.00	
5/30/17	Fran Miller	cash jar at meeting in May	General Income	\$130.00	in honor of Karen Vanderweiken's birthday
5/30/17	Norelynn Pion-Goureau	donation in honor of father Frank Messick	TechTrek	\$27.00	in honor of Karen Vanderweiken's birthday
6/10/17	Karen Vanderweiken	donation in honor of Linda Quinby	TechTrek	\$100.00	centerpiece proceeds
6/10/17	Karen Vanderweiken	donation in honor of Fran Miller	AAUW Fund	\$50.00	on behalf of Armando Mendieta
6/20/17	Veronica Seay	donation in honor of Karen Vanderweiken	General Income	\$50.00	total check amount \$52 dated 5/14/17
		non-event from spreadsheet	TechTrek	\$7,975.00	thank you 5/30/17
		non-event from spreadsheet	College Scholarships	\$5,625.00	from installation brunch thank you 6/26/17
		non-event from spreadsheet	General Income	\$0.00	from installation brunch thank you 6/26/17
			AAUW Fund Branch Contribution	\$0.00	thank you sent 7/4/17
				\$0.00	
				\$24,805.80	
				\$297.04	
				\$0.00	
				\$1,440.00	
				\$3,240.00	
				\$3,370.00	
				\$50.00	
				\$6,136.88	
				\$8,213.88	
				\$2,058.00	
				\$24,805.80	

Income and Cost by Category:

General Income	\$297.04
AAUW Fund Branch Contribution	\$0.00
AAUW Fund Carryover	\$1,440.00
College Scholarship Carryover	\$3,240.00
TechTrek Carryover	\$3,370.00
AAUW Fund	\$50.00
College Scholarships	\$6,136.88
TechTrek	\$8,213.88
Besos de Coco	\$2,058.00
Sum by Category	\$24,805.80

Comments

Non-event 2016/2017

Dep Date	FROM	PURPOSE	CATEGORY	AMOUNT	Thankyou	COMMENTS
11/14/16	Jackie Stone	dummy line	General Income	\$0.00		
11/14/16	Joanna Schwend	College Scholarship	College Scholar non-event	\$25.00	yes	
11/14/16	Kathleen DeGraffenreid	Tech Trek	Tech Trek non-event	\$50.00	yes	
11/21/16	Karen Vandenwerken	College Scholarship	College Scholar non-event	\$100.00	yes	in honor of Fran Miller
11/21/16	Betty Reed	Tech Trek	Tech Trek non-event	\$100.00	yes	in memory of Arliss Adams
11/21/16	Nancy Adrian	Tech Trek	Tech Trek non-event	\$900.00	yes	in memory of Doris Adrian
11/21/16	Linda Quinby	Tech Trek	Tech Trek non-event	\$900.00	yes	
11/21/16	Linda Quinby	College Scholarship	College Scholar non-event	\$100.00	yes	total check \$1000 in memory of Linda's father Fay Barr
11/21/16	Ruth Vermilea	College Scholarship	College Scholar non-event	\$25.00	yes	in honor of my granddaughtier
11/21/16	Beverly Boggs	College Scholarship	College Scholar non-event	\$300.00	yes	
11/21/16	Marilyn Palade	College Scholarship	College Scholar non-event	\$250.00	yes	
11/21/16	Katherine Larsen	unspecified	General Non-event	\$50.00	yes	
11/21/16	Laura Pasquale	unspecified	General Non-event	\$50.00	yes	please show as ANONYMOUS
11/21/16	Sherron Simpson	unspecified	General Non-event	\$100.00	yes	in memory of Sadie
11/21/16	Sally Billig	unspecified	General Non-event	\$50.00	yes	one check and divided
11/28/16	Edith Fine	1/2 and 1/2 check	College Scholar non-event	\$50.00	yes	
11/28/16	Edith Fine	1/2 and 1/2 check	Tech Trek non-event	\$50.00	yes	
11/28/16	Karen Dorney	unspecified	General Non-event	\$500.00	yes	
11/28/16	Erma Cox	unspecified	General Non-event	\$250.00	yes	
11/28/16	Patricia Yeakley	unspecified	General Non-event	\$25.00	yes	in honor of Hillary Clinton
11/28/16	Carolyn Dahl	Tech Trek	Tech Trek non-event	\$50.00	yes	
11/28/16	Michele McNeil	unspecified	General Non-event	\$100.00	yes	recognize as Michele and Roger McNeil
11/28/16	V. Willemse Emrick	Tech Trek	Tech Trek non-event	\$75.00	yes	in memory of my mother Corda Leicia Whittenberger
12/5/16	Judith Ann Newton	unspecified	General Non-event	\$50.00	yes	
12/5/16	Mary Frances Miller	College Scholarship	College Scholar non-event	\$150.00	yes	recognize as Fran in memory of mother Elizabeth Fitzpatrick
12/5/16	Sue Kaloustian	unspecified	General Non-event	\$100.00	yes	
12/5/16	Jessamine Gadsby	Tech Trek	Tech Trek non-event	\$100.00	yes	
12/5/16	Katherine White	Tech Trek	Tech Trek non-event	\$500.00	yes	in memory of Jo Moss
12/23/16	Marlene Gerber-Gale	Tech Trek	Tech Trek non-event	\$50.00	yes	
12/23/16	Karen Anastasi-Gallagher	College Scholarship	College Scholar non-event	\$250.00	yes	
12/23/16	Artene Lighthall	Tech Trek	Tech Trek non-event	\$100.00	yes	
12/23/16	Andrea Henne	unspecified	General Non-event	\$100.00	yes	
12/23/16	Marjorie Frye	unspecified	General Non-event	\$50.00	yes	recognize Bobbi and Gene Karnes
12/23/16	Barbara Karnes	unspecified	General Non-event	\$50.00	yes	
12/23/16	Jane Sanders	College Scholarship	College Scholar non-event	\$100.00	yes	
12/23/16	Mitzi Dominguez	Tech Trek	Tech Trek non-event	\$100.00	yes	
12/23/16	Barbara Bladen	College Scholarship	College Scholar non-event	\$200.00	yes	
12/23/16	Kathleen Zacher	Tech Trek	Tech Trek non-event	\$250.00	yes	
12/26/16	Dianne Kernell	Tech Trek	Tech Trek non-event	\$100.00	yes	
12/23/16	Dianne Nichols	College Scholarship	College Scholar non-event	\$200.00	yes	
12/23/16	Janet English	1/2 and 1/2 check	College Scholar non-event	\$25.00	yes	check total \$50 recognize as Jan English
12/23/16	Janet English	1/2 and 1/2 check	Tech Trek non-event	\$25.00	yes	
12/23/16	Arleen von Schlieder	College Scholarship	College Scholar non-event	\$100.00	yes	
12/23/16	Judith Howarter	Tech Trek	Tech Trek non-event	\$500.00	yes	in memory of Shirley Weekes recognize as Judy Howarter

Date	Name	Category	Amount	Comments
12/23/16	Darlene Palmer	unspecified	\$50.00	yes
12/23/16	Fidelity for Janice Muller	Tech Trek	\$900.00	yes
12/23/16	Nancy Perry-Sheridan	College Scholarship	\$2,000.00	yes
12/30/16	Laurenn Barker	College Scholarship	\$100.00	yes
12/30/16	201	Tech Trek	\$100.00	yes
12/30/16	Kathleen LeMieux	College Scholarship	\$100.00	yes
12/30/16	Rebecca Hill	unspecified	\$25.00	yes
1/31/17	Joan Adamo	Tech Trek	\$100.00	yes
1/31/17	Nancy Lomardi-Kohrs	Tech Trek	\$2,000.00	yes
1/31/17	Norelynn Pion-Goureau	Tech Trek	\$100.00	yes
2/15/17	General Non-event	transfer to	-\$1,550.00	
2/15/17	College Schol non-event	transfer from	\$1,550.00	
	TBD	AAUW Fund Branch Contribution	\$0.00	
		Total	\$13,600.00	

Income and Cost by Category:

General Non-event	\$0.00
Tech Trek non-event	\$7,975.00
College Scholar non-event	\$5,625.00
Non-event misc	\$0.00
Sum by Category	\$13,600.00

may wish to be anonymous ???

check was undated
date changed to 2016
reognized as Joan and Lou Adamo
2 scholarships plus camp supplies
amount as of 2/15/17

†

**Request for Taxpayer
 Identification Number and Certification**

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name
AAUW Del Mar Leucadia Branch
 Business name if different from above

Check appropriate box: Individual/Sole proprietor Corporation Partnership Other **501(c)(3)** Exempt from backup withholding

Address (number, street, and apt. or suite no.)
Po Box 543
 City, state and ZIP code
Solana Beach CA 92075
 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 3.

Social security number

 or
 Employer identification number
01-0563236

Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person **Betsy Reed, treasurer** Date **8/12/2014**

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien) to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued)
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see **Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities**).

Nonresident alien who becomes a resident alien.

Generally only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: FEB 28 2007

AMERICAN ASSOCIATION OF UNIVERSITY
WOMEN DEL MAR-LEUCADIA CA BRANCH
PO BOX 231098
ENCINITAS, CA 92024-0000

Employer Identification Number:
01-0563236
DLN:
17053273742076
Contact Person: CHITRA MAMLATDARNA ID# 52471
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
509(a)(2)

Dear Applicant:

Our letter dated November 08, 2002, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

STATE OF CALIFORNIA
Franchise Tax Board

Session expires in 19:51

199N e-Postcard - Confirmation

Print this page for your records. The Confirmation Number below is proof that you successfully filed your e-Postcard.

We received your FTB 199N California e-Postcard on November 12, 2016 09:33 PM.

Confirmation Number: 241481131704

Entity Information

Entity ID: 2414811

Entity Name: AAUW, DEL MAR-LEUCADIA CALIFORNIA
BRANCH

Account Period Beginning: JULY 01, 2015

Account Period Ending: JUNE 30, 2016

This is not your entity's first year in business.

Your entity has not terminated or gone out of business.

Your entity has not changed the account period.

Gross Receipts: \$23,866

This is not an amended return.

An IRS Form 1023/1024 is not pending.

Date IRS Form 1023/1024 Filed: N/A

FEIN: 010563236

Doing Business As:

Website Address: HTTP://DELMARLEUCADIA-CA.AAUW.NET

Entity's Mailing Address

PO BOX 543

SOLANA BEACH, CA 92075

Principal Officer's Information

Name: LINDA QUINBY
2552 INGLETON AVENUE
CARLSBAD, CA 92009

Contact Information

Name: KATHERINE WHITE
Phone: 619.990.7967

[Print](#)

[Log Out](#)

After we process your 199N e-Postcard, you may receive a bill if the three year gross receipt average is greater than the amount allowed for filing a 199N e-Postcard.

[Back to Top](#)

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City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: Assistance League of Rancho San Dieguito
Mailing Address: 270 F North El Camino Real, Box 368
City Encinitas State CA Zip 92024
Contact Person: Kathy O'Leary
Daytime Phone: 760-753-1319
Evening Phone: 760-753-1319
Email address: alrsd100@gmail.com

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 33-0556542
3. Has your organization received financial assistance from the City before?
Yes · **No** ·
If yes, what activities and which fiscal year? In 2014, 2015, and 2016 we received money for shoes events at Marshalls for students from St. Leo's Head Start Program.

4. Amount requested for FY 2017-18 \$ 3000
5. Proposed Total Program Costs: \$ 3000
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: Shoes for Preschoolers/Operation School Bell
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
We will invite the preschool children and their families from St. Leo's Head Start Program to come to the Marshalls store in Solana Beach for the shoe event. Each child will be able to buy one pair of shoes for school. Last year the average cost of a pair of shoes was \$40. Assistance League members will be present to help.

8. Estimated number of S.B. residents to be served by proposed program: 80

9. Program Dates/Location:

We will choose two dates to fit Marshall's schedule. The Marshall's store is located at 673 San Rodolfo Drive, Lomas Santa Fe Square, Solana Beach 92075.

10. Anticipated Program Objectives or Accomplishments:

We will invite all the students at St. Leo's. Last year we invited 62 students and 59 attended. Many of these children have never had a new pair of shoes. This is a very special opportunity for the children and their families. They know that community cares for them.

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

Assistance League will list the City of Solana Beach Community Grants as one of our donors in publicity materials: Community newsletter, the program for our spring fundraiser, other grant applications and at our Encinitas Thrift Shop.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

No, there are no matching funds or other grants.

This grant pays for the entire program.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Our volunteer members will work at the Marshall's stores during the program. They are not paid.

The staff at Marshall's is not paid by us.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

If we do not receive full funding, we will still do the program. However, fewer students would be invited.

If we received less than \$1500, we will not do the program.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2011-12 APPLICATION**

All Applications MUST BE RECEIVED by 5:30 p.m. Thursday, October 27, 2011.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: Assistance League of Rancho San Dieguito
Mailing Address: 270 F North El Camino Real, Box 368
City: Encinitas State CA Zip 92024
Contact Person: Kathy O'Leary
Daytime Phone: 760-753-1319
Evening Phone: Same
Email address: alrsd100@gmail.com

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 33-0556542
3. Has your organization received financial assistance from the City before?
Yes No
If yes, what activities and which fiscal year? In 2014, 2015 and 2016 we received money for shoe events at Marshall's for students from St. Leo's Head Start Program.
4. Amount requested for FY 2011-12 \$ 3000
5. Proposed Total Program Costs: \$ 3000
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: Shoes for Preschoolers
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
We will invite all the preschool children and their families from St. Leo's Head Start Program to the Marshall's store in Solana Beach for the shoe event. Each child will be able to buy one pair of shoes for school. Last year the average cost of a pair of shoes was \$40. Assistance League members will be present to help.

(Attach extra sheet, if necessary.)

8. Estimated number of S.B. residents to be served by proposed program: 80
9. Program Dates/Location:
We will choose two dates to fit Marshall's schedule.
10. Anticipated Program Objectives or Accomplishments:
We will invite all the students at St. Leo's. Last year we invited 62 students and 59 attended. Many of these children had never had a new pair of shoes. This is a very special opportunity for the children and their families. They know that the community cares for them.
11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?
Assistance League will list the City of Solana Beach Community Grants as one of our donors in publicity materials: Community Newsletter, the program for our spring fundraiser, other grant applications and at our Encinitas Thrift Shop.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

Kathy O'Leary

October 26, 2017

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type
 See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Assistance League of Rancho San Dieguito	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ 501(c) 3	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) 270 F North El Camino Real, Box 368	Requester's name and address (optional)
6 City, state, and ZIP code Encinitas, CA 92024	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
or									
Employer identification number									
3	3	-	0	5	5	6	5	4	2

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ <i>Brenda Seitz - (Treasurer)</i>	Date ▶ <i>10.03.16</i>
------------------	--	------------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Assistance League of Rancho San Dieguito
FY 2017-18 Budget Overview (revised 4/26/17)
 June 2017 through May 2018

	Jun '17 - May 18
Income	
4000 · Contributions	
Wells Fargo Credit Card Rebate	2,000.00
Amazon Smile	150.00
Fundraiser Brochure Mailer	2,000.00
Thrift Shop	375.00
OSB\ Clothing Children	3,500.00
Unrestricted to Use	2,000.00
	10,025.00
Total 4000 · Contributions	10,025.00
4100 · Grants	
Grants - Other	2,000.00
Operation School Bell	
RSF Rotary	0.00
City of Solana Beach	3,000.00
Berkshire Hathaway Charitable	2,100.00
City of Encinitas	3,500.00
Masserini Fund	5,000.00
Neighborhood Reinvestment	0.00
Carlsbad Rotary	0.00
Wells Fargo Foundation	
French Fund	5,000.00
	5,000.00
Total Wells Fargo Foundation	5,000.00
Total Operation School Bell	18,600.00
4100 · Grants - Other	0.00
	20,600.00
Total 4100 · Grants	20,600.00
4201 · Thrift Shop	
4202 · Sales	168,000.00
	168,000.00
Total 4201 · Thrift Shop	168,000.00
4300 · Special events	
Luncheon Boutiques	400.00
San Diego County Fair	1,000.00
Spring Fundraiser	85,000.00
	86,400.00
Total 4300 · Special events	86,400.00
4500 · Investment Income	
Wells Fargo Savings	130.00
	130.00
Total 4500 · Investment Income	130.00
4600 · Member-Only	
Annual Meeting/Luncheon	100.00
Aprons	240.00
Holiday Meeting/ Luncheon	100.00
Holiday Party	100.00
Member dues	
PALS Dues	270.00
Assistans -ALRSD Chapter Dues	270.00
Member dues - Other	9,500.00
	10,040.00
Total Member dues	10,040.00
Name Tags	100.00
	10,680.00
Total 4600 · Member-Only	10,680.00
Total Income	295,835.00
Gross Profit	295,835.00

Assistance League of Rancho San Dieguito
FY 2017-18 Budget Overview (revised 4/26/17)
 June 2017 through May 2018

	Jun '17 - May 18
Expense	
5100 · Philanthropic Programs	
Flowers for Seniors	100.00
Assault Survivor Kits	4,800.00
Hug-a-Bear	2,000.00
Knifty Knitters	700.00
Operation School Bell	
OSB/Clothing Children	100,000.00
OSB/Science Camp Scholarships	5,000.00
OSB\Pendleton	11,500.00
	116,500.00
Total Operation School Bell	116,500.00
Optional Charitable Program	
Critters Project	400.00
Optional Charitable Program - Ot...	500.00
	900.00
Total Optional Charitable Program	900.00
PREP	150.00
Stand Up for Kids	500.00
Storage Rental	3,025.00
	3,675.00
Total 5100 · Philanthropic Programs	128,675.00
5200 · Thrift Shop Expense	
Advertising	500.00
Business license	21.00
Chamber Membership	195.00
Cleaning	4,160.00
Cost of Goods Sold	200.00
Delivery Charges	1,500.00
Furniture & Fixtures	1,000.00
Insurance	3,000.00
Merchant Services	3,600.00
Printing	300.00
Refurbish & Repairs	1,000.00
Rent	93,940.00
Storage	1,140.00
Supplies	1,800.00
Utilities	
Electric	3,225.00
Security	420.00
Telephone	1,100.00
	4,745.00
Total Utilities	4,745.00
Total 5200 · Thrift Shop Expense	117,101.00
5300 · Fundraising Expense	
Fundraising Brochure-Mailer	700.00
Grants	150.00
	850.00
Total 5300 · Fundraising Expense	850.00
5600 · Special Events Expense	
Spring Fundraiser	20,000.00
	20,000.00
Total 5600 · Special Events Expense	20,000.00
5800 · Management & General	
Internet Access/Fees	600.00
Bank Charges	50.00

Assistance League of Rancho San Dieguito
FY 2017-18 Budget Overview (revised 4/26/17)
 June 2017 through May 2018

	Jun '17 - May 18
Board Expenses	
Board expense - other	50.00
Corresponding Secretary	75.00
President's Expense	150.00
Recording Secretary	75.00
Treasurer	100.00
Total Board Expenses	450.00
Chapter Marketing	2,600.00
CPA Audit/Review	4,000.00
Education	
Board Development	100.00
National Conference & Meetings	8,500.00
Total Education	8,600.00
Government Fees & Licenses	115.00
Insurance	
Director & Officer	660.00
Total Insurance	660.00
Storage Rental	1,140.00
Website	400.00
5800 - Management & General - Oth...	1,000.00
Total 5800 - Management & General	19,615.00
5900 - Member Only expense	
Cost of Aprons	240.00
Chapter Scrap Book	150.00
Circle Donation	250.00
Hall Rental	1,200.00
Hospitality	400.00
Membership Development	500.00
NAL Dues	4,600.00
Cost of Name Badges	120.00
Newsletter	100.00
Total 5900 - Member Only expense	7,560.00
Total Expense	293,801.00
Net Income	2,034.00

7:15 PM

04/26/17

Assistance League of Rancho San Dieguito
FY 2017-18 Budget Overview (revised 4/26/17)
June 2017 through May 2018

Accrual Basis

1. Grants revised to more accurately reflect those actually received.
2. Thrift shop sales projected for average sales of \$14000 per month.
3. Spring Fundraiser increased to reflect the income earned from last FY 2016-17.
4. Member Only income based on current membership levels. Actual amount will vary with the addition of new members and various renewal levels.
5. OSB Clothing children increased to \$100,000 (from \$75,00 last FY) to better serve the increased demand from the Middle School Children.
6. Spring Fundraiser expense increased to better project the cost of an evening event.

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.
Information about Form 990 and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2016 calendar year, or tax year beginning 6/01, 2016, and ending 5/31, 2017

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Assistance League of Rancho San Dieguito, 270-F North El Camino Real #368, Encinitas, CA 92024. D Employer identification number 33-0556542. E Telephone number 858.523.9279. G Gross receipts \$ 501,481.

F Name and address of principal officer: Roberta Waterman, Same As C Above. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No.

I Tax-exempt status: 501(c)(3), 501(c) () (insert no.), 4947(a)(1) or 527. J Website: www.alrsd.org. H(c) Group exemption number: 4176.

K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 1993. M State of legal domicile: CA.

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Assistance League of Rancho San Dieguito is an all-volunteer, nonprofit organization whose members are dedicated to making a positive difference in the lives of children and adults affected by trauma, violence and poverty. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3-7a: Number of voting members, independent voting members, individuals employed, volunteers, and unrelated business revenue.

Table with columns: Revenue, Expenses, Not Assets or Fund Balances. Rows 8-19 detailing contributions, program service revenue, investment income, total revenue, grants paid, benefits paid, salaries, fundraising fees, total fundraising expenses, other expenses, and revenue less expenses.

Table with columns: Not Assets or Fund Balances, Beginning of Current Year, End of Year. Rows 20-22 detailing total assets, total liabilities, and net assets or fund balances.

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 Brenda Seitz, Date 9.19.17, Title Treasurer.

Paid Preparer Use Only: Preparer's name Katherine Gluck, Signature Katherine Gluck, Date 9.15.17, PTIN P00858780, Firm's name Katherine Gluck, CPA, Firm's address 703 Pier Ave, B621, Hermosa Beach, CA 90254-3949, Firm's EIN, Phone no 310.406.6256.

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

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.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning 6/01, 2016, and ending 5/31, 2017

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

C Assistance League of Rancho San Dieguito
 270-F North El Camino Real #368
 Encinitas, CA 92024

D Employer identification number 33-0556542

E Telephone number 858.523.9279

G Gross receipts \$ 501,481.

F Name and address of principal officer: Roberta Waterman
Same As C Above

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.alrsd.org **H(c)** Group exemption number ▶ 4176

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: 1993 **M** State of legal domicile: CA

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>Assistance League of Rancho San Dieguito is an all-volunteer, nonprofit organization whose members are dedicated to making a positive difference in the lives of children and adults affected by trauma, violence and poverty.</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
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5
	6	Total number of volunteers (estimate if necessary)	6
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b
Revenue	8	Contributions and grants (Part VIII, line 1h)	238,662.
	9	Program service revenue (Part VIII, line 2g)	250,625.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	120.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	24,826.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	263,608.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	110,119.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	99,468.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	118,052.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	151,841.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	261,960.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	1,648.
	20	Total assets (Part X, line 16)	328,764.
	21	Total liabilities (Part X, line 26)	4,963.
	22	Net assets or fund balances. Subtract line 21 from line 20	323,801.

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: Brenda Seitz Date: _____
 Type or print name and title: Treasurer

Paid Preparer Use Only

Preparer's name: Katherine Gluck Preparer's signature: Katherine Gluck Date: 9.15.17 Check if self-employed PTIN: P00858780
 Firm's name: Katherine Gluck, CPA Firm's EIN: _____
 Firm's address: 703 Pier Ave, B621 Hermosa Beach, CA 90254-3949 Phone no: 310.406.6256

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Assistance League of Rancho San Dieguito is an all-volunteer, nonprofit organization whose members are dedicated to making a positive difference in the lives of children and adults affected by trauma, violence and poverty.

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

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 [X] 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.

4 a (Code:) (Expenses \$ 95,720. including grants of \$ 89,702.) (Revenue \$)

See Schedule O

4 b (Code:) (Expenses \$ 6,967. including grants of \$) (Revenue \$)

Assault Survivor Kits (ASK) - contain new clothing (sweatshirt, sweatpants, underwear, socks and flip flops), toiletries and other supplies for victims of sexual assault. Kits are distributed through local hospitals and crisis centers. Court kits and journals are also provided for the challenging court appearance.

4 c (Code:) (Expenses \$ 4,696. including grants of \$) (Revenue \$)

Other Programs include: Knifty Knitters provide hand-knitted infant layettes for distribution at local military organizations.

Preschool English Literacy Program (PREP) prepares preschoolers for kindergarten by improving English, reading, math, and social interaction skills through various games.

4 d Other program services (Describe in Schedule O.) See Schedule O (Expenses \$ 3,884. including grants of \$ 2,666.) (Revenue \$)

4 e Total program service expenses 111,267.

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 temporarily restricted endowments, permanent endowments, or 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>		X
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <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	

BAA

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
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1 a	3		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1 b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2 a	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.		
2 a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>		
2 b			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3 a			X
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		
3 b			
4 a	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
4 a			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).		
4 b			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 b			X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
5 c			
6 a	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
6 a			X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6 b			
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	
7 a		X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
7 b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 c			X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
7 d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7 g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
7 h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
9 a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
9 b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11 a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b	
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? <i>Note. See the instructions for additional information the organization must report on Schedule O.</i>	13 a	
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	13 b	
c	Enter the amount of reserves on hand.	13 c	
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14 a	X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	

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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 4 columns: Question, Line Number, Yes, No. Rows include: 1a Enter the number of voting members... 12; 1b Enter the number of voting members included in line 1a... 12; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... 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? See Sch O; 8a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: See Schedule O 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 in Schedule O. X

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

Table with 4 columns: Question, Line Number, Yes, No. Rows include: 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. See Schedule O; 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. See Schedule O X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15a 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? X; 15b Other officers or key employees of the organization 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 (or 1024 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.
[X] Own website [X] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in 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. See Schedule O
20 State the name, address, and telephone number of the person who possesses the organization's books and records: Brenda Seitz 270-F North El Camino Real #368 Encinitas CA 92024 858.523.9279

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

1 a 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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
		or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) Roberta Waterman President	40 0	X		X			0.	0.	0.
(2) Stella Ramos Vice President	15 0	X		X			0.	0.	0.
(3) Pat Talmon Vice President	5 0	X		X			0.	0.	0.
(4) Carol Jones Vice President	15 0	X		X			0.	0.	0.
(5) Claudette Chaisson Vice President	15 0	X		X			0.	0.	0.
(6) Judy White Secretary	7 0	X		X			0.	0.	0.
(7) Loie Pinch Secretary	5 0	X		X			0.	0.	0.
(8) Suzie Perry Secretary	10 0	X		X			0.	0.	0.
(9) Brenda Seitz Treasurer	15 0	X		X			0.	0.	0.
(10) Judy Zinger-Weiss Board Member	20 0	X		X			0.	0.	0.
(11) Gail Sachs Board Member	10 0	X		X			0.	0.	0.
(12) Mitzi Lobelson Board Member	5 0	X		X			0.	0.	0.
(13) Jan McEachern Board member	5 0	X		X			0.	0.	0.
(14)									

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) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1 b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							0.	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, or 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

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	1 a Federated campaigns					
	b Membership dues	11,432.				
	c Fundraising events	21,485.				
	d Related organizations					
	e Government grants (contributions)	6,500.				
	f All other contributions, gifts, grants, and similar amounts not included above	211,208.				
	g Noncash contributions included in lines 1a-1f: \$	191,088.				
	h Total. Add lines 1a-1f	250,625.				
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		135.		135.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 21,485. of contributions reported on line 1c). See Part IV, line 18	a	75,130.			
	b Less: direct expenses	b	19,126.			
c Net income or (loss) from fundraising events		56,004.			56,004.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	175,591.				
b Less: cost of goods sold	b	175,591.				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		306,764.	0.	0.	56,139.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,100.	7,100.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	92,368.	92,368.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
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.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	4,000.		4,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	856.		856.	
12 Advertising and promotion	2,302.		1,889.	413.
13 Office expenses				
14 Information technology	2,330.			2,330.
15 Royalties				
16 Occupancy	93,436.		1,200.	92,236.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,768.	1,884.	1,884.	
20 Interest				
21 Payments to affiliates	5,260.		5,260.	
22 Depreciation, depletion, and amortization	108.		108.	
23 Insurance	3,341.		630.	2,711.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Program supplies</u>	6,827.	6,827.		
b <u>Storage rental</u>	5,091.	3,012.	1,039.	1,040.
c <u>Repairs & maintenance</u>	4,886.			4,886.
d <u>Utilities</u>	4,343.			4,343.
e All other expenses	14,046.	76.	3,877.	10,093.
25 Total functional expenses. Add lines 1 through 24e	250,062.	111,267.	20,743.	118,052.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year		
Assets	1	Cash – non-interest-bearing	59,188.	1	33,265.	
	2	Savings and temporary cash investments	224,404.	2	295,977.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use	35,660.	8	52,994.	
	9	Prepaid expenses and deferred charges	2,412.	9	6,744.	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	9,162.		
	b	Less: accumulated depreciation	10b	8,184.	10c	978.
	11	Investments – publicly traded securities		11		
	12	Investments – other securities. See Part IV, line 11.		12		
	13	Investments – program-related. See Part IV, line 11.		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11.	5,924.	15	5,925.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	328,764.	16	395,883.		
Liabilities	17	Accounts payable and accrued expenses	4,348.	17	6,295.	
	18	Grants payable		18		
	19	Deferred revenue	615.	19	9,085.	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	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		25		
	26	Total liabilities. Add lines 17 through 25	4,963.	26	15,380.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets	314,801.	27	368,503.	
	28	Temporarily restricted net assets	9,000.	28	12,000.	
	29	Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances	323,801.	33	380,503.		
34	Total liabilities and net assets/fund balances	328,764.	34	395,883.		

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Form 990 (2016)

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	306,764.
2	Total expenses (must equal Part IX, column (A), line 25)	2	250,062.
3	Revenue less expenses. Subtract line 2 from line 1	3	56,702.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	323,801.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	380,503.

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.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 b	Were the organization's financial statements audited by an independent accountant?		X
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 type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 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?		X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3 a	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
3 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 in Schedule O and describe any steps taken to undergo such audits.		

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SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: **Assistance League of Rancho San Dieguito** Employer identification number: **33-0556542**

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: _____
 - 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						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 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. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	%
16a 33-1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	196,468.	217,678.	218,327.	238,662.	256,625.	1,127,760.
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.	33,155.	45,527.	47,847.	37,854.	69,130.	233,513.
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.	229,623.	263,205.	266,174.	276,516.	325,755.	1,361,273.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1,815.	1,485.	1,700.	1,650.	3,400.	10,050.
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.	0.	0.	0.	0.	0.
c Add lines 7a and 7b.	1,815.	1,485.	1,700.	1,650.	3,400.	10,050.
8 Public support. (Subtract line 7c from line 6.)						1,351,223.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	229,623.	263,205.	266,174.	276,516.	325,755.	1,361,273.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	279.	187.	167.	120.	135.	888.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b.	279.	187.	167.	120.	135.	888.
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.)	229,902.	263,392.	266,341.	276,636.	325,890.	1,362,161.
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. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	99.20 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	99.25 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	0.07 %
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	0.09 %

- 19a **33-1/3% support tests—2016.** 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—2015.** 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? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' 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).		
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? If 'Yes,' provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c	

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? 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.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a** 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).

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? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

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

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

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

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

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

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

Section C -- Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA

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.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013.....			
d From 2014.....			
e From 2015.....			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013.....			
c Excess from 2014.....			
d Excess from 2015.....			
e Excess from 2016.....			

BAA

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.)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

Employer identification number

Assistance League of Rancho San Dieguito

33-0556542

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year.....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?..... <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1..... ▶ \$ _____

(ii) Assets included in Form 990, Part X..... ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1..... ▶ \$ _____

b Assets included in Form 990, Part X..... ▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
 - 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.

- 1 a 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 | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a 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
1 a 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					

- 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 Temporarily restricted endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements		3,188.	2,290.	898.
d Equipment		279.	279.	0.
e Other		5,695.	5,615.	80.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				978.

Part VII Investments – Other Securities.

N/A

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

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

Part VIII Investments – Program Related.

N/A

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)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

N/A

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)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)	

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. See Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2 a		
	b Donated services and use of facilities	2 b		
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2a through 2d		2 e	
3	Subtract line 2e from line 1		3	
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	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4a and 4b		4 c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A

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

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

Part XIII Supplemental Information.

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

Part X - FIN 48 Footnote

The Organization has applied the provisions of Financial Accounting Standards Codification (ASC) 740-10, Accounting for Uncertainty in Income Taxes. Under ASC 740-10, nonpublic enterprises, including nonprofit organizations, are required to report a tax liability when substantial uncertainties exist as to whether certain income is exempt from federal, state and local income tax. As of May 31, 2017, the Organization had no substantial uncertain income tax positions.

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.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

Assistance League of Rancho San Dieguito

Employer identification number

33-0556542

Part I

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Spring Fundrai (event type)	(event type)	None (total number)	(add column (a) through column (c))
REVENUE	1	Gross receipts	95,071.		95,071.
	2	Less: Contributions	21,485.		21,485.
	3	Gross income (line 1 minus line 2)	73,586.		73,586.
DIRECT EXPENSES	4	Cash prizes	1,000.		1,000.
	5	Noncash prizes			
	6	Rent/facility costs	15,678.		15,678.
	7	Food and beverages			
	8	Entertainment	750.		750.
	9	Other direct expenses	1,698.		1,698.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				54,460.

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 column (a) through column (c))
		1	Gross revenue		
DIRECT EXPENSES	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

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

b If 'No,' explain: _____

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

b If 'Yes,' explain: _____

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

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

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

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

SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public
Inspection

Name of the organization

Employer identification number

Assistance League of Rancho San Dieguito

33-0556542

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. **See Part IV**

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	-----							
(2)	-----							
(3)	-----							
(4)	-----							
(5)	-----							
(6)	-----							
(7)	-----							
(8)	-----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **0**

3 Enter total number of other organizations listed in the line 1 table **0**

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 11/03/16

Schedule I (Form 990) (2016)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 School clothing	1,968		89,702.	Cost	School clothing
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Local school district personnel identify children of need. Chapter members monitor selection of school clothing for identified children.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Assistance League of Rancho San Dieguito

33-0556542

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods			191,088.	fmv
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30 a		X
31		X
32 a		X
33		

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

Assistance League of Rancho San Dieguito

33-0556542

Part VI, Section B, Questions 15a-b

The Organization does not have paid personnel, therefore, these questions are not applicable.

Form 990, Part III, Line 4a - Program Service Accomplishments

Operation School Bell (OSB) - provides new school clothing for elementary school and middle school students from low income families in 5 school districts who are identified as "in need" by their school personnel. This program is also extended to children of enlisted families in the Camp Pendleton Marine Base. OSB/Pendleton - provides the children of enlisted families at the Camp Pendleton Marine Base with school clothing and supplies. OSB/Science Camp Scholarships - grants partial scholarships to 6th grade students from low income families who are identified by school administrators. The science camp is an outdoor learning opportunity that provides students with experiential programs to enhance awareness and scientific understanding of the natural world and their connection to it. Through this experience, young learners can become problem solvers and/or leaders even if they do not excel in English and math.

Form 990, Part III, Line 4d - Other Program Services Description

Hug-a-Bear provides plush toy bears to comfort trauma victims. The bears are distributed through local hospitals, fire departments and service agencies.

Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

Voting members approve, by two-thirds vote of members present, the annual assessment for major fundraising activities, all new fundraising events and activities, and all new philanthropic programs. The voting membership also approves the annual budget.

Name of the organization

Employer identification number

Assistance League of Rancho San Diequito

33-0556542

Form 990, Part VI, Line 8 - Explanation of No Contemporaneously Documentation of Meetings

No committee can act on behalf of the governing body.

Form 990, Part VI, Line 11b - Form 990 Review Process

Board members received a copy of the form 990 prior to its filing with a period open for questions and comments.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The conflict of interest policy is reviewed annually at a membership meeting. All members sign a conflict of interest policy when they pay their annual dues.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents and the conflict of interest policy are made available upon request.

ASSISTANCE LEAGUE OF RANCHO SAN DIEGUITO
USE OF SALES AND USE TAX EXEMPTION

A copy of the Non-Profit Organization Sales and Use Tax Exemption is attached. Please use this copy as a master to make any more copies you may need.

With this exemption, no sales tax will be paid on tangible personal property purchased for the purpose of donation to individuals in a distressed financial condition. Items expressly included are:

- 1) Clothing, shoes and personal grooming items for OSB
- 2) Clothing and grooming items for ASK
- 3) Bears for Hug-a-Bear
- 4) Yarn for Knifty-Knitter layettes

Use the exemption only for items specifically listed above. Sales tax must be paid on all purchases of supplies, storage containers, and any items that will not be physically given to individuals in a distressed financial position.

Federal Employer ID No.: 33-0556542
CA Corporate ID No: D-1877561
CA Resale Permit No: SR FHB 99-481040
State Charity Registration
Number: CT92512



STATE BOARD OF EQUALIZATION

450 N STREET MIC.44, SACRAMENTO, CALIFORNIA
(P. O. BOX 942879, SACRAMENTO, CA 94279-0044)
TELEPHONE (916) 445-5187 FAX (916) 324-5998

JOHAN KLEI
First District, Hayward
DEAN F. ANDAL
Second District, Stockton
CLAUDE PARRISH
Third District, Torrance
JOHN CHIANG
Fourth District, Los Angeles
KATHLEEN CONNELL
Controller, Sacramento
E. L. SORENSEN, JR.
Executive Director

June 30, 1999

**NON-PROFIT ORGANIZATION
SALES AND USE TAX EXEMPTION**

The Assistance League of Rancho San Dieguito is exempt from payment of state, local, and district sales and use taxes when purchasing tangible personal property for the purpose of donation to individuals in a distressed financial condition. The exemption does not apply to purchases that will be used in the operation of the organization, such as office supplies.

The Assistance League of Rancho San Dieguito has met the requirements for the exemption by being organized and operated for charitable purposes, having exempt status from income tax by the California Franchise Tax Board, and engaging in the relief of poverty and distress.

The exemption is valid until revoked.

Any questions may be directed to the Compliance Planning and Evaluation Section at the above address and telephone number.

Sincerely,

James E. Speed
Deputy Director
Sales and Use Tax Department

JES:rc

City of Solana Beach Community Grant Program

Request for Financial Assistance

FY 2017-18 APPLICATION

Name of Organization: Boys & Girls Clubs of San Dieguito

Mailing Address: 533 Lomas Santa Fe Drive

City Solana Beach State CA Zip 92075

Contact Person: Ariana Criste

Daytime Phone: 858-755-0138

Evening Phone: 916.878.8216

Email address: Ariana.Criste@gmail.com

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: C0516240 EIN: 95-2470435
3. Has your organization received financial assistance from the City before? Yes
If yes, what activities and which fiscal year? Yes, La Colonia Summer Program 2016 and 2016, Garden Education/ After School STEM Program 2014, College Nights 2013
4. Amount requested for FY 2017-18 \$5,000.00
5. Proposed Total Program Costs: \$14,500.00
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: La Colonia Summer 2017
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
8. Estimated number of S.B. residents to be served by proposed program: 120
9. Program Dates/Location: Boys & Girls Clubs La Colonia Clubhouse- Summer 2017
10. Anticipated Program Objectives or Accomplishments:
Provide enrichment activities at no cost to at-risk youth in the Eden Gardens neighborhood of Solana Beach to support disadvantaged Latino youth academically and interpersonally. This will provide a safe, structured, and positive environment with adult and peer mentorship elements.
11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?
The City's generous financial contribution will be recognized via our social media channels, website, and monthly newsletters, which reach thousands of people monthly.
12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?
Boys & Girls Clubs of San Dieguito constantly searches for funding to support the La Colonia Clubhouse. The USA Swimming Foundation and Office of Justice Programs currently support these programs and we are committed to the longevity of this program. Support from the City of Solana Beach's Community Grant Program will demonstrate this program's success in reaching underserved populations to other foundations and potential donors.
13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Volunteers are integral in providing programs at the La Colonia Clubhouse. Mentors from the community, businesses, and other non-profits form deep bonds with La Colonia youth. Some regular Club volunteers include retired teachers who provide essential academic support. The value that they provide is immeasurable and the Club does not have an existing system to incorporate volunteer time contributions into our programmatic revenue and expenses.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward? BGCSDTO is dedicated to providing positive activities to develop the education, health, self-esteem, and character of youth. We serve the youth who need it most and this is achieved by utilizing revenue from our other six Clubhouses to offset the expenses of the La Colonia Clubhouse. If this program receives partial funding, field trips and enrichment activities will be reduced to reflect our financial constraints.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.



Authorized Signature of Organization

10/31/2017

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.



BOYS & GIRLS CLUBS OF SAN DIEGUITO

BGCSDTO Organizational Budget

Contributions	342,000
Fundraising Revenue	662,000
Grants	250,000
Branches	619,000
Ocean Knoll Program Revenue	100,000
Camps	537,000
Fitness	56,000
Center for a Healthy Lifestyle	82,000
Athletics	498,000
Aquatics	1,053,000
Youth Arts Academy	244,000
Montessori School	995,000
Program Fees Revenue	4,184,000
Rental/Interest/Misc	326,000
TOTAL REVENUE	5,764,000
Wages:	
Branches	500,000
Ocean Knoll Program Payroll	59,000
Camps	302,000
Fitness	40,000
Kids Korps Payroll	-
Center for a Healthy Lifestyle	75,000
Athletics	255,000
Aquatics	666,000
Youth Arts Academy	143,000
Montessori Schools	471,000
Program Salaries & Related	2,511,000
Administration Wages	729,000
Payroll Taxes and Workers Comp - ALL	353,000
Benefits - ALL	215,000
401k - ALL	67,000
Total Wages & Related Expense	3,875,000

GREAT FUTURES START HERE.



BOYS & GIRLS CLUBS
OF SAN DIEGUITO

OTHER EXPENSES:	
Direct Mail Expense	3,000
Donations Expense	6,000
Total Fundraising Expenses	409,000
Branch Program Expenses	54,000
Ocean Knoll Program expenses	3,000
Camps	71,000
Fitness	1,000
Center for a Healthy Lifestyle	17,000
Athletics Program Expenses	174,000
Aquatics Program Expenses	41,000
Youth Arts Academy Program Expenses	12,000
Montessori Program Expenses	30,000
Total Branch Program Expenses	403,000
Overhead Expenses:	
Annual Audit/Tax Return	33,000
Equip Leases	40,000
Insurance	85,000
Janitorial/Maint	170,000
Office Supplies/Postage/Printing	33,000
Merchant Service Charges	115,000
Property Taxes	5,000
Repair & Maintenance	84,000
Staff Events, Licenses/Training, etc	32,000
Utilities & Telephones	246,000
Vehicles	46,000
Technology Expense	20,000
Miscellaneous Administrative Expenses	91,000
Online Registration System Monthly Fees	25,000
Total Overhead Expenses	1,025,000
Total Expenses	5,721,000
NET INCOME (LOSS) FROM OPERATIONS	43,000

GREAT FUTURES START HERE.



BOYS & GIRLS CLUBS
OF SAN DIEGUITO

Interest Expense	37,000
Net Income/(Loss) before Discretionary Fund and Cap Ex	6,000
Depreciation	396,000
Net Income/(Loss) After Depreciation	(390,000)

BALANCE SHEET OVERVIEW JUNE 30, 2017

Operating Cash	43,000	
TOTAL ASSETS	190,000	
TOTAL PROPERTY / EQUIPMENT		9,908,000
TOTAL OTHER ASSETS	49,000	
TOTAL ASSETS	10,415,000	
CURRENT LIABILITIES & CAPITAL		
TOTAL LIABILITIES	872,000	
LONG TERM LIABILITIES	881,000	
TOTAL LIABILITIES	1,753,000	
CAPITAL	8,662,000	
TOTAL LIABILITIES & CAPITAL		10,415,000

GREAT FUTURES START HERE.

BOYS & GIRLS CLUBS OF SAN DIEGUITO

La Colonia Branch Summer Programs

PROGRAM BUDGET:

Athletics & Team Building

Equipment: balls, games, etc.

\$1200

Field Trips

(Del Mar Fair, Sea World, Fleet Science Center, Etc.)

Transportation

\$1500

Admission

\$7000

Educational & Developmental

Activities

Materials- Workbooks, Arts & Crafts, Science Projects, SAT/ACT Preparation, etc.

\$2000

Swim Lessons & Pool Time

Safety Devices (15 youth, 15 adult)

\$500

Swimsuits (60 girls/women, 60 boys/men)

\$1200

TOTAL PROPOSED BUDGET

\$13400

120 youth between the ages of 5 and 17 served each day June through August 8 am- 6pm.

100% of La Colonia members receive full scholarships to attend the Club.

See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015

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

C Name of organization: **BOYS AND GIRLS CLUBS OF SAN DIEGUITO**
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **533 LOMAS SANTA FE DRIVE**
 City or town, state or province, country, and ZIP or foreign postal code: **SOLANA BEACH, CA 92075**

D Employer identification number: **95-2470435**

E Telephone number: **(858) 755-9371**

G Gross receipts \$: **5,971,909**

F Name and address of principal officer:
MARINEKE VANDERVORT
533 LOMAS SANTA FE DRIVE
SOLANA BEACH, CA 92075

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)
H(c) Group exemption number ▶

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

J Website: ▶ **WWW.BGCSANDIEGUITO.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1966** **M** State of legal domicile: **CA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDE POSITIVE ACTIVITIES TO DEVELOP THE EDUCATION, HEALTH, SELF-ESTEEM & CHARACTER OF YOUTH		
	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	22
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	318
	6 Total number of volunteers (estimate if necessary)	6	178
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,542,733	Current Year 1,088,731
	9 Program service revenue (Part VIII, line 2g)	3,455,115	3,827,618
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-105,649	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	342,324	767,039
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,234,523	5,683,388
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	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)		3,127,057	3,570,905
16a Professional fundraising fees (Part IX, column (A), line 11e)		0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 331,609			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,802,653	1,929,481
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,929,710	5,500,386	
19 Revenue less expenses Subtract line 18 from line 12	304,813	183,002	
Not Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 10,760,718	End of Year 10,870,969
	21 Total liabilities (Part X, line 26)	2,541,361	2,199,624
	22 Net assets or fund balances Subtract line 21 from line 20	8,219,357	8,671,345

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: 2016-05-06
 MARINEKE VANDERVORT CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: ELSA A ROMERO
 Preparer's signature: ELSA A ROMERO
 Date: 2016-05-06
 Check if self-employed
 PTIN: P00485021
 Firm's name: ▶ AKT LLP
 Firm's EIN: ▶ 93-0623286
 Firm's address: ▶ 5946 PRIESTLY DRIVE SUITE 200
 CARLSBAD, CA 92008
 Phone no: (760) 431-8440

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

THE BOYS AND GIRLS CLUBS OF SAN DIEGUITO IS AN ORGANIZATION DEDICATED TO PROVIDING POSITIVE ACTIVITIES TO DEVELOP THE EDUCATION, HEALTH, SELF-ESTEEM AND CHARACTER OF YOUTH

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 \$ 513,920 including grants of \$) (Revenue \$ 434,627)
	BGC ATHLETIC PROGRAM 1,636 MEMBERS SERVED - HELPING BOYS AND GIRLS ACHIEVE SUPERIORITY IN THEIR SPORT AND THEMSELVES THROUGH PARTICIPATION IN AFTERSCHOOL ATHLETIC ACTIVITIES MANY OF THESE CHILDREN RECEIVE COLLEGE SCHOLARSHIPS DUE TO THEIR PARTICIPATION
4b	(Code) (Expenses \$ 1,051,576 including grants of \$) (Revenue \$ 1,016,690)
	BGC AQUATICS PROGRAM 1,572 CHILDREN SERVED - HELPING BOYS AND GIRLS ACHIEVE SUPERIORITY IN THEIR SPORT AND THEMSELVES THROUGH PARTICIPATION IN THE NATIONALLY RECOGNIZED RSD SWIM TEAM PROGRAM MANY OF OUR PARTICIPANTS RECEIVE COLLEGE SCHOLARSHIPS OR MOVE ON TO FURTHER THEIR SWIM CAREERS
4c	(Code) (Expenses \$ 573,406 including grants of \$) (Revenue \$ 620,614)
	BGC CAMP PROGRAM 1,956 CHILDREN SERVED - GIVING CHILDREN AN ALTERNATIVE TO SELF DIRECTED ACTIVITIES WHEN SCHOOL IS NOT IN SESSION WHICH CAN INCLUDE GANG OR OTHER CRIMINAL ACTIVITY
See Additional Data	
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 2,335,534 including grants of \$) (Revenue \$ 1,755,687)
4e	Total program service expenses 4,474,436

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 <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? <input checked="" type="checkbox"/>	Yes	
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		No
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		No
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		No
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 <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>	Yes	
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 <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X <input checked="" type="checkbox"/>	Yes	
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 <input checked="" type="checkbox"/>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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		No
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		No
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		No
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)		No
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	Yes	
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		No
a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

<p>21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . .</i></p>	<p>21</p>	<p></p>	<p>No</p>
<p>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></p>	<p>22</p>	<p></p>	<p>No</p>
<p>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></p>	<p>23</p>	<p>Yes</p>	<p></p>
<p>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></p>	<p>24a</p>	<p></p>	<p>No</p>
<p>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .</p>	<p>24b</p>	<p></p>	<p></p>
<p>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? . . .</p>	<p>24c</p>	<p></p>	<p></p>
<p>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .</p>	<p>24d</p>	<p></p>	<p></p>
<p>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></p>	<p>25a</p>	<p></p>	<p>No</p>
<p>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></p>	<p>25b</p>	<p></p>	<p>No</p>
<p>26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II . . .</i></p>	<p>26</p>	<p></p>	<p>No</p>
<p>27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III . . .</i></p>	<p>27</p>	<p></p>	<p>No</p>
<p>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)</p>			
<p>a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28a</p>	<p></p>	<p>No</p>
<p>b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28b</p>	<p></p>	<p>No</p>
<p>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28c</p>	<p></p>	<p>No</p>
<p>29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . .</i></p>	<p>29</p>	<p></p>	<p>No</p>
<p>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></p>	<p>30</p>	<p></p>	<p>No</p>
<p>31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . .</i></p>	<p>31</p>	<p></p>	<p>No</p>
<p>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></p>	<p>32</p>	<p></p>	<p>No</p>
<p>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></p>	<p>33</p>	<p></p>	<p>No</p>
<p>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></p>	<p>34</p>	<p>Yes</p>	<p></p>
<p>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</p>	<p>35a</p>	<p></p>	<p>No</p>
<p>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></p>	<p>35b</p>	<p></p>	<p></p>
<p>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></p>	<p>36</p>	<p></p>	<p>No</p>
<p>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></p>	<p>37</p>	<p></p>	<p>No</p>
<p>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 . . .</p>	<p>38</p>	<p>Yes</p>	<p></p>

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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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)?		No
4b	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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	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?		No
6b	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).		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	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?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	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?		
12b	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.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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		
1a	22		
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 in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	22		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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 in Schedule O		No

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?		No
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?		No
b	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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	Yes	
b	Other officers or key employees of the organization	Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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 in Schedule O)
 Describe in 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
DEBI COX

533 LOMAS SANTA FE DRIVE
 SOLANA BEACH, CA 92075 (858) 755-9371

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, or 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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) TRICK LENIHAN CHAIR	1 00	X		X			0	0	0	
(2) DAVID THOMAS SECRETARY	1 00	X		X			0	0	0	
(3) DOUG REGNIER TREASURER	1 00	X		X			0	0	0	
(4) DOUG FISHER BOARD DEVELOPMENT CHAIR	1 00	X					0	0	0	
(5) BEN HAMSON HR CHAIR	1 00	X					0	0	0	
(6) LARRY MCDONALD BOARD MEMBER	1 00	X					0	0	0	
(7) BARBARA HARPER BOARD MEMBER	1 00	X					0	0	0	
(8) PATTY MAYSENT BOARD MEMBER	1 00	X					0	0	0	
(9) MICHAEL WINSTEAD BOARD MEMBER	1 00	X					0	0	0	
(10) CORY GRANT BOARD MEMBER	1 00	X					0	0	0	
(11) P MARTIN PETERS BOARD MEMBER	1 00	X					0	0	0	
(12) DOUGLAS O ALLRED BOARD MEMBER	1 00	X					0	0	0	
(13) TIM CALLAN MEMBER	1 00	X					0	0	0	
(14) CRAIG M GARNER BOARD MEMBER	1 00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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) MICHAEL GROVE BOARD MEMBER	1 00	X						0	0	0
(16) MATTHEW HOLDER BOARD MEMBER	1 00	X						0	0	0
(17) JOHN MELICAN BOARD MEMBER	1 00	X						0	0	0
(18) MARK LEE BOARD MEMBER	1 00	X						0	0	0
(19) KEN HOLMAN BOARD MEMBER	1 00	X						0	0	0
(20) TARA AGEN BOARD MEMBER	1 00	X						0	0	0
(21) JULIE WENZEL BOARD MEMBER	1 00	X						0	0	0
(22) BARBARA ELZTROTH MEMBER	1 00	X						0	0	0
DAVID H CREAM PRESIDENT/CEO	40 00			X				174,489	0	13,408
(24) JOE BENJAMIN AQUATICS DIRECTOR	40 00				X			114,554	0	12,537

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	289,043	0	25,945

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 **2**

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

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

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 2,664				
	b Membership dues 1b				
	c Fundraising events 1c 9,325				
	d Related organizations 1d 701,334				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 375,408				
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		1,088,731		
Program Service Revenue	2a AQUATICS	Business Code 900099	1,016,690	1,016,690	
	b MONTESSORI	900099	808,115	808,115	
	c CAMPS	900099	652,666	652,666	
	d REGISTRATION FEES	900099	589,383	589,383	
	e ATHLETIC PROGRAMS	900099	434,627	434,627	
	f All other program service revenue		326,137	326,137	
	g Total. Add lines 2a-2f		3,827,618		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶				
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties ▶				
		(i) Real (ii) Personal			
	6a Gross rents 339,151				
	b Less rental expenses 0				
	c Rental income or (loss) 339,151				
	d Net rental income or (loss) ▶		339,151		339,151
		(i) Securities (ii) Other			
	7a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ▶				
	8a Gross income from fundraising events (not including \$ 9,325 of contributions reported on line 1c) See Part IV, line 18				
	a 643,427				
b Less direct expenses b 288,521					
c Net income or (loss) from fundraising events ▶		354,906		354,906	
9a Gross income from gaming activities See Part IV, line 19					
a 3,200					
b Less direct expenses b 0					
c Net income or (loss) from gaming activities ▶		3,200		3,200	
10a Gross sales of inventory, less returns and allowances					
a					
b Less cost of goods sold b					
c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue		Business Code			
11a INSURANCE PROCEEDS	900099	69,782		69,782	
b					
c					
d All other revenue					
e Total. Add lines 11a-11d ▶		69,782			
12 Total revenue. See Instructions ▶		5,683,388	3,827,618	0	767,039

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	188,567	54,684	82,970	50,913
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,815,324	2,365,367	275,663	174,294
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	322,551	217,763	86,479	18,309
10 Payroll taxes	244,463	176,660	51,232	16,571
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	58,275		58,275	
d Lobbying				
Professional fundraising services See Part IV, line 17				
Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	59,674	59,674		
12 Advertising and promotion	31,283	15,157	75	16,051
13 Office expenses	196,645	176,633	11,845	8,167
14 Information technology				
15 Royalties				
16 Occupancy	291,638	269,892	21,724	22
17 Travel	49,891	43,812	5,288	791
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	52,842	52,842		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	388,321	388,321		
23 Insurance	89,132	77,980	11,152	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a PROGRAM SUPPLIES	324,048	305,519		18,529
b MISCELLANEOUS	233,120	131,539	77,353	24,228
c JANITORIAL	124,355	118,745	5,610	
d STAFF DEVELOPMENT	30,257	19,848	6,675	3,734
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,500,386	4,474,436	694,341	331,609
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	65,255	1	160,358
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	23,148	4	11,775
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	71,653	9	52,837
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 15,204,223		
	b Less accumulated depreciation	10b 4,827,210	10,600,652	10c 10,377,013
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	0	15	268,986
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,760,718	16	10,870,969	
Liabilities	17 Accounts payable and accrued expenses	673,394	17	543,598
	18 Grants payable		18	
	19 Deferred revenue	472,106	19	699,522
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	618,366	23	0
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	777,495	25	956,504
	26 Total liabilities. Add lines 17 through 25	2,541,361	26	2,199,624
Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	8,129,345	27	8,285,514
	28 Temporarily restricted net assets	90,012	28	385,831
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	8,219,357	33	8,671,345	
34 Total liabilities and net assets/fund balances	10,760,718	34	10,870,969	

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)	5,683,388
2	Total expenses (must equal Part IX, column (A), line 25)	5,500,386
3	Revenue less expenses Subtract line 2 from line 1	183,002
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	8,219,357
5	Net unrealized gains (losses) on investments	268,986
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	8,671,345

Part XII Financial Statements and Reporting

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

1	Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other	Yes	No
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	2a	No
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 type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or completion 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 in Schedule O		2c	Yes
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?		3a	No
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 in Schedule O and describe any steps taken to undergo such audits		3b	

Software ID:

Software Version:

EIN: 95-2470435

Name: BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code)	(Expenses \$	2,335,534	including grants of \$	(Revenue \$	1,755,687)
<p>THE BOYS & GIRLS CLUBS OF SAN DIEGUITO BIG EIGHT SPORTS CONFERENCE SPONSORS 10 SPORTS GIRLS VOLLEYBALL, CROSS COUNTRY, FLAG FOOTBALL, BOYS BASKETBALL, GIRLS FIELD HOCKEY, WRESTLING, TRACK & FIELD, GOLF, GIRLS BASKETBALL AND BOYS AND GIRLS SOCCER TEAMS COMPETE WITH LOCAL MIDDLE SCHOOLS IN-AND-OUTSIDE THE DISTRICT THE ATHLETIC PROGRAM OFFERS A WIDE VARIETY OF SPORTS LEAGUES, SPORTS CAMPS AND ATHLETIC ACTIVITIES FOR YOUTH OF ALL AGES WE ALSO OFFER SCHOOL ATHLETIC PROGRAMS IN THE AREA THE CLUB SERVES, ATHLETIC PROGRAMS FOR CLUB MEMBERS AND USE OF ATHLETIC FACILITIES BY COMMUNITY OUR MONTESSORI SCHOOLS PROVIDES A NURTURING, CHILD-CENTERED ENVIRONMENT WHERE INDIVIDUAL NEEDS ARE MET AT EACH STAGE OF DEVELOPMENT THE MONTESSORI MANIPULABLE MATERIALS ARE SPECIFICALLY DESIGNED TO ENHANCE THE CHILD'S NATURAL LOVE OF LEARNING ALONG WITH A PROGRAM LED BY WELL TRAINED, DEVOTED TEACHERS FACILITATING GROWTH ON EVERY LEVEL A BALANCED CURRICULUM OF ACADEMICS AS WELL AS MUSIC, ART, GYMNASTICS, CULTURAL STUDIES AND CHARACTER DEVELOPMENT HELP PROMOTE A WELL-ROUNDED INDIVIDUAL WHO HAS THE HIGHEST POTENTIAL TO EXCEL IN EVERY AREA OF LIFE</p>					

SCHEDULE A (Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2014

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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number

95-2470435

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 11, 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)
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 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)
An organization organized and operated exclusively to test for public safety See section 509(a)(4).
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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
f Enter the number of supported organizations
g Provide the following information about the supported organization(s)

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First 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

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14

15 Public support percentage for 2013 Schedule A, Part II, line 14 15

- 16a** **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶
- b** **33 1/3% support test—2013.** 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—2014.** 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—2013.** 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 9 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	552,234	542,170	804,471	1,542,733	1,088,731	4,530,339
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	4,457,296	4,707,870	3,387,151	3,455,115	3,827,618	19,835,050
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	5,009,530	5,250,040	4,191,622	4,997,848	4,916,349	24,365,389
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	5,000	5,000	99,000	17,000	10,000	136,000
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	5,000	5,000	99,000	17,000	10,000	136,000
8 Public support (Subtract line 7c from line 6)						24,229,389

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	5,009,530	5,250,040	4,191,622	4,997,848	4,916,349	24,365,389
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	347,899	341,165	378,866	283,702	339,151	1,690,783
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	347,899	341,165	378,866	283,702	339,151	1,690,783
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	251,053	209,111	74,453	14,038	354,906	903,561
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				44,777	69,782	114,559
13 Total support. (Add lines 9, 10c, 11, and 12.)	5,608,482	5,800,316	4,644,941	5,340,365	5,680,188	27,074,292
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	89.490%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	90.320%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	6.240%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	6.300%

- 33 1/3% support tests—2014.** 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
- 33 1/3% support tests—2013.** 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 on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).		
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 (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
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))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		
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? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV Supporting Organizations (continued)

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/>	The organization satisfied the Activities Test Complete line 2 below
b	<input type="checkbox"/>	The organization is the parent of each of its supported organizations Complete line 3 below
c	<input type="checkbox"/>	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)
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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
b		Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
3 Parent of Supported Organizations Answer (a) and (b) below.		
a		Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
b		Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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. 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		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3		
5	Depreciation and depletion		
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)		
7	Other expenses (see instructions)		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)		

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		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	Total (add lines 1a, 1b, and 1c)		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets		
3	Subtract line 2 from line 1d		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)		
6	Multiply line 5 by 0.35		
7	Recoveries of prior-year distributions		
8	Minimum Asset Amount (add line 7 to line 6)		

Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	
2	Enter 85% of line 1	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	
4	Enter greater of line 2 or line 3	
5	Income tax imposed in prior year	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	
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)	

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	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7			
\$ _____			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

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).

Facts And Circumstances Test	

Return Reference	Explanation

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number 95-2470435

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form with multiple sections: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items, 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
- 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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

Part V Endowment Funds. Complete if the organization answered "Yes" to 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					
Contributions					
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					

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 Temporarily restricted endowment ▶
- The percentages in lines 2a, 2b, and 2c should equal 100%

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to 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		26,872		26,872
b Buildings		14,067,304	4,474,156	9,593,148
c Leasehold improvements				
Equipment		1,110,047	353,054	756,993
Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				10,377,013

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	4,356,582
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	268,986	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	-894,458	
e	Add lines 2a through 2d			2e -625,472
3	Subtract line 2e from line 1			3 4,982,054
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	701,334	
c	Add lines 4a and 4b			4c 701,334
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5 5,683,388

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,660,768
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	861,716	
e	Add lines 2a through 2d			2e 861,716
3	Subtract line 2e from line 1			3 4,799,052
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	701,334	
c	Add lines 4a and 4b			4c 701,334
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5 5,500,386

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

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATIONS FOLLOW ACCOUNTING STANDARDS GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA RELATED TO THE RECOGNITION OF UNCERTAIN TAX POSITIONS THE ORGANIZATIONS RECOGNIZE ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS AS PART OF THE STATEMENTS OF ACTIVITIES, WHEN APPLICABLE MANAGEMENT HAS DETERMINED THAT THE ORGANIZATIONS HAVE NO UNCERTAIN TAX POSITIONS AT JUNE 30, 2015 OR 2014 AND THEREFORE NO AMOUNTS HAVE BEEN ACCRUED
PART XI, LINE 2D - OTHER ADJUSTMENTS	REVENUES PER CONSOLIDATED GAAP STATEMENTS -894,458
PART XI, LINE 4B - OTHER ADJUSTMENTS	CONSOLIDATED FINANCIAL STATEMENTS - ELIMINATING ENTRIES 701,334
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES PER CONSOLIDATED GAAP STATEMENTS 861,716
PART XII, LINE 4B - OTHER ADJUSTMENTS	CONSOLIDATED FINANCIAL STATEMENTS - ELIMINATING ENTRIES 701,334

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2014

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization
BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number

95-2470435

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten 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						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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

Part II Fundraising Events. Complete if the organization answered "Yes" to 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	
		YOUTH OF THE YEAR GALA (event type)	CHIP-IN FOR KIDS GOLF (event type)	3 (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts	182,975	209,810	259,967	652,752
	2	Less Contributions	4,875	4,450		9,325
	3	Gross income (line 1 minus line 2)	178,100	205,360	259,967	643,427
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	2,700	355		3,055
	6	Rent/facility costs		50,000	4,700	54,700
	7	Food and beverages	38,599	12,000	4,000	54,599
	8	Entertainment	6,000			6,000
	9	Other direct expenses	21,361	2,651	146,155	170,167
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(288,521)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶				354,906

Part III Gaming. Complete if the organization answered "Yes" to 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			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

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

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

b If "No," explain _____

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

b If "Yes," explain _____

- 1. Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activities conducted in

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

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

Name

Address

- 16 Gaming manager information
 - Name
 - Gaming manager compensation \$ _____
 - Description of services provided

- Director/officer Employee Independent contractor
- 17 Mandatory distributions
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

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

Return Reference	Explanation

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization
BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number
95-2470435

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a	No
	4b	No
	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5a	No
	5b	No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6a	No
	6b	No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 DAVID H CREAM, PRESIDENT/CEO	(i) 174,489 (ii) 0	0 0	0 0	0 0	13,408 0	187,897 0	0 0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Name of the organization
BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number

95-2470435

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BY-LAWS WERE RESTATED AS OF 08/20/14
FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS REVIEWED BY FINANCE COMMITTEE CHAIR PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS AN AGENDA ITEM AT ONE BOARD MEETING PER YEAR
FORM 990, PART VI, SECTION B, LINE 15	THE PERFORMANCE REVIEW IS DONE BY THE BOARD GOVERNANCE COMMITTEE THE BOARD CHAIR DISCUSSE S THE PERFORMANCE REVIEW WITH THE CEO AND ESTABLISHES THE COMPENSATION FOR THE YEAR
FORM 990, PART VI, SECTION C, LINE 18	THE 990 IS KEPT ON FILE FOR PUBLIC INSPECTION UPON REQUEST AT 533 LOMAS SANTA FE DRIVE SOLANA BEACH, CA 92075
FORM 990, PART VI, SECTION C, LINE 19	THE DOCUMENTS ARE KEPT ON FILE FOR PUBLIC INSPECTION UPON REQUEST AT 533 LOMAS SANTA FE DRIVE, SOLANA BEACH, CA 92075

2014

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
BOYS AND GIRLS CLUBS OF SAN DIEGUITO

Employer identification number
95-2470435

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BOYS AND GIRLS CLUBS OF SAN DIEGUITO FOUNDATION PO BOX 871 SOLANA BEACH, CA 92075 95-3201906	TO PROVIDE SUPPORT TO THE BOYS AND GIRLS CLUBS OF SAN DIEGUITO	CA	501(C)(3)	LINE 11C, III FI	N/A		

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e	Yes	
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n	Yes	
1o		No
1p	Yes	
1q	Yes	
1r		No
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
------------------	-------------



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248222025
Nov. 15, 2011 LTR 4168C E0
95-2470435 000000 00

00016448
BODC: TE

THE BOYS AND GIRLS CLUBS OF
SAN DIEGUITO
533 LOMAS SANTA FE DR
SOLANA BEACH CA 92075-1323

010296

Employer Identification Number: 95-2470435
Person to Contact: R CLEMONS
Toll Free Telephone Number: 1-877-829-5500

Dear TAXPAYER:

This is in response to your Nov. 03, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in AUGUST 1967.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248222025
Nov. 15, 2011 LTR 4168C E0
95-2470435 000000 00
00016449

THE BOYS AND GIRLS CLUBS OF
SAN DIEGUITO
533 LOMAS SANTA FE DR
SOLANA BEACH CA 92075-1323

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



S. A. Martin, Operations Manager
Accounts Management Operations



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

All Applications MUST BE RECEIVED by **5:00 p.m. Tuesday, October 31, 2017.**

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: Casa de Amistad, Centro de Enseñanza

Mailing Address: 120 Stevens Avenue

City: Solana Beach

State: CA

Zip: 92075

Contact Person: Nicole Mione-Green

Daytime Phone: 858-509-2590

Evening Phone: 858-509-2590

Email Address: director@casadeamistad.org

- 1. W-9 must be attached**
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
- 2. A copy of the certificate of California Nonprofit Corporation must be attached Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number:**
See attached.
- 3. Has your organization received financial assistance from the City before?**
Yes, Casa de Amistad has received funding from the City before.
If yes, what activities and which fiscal year? See attached.
- 4. Amount requested for FY 2017-18:** \$5,000.00
- 5. Proposed Total Program Costs:** \$120,179.00
(Includes all estimated costs to conduct proposed activity/program.)
- 6. Title of Proposed Program/Service:**
Study Companions: DREAMS+TECH Initiative (Design, Research, Engineering, Art, Math, Science and Technology)
- 7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:**
Our Study Companions: DREAMS+TECH Initiative is to increase the time low-income underserved students have access to Design, Research, Engineering, Art, Math,

Science, and Technology activities outside of school hours. Funds will be used to recruit and train quality volunteers who are currently working in STEM fields. We will continue to offer STEM-focused enrichment activities. Activities will be offered to all students in preschool through twelfth grade. We will also be able to close the digital divide that exists in our community by making technology accessible to all students and parents.

The DREAMS+TECH initiative has been added to our program because homework has changed significantly over the past few years. Many elementary students no longer have "traditional" homework. Significant time is now being spent accessing web-based learning. Casa de Amistad is a space where students can access technology with the support of a highly trained mentor/tutor.

We are also encouraging our students and volunteers to engage in project based learning. Project based learning is a teaching method in which students gain knowledge and skills by working for an extended period of time to investigate and respond to an authentic, engaging and complex question, problem, or challenge

8. **Estimated number of S.B. residents to be served by proposed program:**

Casa de Amistad serves approximately 214 students from low socio-economic backgrounds on a weekly basis. 118 students (56% of program participants) are Solana Beach residents. More than 200 volunteers act as mentors/tutors. 46 volunteers (21% of total volunteers) are Solana Beach residents.

9. **Program Dates/Location:**

Ongoing throughout the year. Our location is 120 Stevens Avenue, Solana Beach, CA 92075.

10. **Anticipated Program Objectives or Accomplishments:**

Casa de Amistad is providing low-income, underserved children, teens, and their families in coastal North County San Diego with tutoring, educational support, and character development. We believe all children deserve the educational opportunities and the support of their families to chart their course for success and become leaders in their community.

We are inspiring the next generation of leaders through tutoring, mentoring, music, leadership training, and character development.

(See attached)

11. **How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?**

The City's financial contribution will be recognized in all written and oral communication. Casa de Amistad will acknowledge the City at our end of the year celebration and on our website.

12. **Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?**

Yes, Casa de Amistad will receive matching funds and grants. Funds will be applied to the program. The City's demonstrated commitment to this vulnerable population allows Casa de Amistad to leverage support to receive additional funding.

13. **Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?**

Our primary volunteer opportunity is our Study Companions Program. Students meet twice weekly for 1.5 hours from 4:15-5:45 PM or 6:00-7:30 PM on Tuesdays and Thursdays with a volunteer who has been identified to help the student with school work and character development. Tutors/mentors focus on basic Common Core academic skills such as English language arts and STEM-related subject matter, working to develop skills that ensure academic success and the ability to compete across the board. Hundreds of volunteers work with our students on a weekly basis. For more information regarding volunteer involvement please see attached page.

14. **If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?**

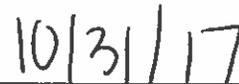
Casa de Amistad will move forward with the DREAMS+TECH Initiative even if we are only awarded partial funding. Unfortunately, we will need to scale back programming if we are not able to fully fund the program.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.



Authorized Signature of Organization



Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

3. History of Financial Assistance from the City

2016-2017: Step up Stem

2015-2016: Study Companions Program

2014-2015: PEP! Program

2013-2014: Parents in Action

2008-2009: Computer Equipment

2006-2007: AV Equipment

10.

Casa de Amistad fills the gap for children from low-income households through our services to students and families. These families, who could not otherwise find or afford supplemental assistance for their children or teens, have the ability to find help at Casa de Amistad. CDA's programs are immersed and involved in the community of Solana Beach. Our organization has been a strongly recognized fixture in the community, noted among the public for its work with students, and appreciated among families for the services and space the program provides to their children. In short, CDA is very much a community organization and partner.

Casa de Amistad services instill skills, student confidence, and a sense of value in learning. This increases participant motivation, academic success, school graduation rates, and continuation on to higher education.

As a result, students, families, and the entire community benefit. Our services are targeted to encourage this at risk youth population to not drop out of school so they don't fall into the trends that are attached with those who do not finish high school (i.e. unemployment, unskilled work, skills lacking to advance, and non-livable wages).

Casa de Amistad also acts as a bridge between families and their children's schools, making information and the option to seek out information about their child more accessible. Casa de Amistad communicates frequently with parents regarding their children's progress, thus facilitating the conversation between home and school. Studies show that of the Latinos who graduate high school, 7 out of 10 of these students lack adequate preparation to pursue higher education at the university level. Socioeconomic factors such as a lack of financial resources to afford educational resources, language barriers, parent literacy capabilities, and lack of parental supervision all affect student academic success.

Casa de Amistad is unique in that while academics is the primary focus of our programs, it is not the only focus. Our volunteers act as mentors to their students, offering both academic and emotional support.

Students benefit from the relationship they build with their mentors every week, and some students stay with the same mentor year after year, resulting in long-lasting mentor-mentee relationships. Mentor

relationships provide many benefits to students, including improved academic performance, enabling trust-building, and the cultivation of meaningful connections.

13.

On July 5, 2017, after a rigorous certification process, Casa de Amistad officially became a Service Enterprise Organization. This is a great honor for Casa de Amistad- as we are the only nonprofit organization in coastal North County San Diego to receive this distinction.

- A Service Enterprise is an organization that fundamentally leverages volunteers and their skills across all levels of the organization to successfully deliver on its social mission.
- Service Enterprises require strong and well developed human resource management practices.
- Less than 15% of organizations nationwide can be characterized as Service Enterprises.
- For every \$1 an organization invests in effective volunteer engagement, they can expect \$3-\$6 in return.
- The average SE Certified organization experiences a 23% increase in volunteerism annually.
- When an organization leverages volunteers and achieves an effective volunteer management model, not only do they lead and manage their organizations better, but they are also significantly more adaptable, sustainable and better resourced to do their work.

DREAMS+TECH



SCIENCE



RESEARCH



ART & TECH



DESIGN



ENGINEERING &
MATH

**Casa de Amistad
2017-2018 Fiscal Year Operating Budget**

	G&A	Study Companions	Summer	Preschool	Leadership	STEM	Parenting	Music	TOTAL
SUPPORT & REVENUE									
4010 · Individual contribution	25,098	46,085			3,775				74,958
4011 · SBPC Contributions		5,000							5,000
4030 · Fundraising Event Income	66,650	16,502							83,152
4015 · Alternative Christmas Market	2,000	2,000							4,000
4016 · Student Family Donations		14,900					1,555		16,455
4019 · Casa Parent Raffle		4,000							4,000
4210 · Corporate/business grants		14,400				6,100			20,500
4230 · Foundation/Non Profit grants	22,000	25,034	4,789	4,442	3,775	10,000	10,000	7,855	84,120
Total Support & Revenue	115,748	127,921	4,789	4,442	3,775	16,100	11,555	7,855	292,185
EXPENSES									
6001 · Salary/ Hourly Pay	52,330	79,941	3,010		6,210	7,210	19,951	3,850	172,502
6003 · Employer Payroll taxes	4,710	7,195	271		559	649	1,796	347	15,525
6004 · Worker Compensation Insurance	521	521	521		521	521	521	521	3,648
6007 · Staff Development		1,500							1,500
6008 · Employee Benefits	2,700								2,700
6002 · Payroll Processing Expenses	71	71	71		71	71	71	71	496
6700 · Travel									0
6101 · Fundraising Expenses	25,000								25,000
6520 · Supplies		2,500	1,000			1,500			5,000
6516 · Nutrition		3,000			2,000		2,000		3,000
6503 · Character Program Expenses		3,000				2,200			4,000
6505 · Parties and Celebrations									3,000
6519 · Field Trips									2,200
6402 · Computer Hardware Supplies	1,000								1,000
6403 · Office Equipment & Decor	500								500
6509 · Board Meeting Expenses	650								650
6510 · Personal Background Checks			2,000						2,000
6511 · Gifts, Awards, Recognition	600		800						600
6512 · Tutor Expense			500						800
6103 · Casa Parent Fundraiser									500
6404 · Software Expense	170								170
6513 · Communications & Outreach	5,000								5,000
6406 · Postage, shipping, delivery	1,000								1,000
6515 · Preschool program Expenses									1,000
6301 · Development Consultant Expenses	5,000								5,000
6201 · Storage Rental	1,100								1,100
6006 · Insurance - other	2,300								2,300
6501 · Advertising	1,000								1,000
8004 · Misc. Expense	1,000								1,000
6202 · Facilities Fee	3,000	7,000							10,000
6517 · Music Fees							10,000		10,000
6518 · Scholarship	15,000				75,000				75,000
6303 · Accounting	5,750								15,000
6302 · Legal & CPA	1,500								5,750
8001 · Square Inc. Charges	200								1,500
8002 · PayPal Charges	300								200
8003 · Bank Expense									300
Total Expenses	128,402	108,028	3	0	84,361	12,151	24,339	14,789	376,941

Casa de Amistad

2017-2018 Fiscal Year Study Companions: DREAMS +TECH

Project Budget

SUPPORT & REVENUE

Individual Contributions	\$46,085.00
SBPC Contribution	\$5,000.00
Fundraising Event Donations	\$16,502.00
Alternative Christmas Market	\$2,000.00
Casa Parent Raffle	\$4,000.00
Corporate & Business Grants	\$19,558.00
Foundation & Trust Grants	\$27,034.00
Total Support & Revenue	\$120,179.00

EXPENSES

Salary/ Hourly Pay	\$87,151.00
Employer Payroll taxes	\$7,844.00
Worker Compensation Insurance	\$1,042.00
Staff Development	\$1,500.00
Payroll Processing Expenses	\$142.00
Supplies	\$4,000.00
Nutrition	\$3,000.00
Parties and Celebrations	\$3,000.00
Personal Background Checks	\$2,000.00
Field Trips	\$2,200.00
Tutor Expense	\$800.00
Casa Parent Fundraiser	\$500.00
Facilities Fee	\$7,000.00
Total Expenses	\$120,179.00

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Casa de Amistad, Centro de Enseñanza	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) A Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) 120 Stevens Avenue	Requester's name and address (optional)
	6 City, state, and ZIP code Solana Beach, CA 92075	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	Employer identification number																
<table border="1" style="width: 100%; height: 30px;"> <tr> <td style="width: 15%;"></td> </tr> </table>									<table border="1" style="width: 100%; height: 30px;"> <tr> <td style="width: 15%;"></td> </tr> </table>								
or																	
<table border="1" style="width: 100%; height: 30px;"> <tr> <td style="width: 15%;"></td> </tr> </table>																	

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ Madey Yui Green	Date ▶ 10/31/17
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **OCT 27 2006**

CASA DE AMISTAD CENTRO DE ENSANANZA
120 STEVENS AVE
SOLANA BEACH, CA 92075-0000

Employer Identification Number:
26-0016331

DLN:
17053259778006

Contact Person:
JACOB A MCDONALD ID# 31649

Contact Telephone Number:
(877) 829-5500

Public Charity Status:
170 (b) (1) (A) (vi)

Dear Applicant:

Our letter dated May 2002, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 1286
RANCHO CORDOVA CA 95741-1286

In reply refer to
755:G :RWN

June 12, 2002

CASA DE AMISTAD CENTRO DE ENSEANZA
120 STEVENS AVE
SOLANA BEACH CA 92075-2039

Purpose : CHARITABLE
Code Section : 23701d
Form of Organization : Corporation
Accounting Period Ending: December 31
Organization Number : 2356814

You are exempt from state franchise or income tax under the section of the Revenue and Taxation Code indicated above.

This decision is based on information you submitted and assumes that your present operations continue unchanged or conform to those proposed in your application. Any change in operation, character, or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address must also be reported.

In the event of a change in relevant statutory, administrative, judicial case law, a change in federal interpretation of federal law in cases where our opinion is based upon such an interpretation, or a change in the material facts or circumstances relating to your application upon which this opinion is based, this opinion may no longer be applicable. It is your responsibility to be aware of these changes should they occur. This paragraph constitutes written advice, other than a chief counsel ruling, within the meaning of Revenue and Taxation Code Section 21012(a)(2).

You may be required to file Form 199 (Exempt Organization Annual Information Return) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. Please see annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax

June 12, 2002

CASA DE AMISTAD, CENTRO DE ENSEANZA

ENTITY ID : 2356814

Page 2

under Section 23731 of the Code. In this event, you are required to file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 5th month (4 1/2 months) after the close of your annual accounting period.

Please note that an exemption from federal income or other taxes and other state taxes requires separate applications.

A copy of this letter has been sent to the Registry of Charitable Trusts.

R NORTON
EXEMPT ORGANIZATIONS
BUSINESS ENTITIES SECTION
TELEPHONE (916) 845-4178

EO :

CC :K. MICHAEL GARRETT, ATTORNEY AT LAW

COPY

Casa De Amistad
Profit & Loss
 July 2016 through June 2017

	Jul '16 - Jun 17
Ordinary Income/Expense	
Income	
4000 · Contributed support	
4010 · Individual contribution	78,869.29
4011 · SBPC Contributions	5,400.00
4015 · Alternative Christmas Market	3,829.74
4016 · Student Family Donations	14,753.50
4019 · Casa Parent Raffle	2,313.00
4020 · Book Sale	62.60
4030 · Fundraising Event Income	
4031 · Fundraising Event Ticket Sales	17,510.00
4032 · Fundraising Event Donations	43,880.00
4033 · Fundraising Event Auction Sales	22,030.00
4034 · Fundraising Event Raffle	3,294.95
Total 4030 · Fundraising Event Income	86,714.95
4210 · Corporate/business grants	11,365.02
4230 · Foundation/Non Profit grants	50,950.00
Total 4000 · Contributed support	254,258.10
5000 · Earned revenues	
5310 · Interest-savings/short-term inv	101.78
5320 · Dividends & interest-securities	2,171.01
5490 · Miscellaneous revenue	0.99
Total 5000 · Earned revenues	2,273.78
Total Income	256,531.88
Gross Profit	256,531.88
Expense	
6800 · Scholarships	20,922.84
6000 · Personnel Expenses	
6001 · Salary/ Hourly Pay	172,140.14
6002 · Payroll Processing Expenses	708.00
6003 · Employer Payroll taxes	13,959.06
6004 · Worker Compensation Insurance	3,384.99
6005 · Paid Time Off Expense	930.76
6006 · Insurance - other	2,294.97
6007 · Staff Development	421.62
Total 6000 · Personnel Expenses	193,839.54
6100 · Fundraisers	
6101 · Fundraising Expenses	23,371.99
6103 · Casa Parent Fundraiser	348.05
Total 6100 · Fundraisers	23,720.04
6200 · Occupancy Expenses	
6201 · Storage Rental	1,137.00
6202 · Facilities Fee	11,000.01
Total 6200 · Occupancy Expenses	12,137.01
6300 · Professional Fees	
6302 · Legal & CPA	5,777.00
6303 · Accounting	16,871.84
Total 6300 · Professional Fees	22,648.84

11:21 AM

10/31/17

Accrual Basis

Casa De Amistad
Profit & Loss
 July 2016 through June 2017

	Jul '16 - Jun 17
6400 · Office Expenses	
6402 · Computer Hardware Supplies	549.33
6403 · Office Equipment & Decor	700.94
6406 · Postage, shipping, delivery	911.03
	2,161.30
Total 6400 · Office Expenses	
6500 · Other Operation Expenses	
6520 · Supplies	5,211.66
6519 · Field Trips	2,278.59
6517 · SD Youth Symphony	13,332.81
6516 · Nutrition	2,978.67
6501 · Advertising	92.93
6503 · Character Program Expenses	738.62
6505 · Parties and Celebrations	3,704.71
6509 · Board Meeting Expenses	277.75
6510 · Personal Background Checks	1,358.00
6511 · Gifts, Awards, Recognition	594.50
6512 · Tutor Expense	726.77
6513 · Communications & Outreach	920.92
6500 · Other Operation Expenses - Other	49.15
	32,265.08
Total 6500 · Other Operation Expenses	
6600 · Business expenses	
6602 · Organizational (corp) Expense	95.00
	95.00
Total 6600 · Business expenses	
8000 · Other Expenses	
8001 · Square, Inc. Charges	1,328.09
8002 · PayPal Charges	197.59
8003 · Bank Charges	829.78
8004 · Misc. Expense	750.96
	3,106.42
Total 8000 · Other Expenses	
8100 · Depreciation/ Amortization Exp	2,292.61
	313,188.68
Total Expense	
Net Ordinary Income	-56,656.80
Other Income/Expense	
Other Income	
9100 · Realized gain/(loss)	987.56
9000 · Unrealized gain (loss)	7,676.44
	8,664.00
Total Other Income	
Net Other Income	8,664.00
Net Income	-47,992.80

Casa De Amistad
Statement of Financial Position
 As of June 30, 2017

	Jun 30, 17
ASSETS	
Current Assets	
Checking/Savings	
1070 · Paypal	38.54
1050 · City National Bank - Checking	10,040.00
1060 · City National Bank-Money Market	90,144.48
1010 · Union Bank - Checking	77,397.72
1020 · Union Bank - Savings	77,999.18
Total Checking/Savings	255,619.92
Other Current Assets	
1500 · Union Bank Investments x7115	100,043.09
1400 · Rancho Santa Fe Fund	209,980.38
1310 · Prepaid Items	1,046.86
1200 · Undeposited Funds	2,000.00
1300 · Charles Schwab Brokerage Acc	996.00
Total Other Current Assets	314,066.33
Total Current Assets	569,686.25
Fixed Assets	
1630 · Leasehold improvements	17,806.63
1640 · Furniture, fixtures, & equip	8,109.02
1641 · Computer Hardware	21,103.15
1642 · Computer Software	2,476.56
1735 · Accum depre - Leasehold Improve	-16,806.71
1741 · Accum deprec - Comp Hardware	-14,720.40
1742 · Accum deprec - Comp Software	-2,476.56
1745 · Accum deprec- Furn, Fix, Equip	-6,694.23
Total Fixed Assets	8,797.46
Other Assets	
1600 · Deposits	1,000.00
Total Other Assets	1,000.00
TOTAL ASSETS	579,483.71
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 · Accounts Payable	2,505.00
Total Accounts Payable	2,505.00
Credit Cards	
2110 · Union Bank Business Credit Card	646.00
Total Credit Cards	646.00
Other Current Liabilities	
2300 · Accrued Expenses	3,300.00
2200 · Accrued Paid Time Off	4,103.84
Total Other Current Liabilities	7,403.84
Total Current Liabilities	10,554.84
Total Liabilities	10,554.84
Equity	
3001 · Opening Bal Equity	22,017.82

11:23 AM
10/31/17
Accrual Basis

Casa De Amistad
Statement of Financial Position
As of June 30, 2017

	<u>Jun 30, 17</u>
3200 · Temporary Restricted Net Assets	
3202 · Temp Restricted - Music	6,750.24
3201 · Temp Restricted - Scholarships	<u>290,812.37</u>
Total 3200 · Temporary Restricted Net Assets	297,562.61
3301 · Unrestricted, Prior Years	278,773.81
3302 · Unrestricted, Current Year	18,567.43
Net Income	<u>-47,992.80</u>
Total Equity	<u>568,928.87</u>
TOTAL LIABILITIES & EQUITY	<u>579,483.71</u>

2015

990

PUBLIC

DISCLOSURE

Form **990**

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

OMB No. 1545-0047

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CASA DE AMISTAD, CENTRO DE ENSEANZA Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 120 STEVENS AVENUE City or town, state or province, country, and ZIP or foreign postal code SOLANA BEACH, CA 92075 F Name and address of principal officer: GEORGE LABRECHE SAME AS C ABOVE	D Employer identification number 26-0016331 E Telephone number 858-922-1450 G Gross receipts \$ 552,912. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.CASADEAMISTAD.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
		L Year of formation: 2001 M State of legal domicile: CA

Part I Summary

1	Briefly describe the organization's mission or most significant activities: FOSTERING THE EDUCATION AND CHARACTER DEVELOPMENT OF UNDERSERVED CHILDREN AND TEENS.	
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)	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	11
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	12
6	Total number of volunteers (estimate if necessary)	250
7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	0.
8	Contributions and grants (Part VIII, line 1h)	254,919.
9	Program service revenue (Part VIII, line 2g)	526,840.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	62.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,518.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	288,442.
14	Benefits paid to or for members (Part IX, column (A), line 4)	530,782.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	4,385.
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24a)	138,951.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0.
19	Revenue less expenses. Subtract line 18 from line 12	47,381.
20	Total assets (Part X, line 15)	186,332.
21	Total liabilities (Part X, line 26)	265,302.
22	Net assets or fund balances. Subtract line 21 from line 20	102,110.
23		265,480.
24		353,865.
25		628,428.
26		2,423.
27		11,506.
28		351,442.
29		616,922.

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 **NICOLE MIONE-GREEN, EXECUTIVE DIRECTOR** Date

Print/Type preparer's name Preparer's signature Date **12/01/16** Check if self-employed PTIN

Firm's name ▶ **ART LLP** Firm's EIN ▶

Firm's address ▶ **7676 HAZARD CENTER DRIVE, STE 1300 SAN DIEGO, CA 92108** Phone no. **(619) 810-4940**

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: PROVIDE UNDERSERVED CHILDREN, TEENS & THEIR FAMILIES IN NORTH COUNTY SAN DIEGO WITH TUTORING, EDUCATIONAL SUPPORT & CHARACTER DEVELOPMENT. WE ARE INSPIRING A NEW GENERATION OF LEADERS THROUGH MUSIC, ACADEMIC MENTORING, LEADERSHIP TRAINING & CHARACTER DEVELOPMENT.

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

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

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

4a (Code:) (Expenses \$ 151,157. Including grants of \$ 4,385.) (Revenue \$) STUDY COMPANIONS PROGRAM - THE CORNERSTONE OF CASA DE AMISTAD IS ITS STUDY COMPANIONS PROGRAM. STUDY COMPANIONS IS AN EDUCATIONAL MENTORING PROGRAM DESIGNED TO IMPROVE THE ACADEMIC ACHIEVEMENT OF CHILDREN IN GRADES K-12. STUDENTS PARTICIPATING IN CASA DE AMISTAD ARE FROM SCHOOL DISTRICTS THROUGHOUT COASTAL NORTH COUNTY SAN DIEGO. THE STUDENTS ARE MATCHED WITH VOLUNTEER MENTORS WITH WHOM THEY MEET TWO EVENINGS PER WEEK DURING THE SCHOOL YEAR. DURING THESE MEETINGS THE MENTORS HELP THE STUDENTS WITH HOMEWORK AND STUDY SKILLS. THERE WERE APPROXIMATELY 250 VOLUNTEER TUTORS AND EVEN MORE STUDENTS, AS WELL AS A WAITING LIST WITH APPROXIMATELY 50 NAMES.

4b (Code:) (Expenses \$ 43,188. Including grants of \$) (Revenue \$) PARENTS IN ACTION - THE GOAL OF THIS PROGRAM IS TO HELP THE PARENTS OF OUR STUDENTS TO ENHANCE THEIR PARENTING SKILLS AND TO ADDRESS THEIR CONCERNS FOR THE WELL-BEING OF THEIR CHILDREN. THIS PROGRAM CONSISTS OF APPROXIMATELY TEN MEETINGS DURING THE SCHOOL YEAR WITH EACH MEETING FOCUSING ON ONE OR TWO MAJOR CONCERNS OF OUR PARENTS, FOR EXAMPLE: POSITIVE ALTERNATIVES TO GANGS, DETECTING AND AVOIDING DRUG USE, AND POSITIVE PARENTING SKILLS. ANY INTERESTED PARENT MAY ATTEND, WHETHER OR NOT THEY HAVE A CHILD IN OUR STUDY COMPANIONS PROGRAM. THERE IS NO CHARGE TO ATTEND.

4c (Code:) (Expenses \$ 21,594. Including grants of \$) (Revenue \$) SUMMER ENRICHMENT PROGRAM - ACTIVITIES PROVIDED FOR OUR STUDENTS IN GRADES K-6 DURING TWO WEEKS IN AUGUST. THE PROGRAM EMPHASIZES SCIENCE AND THE ARTS; STUDENTS HAVE VISITED SCRIPPS AQUARIUM AT THE UNIVERSITY OF CALIFORNIA, SAN DIEGO (UCSD), AS WELL AS LOCAL MUSEUMS.

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

4e Total program service expenses 215,939.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	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? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	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? If "Yes," complete Schedule R, Part VI	37	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	38	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

Form 990 (2015) with various sections (1a-14b) for reporting tax compliance information, including employee counts, unrelated business income, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	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 in Schedule O.	11													
b Enter the number of voting members included in line 1a, above, who are independent		11												
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, or trustees, or key employees to a management company or other person?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?														X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?														X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?														X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?														X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										X				
b Each committee with authority to act on behalf of the governing body?										X				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O														X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)
- 19 Describe in 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: **TGG ACCOUNTING - 760-697-1033**
10188 TELESIS COURT SUITE 130, SAN DIEGO, CA 92121

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.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TIFFANY FARNSWORTH PRESIDENT	1.00	X		X				0.	0.	0.
(2) ELLY GARNER VICE-PRESIDENT	1.00	X		X				0.	0.	0.
(3) JOE LABRECHE TREASURER	1.00	X		X				0.	0.	0.
(4) MYLES RUSH SECRETARY	1.00	X		X				0.	0.	0.
(5) LISA DENHAM BOARD MEMBER	1.00	X						0.	0.	0.
(6) LESLIE MONTEATH BOARD MEMBER	1.00	X						0.	0.	0.
(7) REBECCA NOBRIGA BOARD MEMBER	1.00	X						0.	0.	0.
(8) RANDALL PETERSON BOARD MEMBER	1.00	X						0.	0.	0.
(9) GAYLE VALENTINO BOARD MEMBER	1.00	X						0.	0.	0.
(10) TYLER WAGNER BOARD MEMBER	1.00	X						0.	0.	0.
(11) JAN WIER BOARD MEMBER	1.00	X						0.	0.	0.
(12) NICOLE MIONE-GREEN EXECUTIVE DIRECTOR	40.00			X				78,500.	0.	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	1 a Federated campaigns ...	1a					
	b Membership dues	1b					
	c Fundraising events	1c	42,930.				
	d Related organizations ...	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	483,910.				
	g Noncash contributions included in lines 1a-1f: \$		5,039.				
	h Total. Add lines 1a-1f		526,840.				
	Program Service Revenue	Business Code					
2 a							
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		62.			62.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 42,930. of contributions reported on line 1c). See Part IV, line 18	a	23,360.				
b Less: direct expenses		b	21,667.				
c Net income or (loss) from fundraising events			1,693.			1,693.	
9 a Gross income from gaming activities. See Part IV, line 19	a	2,650.					
	b Less: direct expenses	b	463.				
	c Net income or (loss) from gaming activities		2,187.			2,187.	
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			530,782.	0.	0.	3,942.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	4,385.	4,385.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 18				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	77,000.	65,450.	11,550.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	93,654.	88,783.	4,871.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	15,800.	14,280.	1,520.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	13,196.		13,196.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	3,542.	2,009.	1,533.	
13 Office expenses	14,362.	10,147.	4,215.	
14 Information technology				
15 Royalties				
16 Occupancy	5,900.	2,950.	2,950.	
17 Travel	859.	859.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,854.		1,854.	
23 Insurance	7,621.	3,620.	4,001.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM YOUTH SYMPHONY	15,813.	15,813.	0.	0.
b OTHER DIRECT PROGRAM EX	4,876.	4,876.	0.	0.
c PERSONNEL RELATED	3,545.	2,751.	794.	0.
d MISCELLANEOUS	2,895.	16.	2,879.	0.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	265,302.	215,939.	49,363.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	291,789.	1	275,220.
	2 Savings and temporary cash investments	56,831.	2	346,892.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 44,722.		
	b Less: accumulated depreciation	10b 38,406.	5,245.	10c 6,316.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		353,865.	16	628,428.
Liabilities	17 Accounts payable and accrued expenses	2,423.	17	11,506.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25		2,423.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	322,942.	27	321,307.
	28 Temporarily restricted net assets	28,500.	28	295,615.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances		351,442.	33	616,922.
34 Total liabilities and net assets/fund balances		353,865.	34	628,428.

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	530,782.
2	Total expenses (must equal Part IX, column (A), line 25)	2	265,302.
3	Revenue less expenses. Subtract line 2 from line 1	3	265,480.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	351,442.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	616,922.

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 checked="" 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 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 in 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 in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2015)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	99,657.	156,800.	242,121.	259,187.	526,840.	1284605.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	99,657.	156,800.	242,121.	259,187.	526,840.	1284605.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						498,264.
6 Public support. Subtract line 5 from line 4.						786,341.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	99,657.	156,800.	242,121.	259,187.	526,840.	1284605.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4.	2.	4.	5.	62.	77.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	5,188.		12,870.	29,250.	3,880.	51,188.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	931.					931.
11 Total support. Add lines 7 through 10						1336801.
12 Gross receipts from related activities, etc. (see instructions)					12	3,059.
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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	58.82	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	85.59	%
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
2 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
5 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 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 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	18	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. 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 - 2014. 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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).		
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? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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? If "Yes" to a, b, or c, provide detail in Part VI.		

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

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

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. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
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.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

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.)

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

Employer identification number

CASA DE AMISTAD, CENTRO DE ENSEÑANZA

26-0016331

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 14h, 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notices, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization CASA DE AMISTAD, CENTRO DE ENSEMANZA	Employer identification number 26-0016331
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 5,039.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

CASA DE AMISTAD, CENTRO DE ENSEÑANZA

26-0016331

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
2	47 SHARES OF ACCENTURE STOCK (ACN)	\$ 5,039.	11/30/15
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization **CASA DE AMISTAD, CENTRO DE ENSEANZA** Employer identification number **26-0016331**

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 on line 16 of Form 990.) **\$**
 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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

CASA DE AMISTAD, CENTRO DE ENSEANZA

Employer identification number

26-0016331

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
- e Other _____

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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					

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 Temporarily restricted endowment > _____ %

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		17,807.	16,307.	1,500.
d Equipment		24,438.	19,622.	4,816.
e Other		2,477.	2,477.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				6,316.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1 Total revenue, gains, and other support per audited financial statements		1	
2 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	
3	Subtract line 2e from line 1	3	
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

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

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

1 Total expenses and losses per audited financial statements		1	
2 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	
3	Subtract line 2e from line 1	3	
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

Part XIII Supplemental information.

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA RELATED TO THE RECONGNITION OF UNCERTAIN TAX POSITIONS. THE ORGANIZATION RECOGNIZES ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIIONS AS PART OF THE STATEMENT OF ACTIVITIES, WHEN APPLICABLE. MANAGEMENT HAS DETERMINED THAT THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS AT JUNE 30, 2016 AND 2015 AND THEREFORE NO AMOUNTS HAVE BEEN ACCRUED.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SOWING SEEDS OF SUCCESS (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	66,290.		66,290.
	2	Less: Contributions	42,930.		42,930.
	3	Gross income (line 1 minus line 2)	23,360.		23,360.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	264.		264.
	6	Rent/facility costs	11,180.		11,180.
	7	Food and beverages	358.		358.
	8	Entertainment			
	9	Other direct expenses	9,865.		9,865.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			21,667.
11	Net income summary. Subtract line 10 from line 3, column (d)			1,693.	

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

b1 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation No \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

CASA DE AMISTAD, CENTRO DE ENSEANZA

Employer identification number
26-0016331

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

THE CHAIR OF THE FINANCE COMMITTEE, BOARD TREASURER AND EXECUTIVE DIRECTOR RECEIVE THE 990 FOR REVIEW. THE 990 WILL BE APPROVED BY THE BOARD OF DIRECTORS WITH THE TREASURER PROVIDING WRITTEN APPROVAL PRIOR TO FILING.

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

THE CONFLICT OF INTEREST POLICY, WHISTLEBLOWER POLICY AND DOCUMENT RETENTION AND DESTRUCTION POLICY HAVE BEEN DEVELOPED AND WERE APPROVED ON NOVEMBER 9, 2016.

FORM 990, PART VI, SECTION B, LINE 15A:

A SUBCOMMITTEE OF THE CASA BOARD OF DIRECTORS, THE PERSONNEL COMMITTEE, ANNUALLY REVIEWS THE PERFORMANCE AND COMPENSATION OF THE PROGRAM DIRECTOR BY THE PERSONNEL SUBCOMMITTEE OF THE BOARD, AND MAKES A REPORT TO THE FULL BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 18:

AVAILABLE UPON REQUEST

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

FINANCIAL STATEMENTS ARE PROVIDED TO THE PUBLIC IF REQUESTED.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
	CASA DE AMISTAD, CENTRO DE ENSEANZA	Employer identification number (EIN) or 26-0016331
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 120 STEVENS AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SOLANA BEACH, CA 92075	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

TGG ACCOUNTING

• The books are in the care of ▶ **10188 TELESIS COURT SUITE 130 - SAN DIEGO, CA 92121**
Telephone No. ▶ **760-697-1033** Fax No. ▶ _____

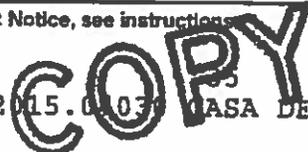
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2017** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year _____ or
 tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.



**COMMUNITY
RESOURCE
CENTER**



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: Community Resource Center
Mailing Address: 650 Second Street
City Encinitas State CA Zip 92024
Contact Person: Lea Williams, Grants Manager
Daytime Phone: (760)753-1156 ext. 1397
Evening Phone: (760)753-1156 ext. 1397
Email address: lwilliams@crcncc.org

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 95-3497926
3. Has your organization received financial assistance from the City before?
 Yes No
If yes, what activities and which fiscal year? Holiday Baskets fiscal year 2016-17
4. Amount requested for FY 2017-18 \$5,000
5. Proposed Total Program Costs: \$ 134,565
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: Holiday Baskets 2017
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
The 35th Holiday Baskets program will provide 1,500 North County San Diego low-income residents with turkey and chickens, quality foods, household essentials, and toys and bikes for children. The households served equate to about 6,000 individuals. This program not only provides needed food and holiday gifts, but it also connects participants with essential resources to help increase their food and nutrition security, personal and financial stability, and ultimately create a path to self-sufficiency.
(Attach extra sheet, if necessary.)

8. Estimated number of S.B. residents to be served by proposed program: 200

9. Program Dates/Location:

The Holiday Baskets program distribution will take place at the Del Mar Fairgrounds from Friday, December 15th through Sunday, December 17th, 2017.

10. Anticipated Program Objectives or Accomplishments:

1) Increase short-term food security and temporarily free up limited income for necessities

2) Within one year, enroll 50% of non-case-managed participants into CRC case management and/or referrals to appropriate resources

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

CRC is happy to acknowledge the generosity of the City of Solana Beach with recognition on our website, social media, and on the donor wall at our Jingle & Mingle event.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

CRC has applied to several other grants to support this large program, and also receives funding from various sources such as the Mizel Family Fund through the City of Encinitas, the City of Del Mar, and the Wells Fargo Foundation.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Holiday Baskets is one of CRC's most volunteer-intensive events, with over 1,500 volunteers supporting CRC and donating their time to make sure that the event runs smoothly over the three day distribution. Their time helps CRC reduce a tremendous amount of potential expenses. Volunteer activities include pre-distribution, sorting, setting up, distribution itself, and taking down after the conclusion of the event.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

CRC will proceed with the Holiday Baskets program if only partial funding is received. The program will not be scaled back.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

John P. [Signature]

10/31/17

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

LIST OF ATTACHMENTS

1. SIGNED W-9
2. COMMUNITY RESOURCE CENTER ORGANIZATIONAL BUDGET FY2017-18
3. HOLIDAY BASKETS BUDGET 2017
4. FORM 990 (PERIOD COVERED JULY 1, 2015 – JUNE 30, 2016)
5. AUDITED FINANCIAL STATEMENTS 6-30-16
6. IRS 501(C)3 CERTIFICATION

**AUDITED FINANCIAL STATEMENTS FOR FISCAL YEAR ENDING JUNE 30, 2017 CAN
ALSO BE PROVIDED UPON COMPLETION.**

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Community Resource Center		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ _____		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Apply to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) 850 Second Street		Requestor's name and address (optional)
	6 City, state, and ZIP code Encinitas, CA 92024		
7 List account number(s) here (optional)			

Part I Taxpayer Identification Number (TIN)																					
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.																					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: right;">Social security number</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">OR</td> </tr> <tr> <td colspan="2" style="text-align: right;">Employer identification number</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">9</td> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">5</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">-</td> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">3</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">4</td> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">9</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">7</td> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">9</td> </tr> <tr> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">2</td> <td style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">6</td> </tr> </table>		Social security number						OR		Employer identification number		9	5	-	3	4	9	7	9	2	6
Social security number																					
OR																					
Employer identification number																					
9	5																				
-	3																				
4	9																				
7	9																				
2	6																				
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																					

Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and	
3. I am a U.S. citizen or other U.S. person (defined below); and	
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
<p>Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.</p>	

Sign Here	Signature of U.S. person ▶	Date ▶ 10/26/17
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
 Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/w9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.
- By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 2. Certify that you are not subject to backup withholding, or
 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Community Resource Center
Organizational Budget
July 1, 2017 - June 30, 2018

Income

Fundraising Events	\$146,900
Government Grants/Contracts	1,268,199
Other revenue	2,000
Private Grants & Foundations	515,925
Program Service Revenue	42,525
Resale Stores - Net Profit (1)	319,629
Public Support/Donations	<u>630,201</u>
Total Income	2,925,379

Expense

Automobile Expense	9,354
Employees, Board & Volunteers	48,719
Fundraising expense	42,065
Occupancy Expense	159,406
Operating Expense	134,720
Other Operating Expenses	29,049
Personnel Expenses	1,943,225
Professional Fees	42,268
Program Expense	371,394
Depreciaton expense	<u>69,485</u>
Total Expense	2,849,684

Net Surplus **\$75,695**

(1) - Resale Stores - P & L

Revenues	\$1,304,215
Expenses	<u>984,587</u>
Net profit	<u><u>\$319,629</u></u>

**Community Resource Center
Holiday Baskets 2017**

	<u>Budget</u>
Ordinary Income/Expense	
Income	
Government Grants/Contracts	
4490 · Other Government Grants	29,500
Total Government Grants/Contracts	<u>29,500</u>
Private Grants & Foundations	
4300 · Foundations - Grants	25,750
Total Private Grants & Foundations	<u>25,750</u>
Public Support/Donations	
4000 · Individual/Family Foundations	75,916
4005 · Community Groups	1,339
4016 · Churches/Religious Organization	1,018
4020 · Business Donations	3,152
4700 · In-Kind Donations	
4705 · Stock (in-kind) Donations	4,827
Total 4700 · In-Kind Donations	<u>4,827</u>
Total Public Support/Donations	<u>86,252</u>
Total Income	141,502
Expense	
Automobile Expense	
5605 · Gas for the Truck	375
Total Automobile Expense	<u>375</u>
Employees, Board & Volunteers	
5815 · Meals	
5845 · Mileage & Parking	525
Total Employees, Board & Volunteers	<u>525</u>
Occupancy Expense	
Utilities	
5320 · Gas and Electric	40
Total Utilities	<u>40</u>
5300 · Rent	15,798
Total Occupancy Expense	<u>15,838</u>
Operating Expense	
Computer & Telecomm	
5400 · Telephone & Internet Service	
Total Computer & Telecomm	
Supplies	
5440 · General Operating Supplies	
5445 · Office Supplies/Exp Consumable	250
Total Supplies	<u>250</u>
5420 · Postage and Delivery	75
	<u>75</u>

	<u>Budget</u>
Total Operating Expense	325
Personnel Expenses	
5105 · Salaries & Wages	39,703
5110 · ER Payroll Taxes	11,827
5115 · Fringe Expense	
5165 · Temporary Help	1,322
Total Personnel Expenses	<u>52,852</u>
Professional Fees	
5505 · Accounting / Audit	0
Total Professional Fees	<u>0</u>
Program Expense	
5250 · Holiday Baskets	
52502 · Holiday Baskets - Bike gear	4,050
52503 · Holiday Baskets - Client Food	34,000
52504 · Holiday Baskets - Client Goods	5,700
52505 · Holiday Baskets - Containers	1,500
52506 · Holiday Baskets - Supplies	3,300
52508 · HolidayBaskets-VolunteerSupport	500
52509 · Holiday Baskets - Facility Rent	13,800
5250 · Holiday Baskets - Other	1,800
Total 5250 · Holiday Baskets	<u>64,650</u>
Total Program Expense	<u>64,650</u>
5950 · Depreciation Expense	
Total Expense	<u>134,565</u>
Net Ordinary Income	<u>6,937</u>
Net Income	<u><u>6,937</u></u>

EXTENDED TO MAY 15, 2017

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2015 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning JUL 1, 2015 and ending JUN 30, 2016

Header section containing organization name (COMMUNITY RESOURCE CENTER), address (650 2ND STREET, ENCINITAS, CA 92024), principal officer (ISABEL ST. GERMAIN SINGH), and identification numbers.

Part I Summary

Summary table with columns for line number, description, and amounts for Prior Year and Current Year. Includes sections for Governance, Revenue, Expenses, and Net Assets.

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.

Signature block containing signatures of officer (ISABEL ST. GERMAIN SINGH, CEO) and preparer (PAUL REDFERN, CPA), along with dates and PTIN.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] 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 PROVIDE FAMILIES SUFFERING FROM THE EFFECTS OF POVERTY, HOMELESSNESS, HUNGER, AND DOMESTIC VIOLENCE WITH SAFETY, STABILITY, AND A PATH TO SELF SUFFICIENCY.

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 five 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 (Line 1) (Expenses) 737,955. (including grants) (Revenue) 42,421.) COMMUNITY RESOURCE CENTER'S DOMESTIC VIOLENCE PROGRAMS INCLUDE AN EMERGENCY SHELTER; TRANSITIONAL HOUSING; RENTAL ASSISTANCE; LEGAL ADVOCACY; COUNSELING; FINANCIAL LITERACY EDUCATION; FOOD AND NUTRITION EDUCATION; EMPLOYMENT PREPARATION; AND A THERAPEUTIC CHILDREN'S PROGRAM. IN FY 2015-16, 60 HOUSEHOLDS, INCLUDING 112 CHILDREN WERE SERVED IN THE SHELTER AND 4 HOUSEHOLDS, INCLUDING 10 CHILDREN WERE SERVED IN THE TRANSITIONAL HOUSING PROGRAM. 95% OF DV PROGRAM PARTICIPANTS DID NOT RETURN TO THEIR ABUSERS.

4b (Line 2) (Expenses) 783,128. (including grants) (Revenue)) CRC SERVED MORE THAN 7,900 LOW-INCOME INDIVIDUALS THROUGH OUR COMPREHENSIVE PROGRAMS: INTEGRATED CASE MANAGEMENT; EMERGENCY FOOD, HOUSING, RENTAL AND UTILITY ASSISTANCE; BENEFITS APPLICATIONS; TRANSPORTATION ASSISTANCE; ACCESS TO HEALTHY FOOD; TAX PREPARATION; FINANCIAL LITERACY TRAINING; FAMILY SELF-SUFFICIENCY; EMPLOYMENT READINESS; AND HOLIDAY BASKETS.

4c (Line 3) (Expenses) 1,059,088. (including grants) (Revenue) 1,249,146.) COMMUNITY RESOURCE CENTER'S RESALE STORES, IN ADDITION TO GENERATING NET INCOME FOR THE AGENCY'S ACTIVITIES, IS A SOURCE OF CLOTHING, FURNITURE AND HOUSEHOLD GOODS FOR BOTH DOMESTIC VIOLENCE AND SOCIAL SERVICE CLIENTS; PROVIDES EMPLOYMENT OPPORTUNITIES FOR LOW-INCOME INDIVIDUALS; AND IS A SOURCE OF LOW-COST GOODS FOR LOCAL FAMILIES.

4d Other program services (Describe in Schedule O)

4e Total program service expenses 2,580,171.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and area, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for aid, buildings, and equipment in Part X, line 107? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11a? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person? If "Yes," complete Schedule L, Part III		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 1, b, 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 1099. Enter -0- if not applicable		
1b	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	
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		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
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 in 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: <u>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</u>		
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?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8883?		X
d	If "Yes," indicate the number of Forms 8883 filed during the year		
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? <i>Note.</i> 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 in 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 in Schedule O. See instructions.

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

X

Section A. Governing Body and Management

		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 in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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, or 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
8a	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	X	
8b	a The governing body? b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in 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	
15a	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?	X	
15b	a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization	X	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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 5104 requires an organization to make its Forms 1023 (or 1024, 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. <input checked="" type="checkbox"/> On its website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in 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. COMMUNITY RESOURCE CENTER - 760-753-1156 650 2ND STREET, ENCINITAS, CA 92024

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) ORGANIZATION					(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
		1099-MISC	1099-NEC	1099-NON	1099-DIV	1099-INT			
(1) PAUL REDFERNY BOARD CHAIR	2.00	X					0.	0.	0.
(2) MORGAN DAY VICE CHAIR	2.00	X					0.	0.	0.
(3) JOANNE BERG TREASURER	5.00	X					0.	0.	0.
(4) CRAIG T SHUCERT SECRETARY	2.00	X					0.	0.	0.
(5) SANDRA CONNERS DIRECTOR	2.00	X					0.	0.	0.
(6) KATRINA DCDSON DIRECTOR	2.00	X					0.	0.	0.
(7) LEE MORRISON DIRECTOR	2.00	X					0.	0.	0.
(8) SHAWN PYNES DIRECTOR	2.00	X					0.	0.	0.
(9) DUANE NELLES DIRECTOR	2.00	X					0.	0.	0.
(10) LEWIS SHENDER DIRECTOR	2.00	X					0.	0.	0.
(11) MARY MURPHY DIRECTOR	2.00	X					0.	0.	0.
(12) JASON TAJIMA DIRECTOR	2.00	X					0.	0.	0.
(13) DIANE WEED DIRECTOR	2.00	X					12,056.	0.	0.
(14) CARL WRIGHT DIRECTOR	2.00	X					0.	0.	0.
(15) ROBERT KENT CFO	40.00			X			102,054.	0.	11,418.
(16) PAUL THOMPSON CEO	40.00			X			121,097.	0.	8,536.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person holds multiple positions and describes them below)					(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
		Officer	Director	Trustee	Key employee	Highest compensated employee			
1b Sub-total						235,207.	0.	19,954.	
c Total from continuation sheets to Part VII, Section A						0.	0.	0.	
d Total (add lines 1b and 1c)						235,207.	0.	19,954.	

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 **2**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		0

Part VIII Statement of Revenue

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

			(A) 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	1 a	Federated campaigns	2,090.				
	b	Membership dues					
	c	Fundraising events	178,433.				
	d	Related organizations					
	e	Government grants (contributions)	57,541.				
	f	All other contributions, gifts, grants, and other amounts not included above	1,114,487.				
	g	Non-cash contributions (Part VII, line 4)	17,631.				
	h	Total. Add lines 1a-1f	2,176,523.				
	Program Service Revenue	2 a	VOCA FEES	859.	17,859.		
b		COUNSELING FEES	14,486.	14,486.			
c		CLIENT RENTAL INCOME	8,931.	8,931.			
d		OTHER	8,175.	8,175.			
e		INTERFAITH SHELTER NETWORK	2,660.	2,660.			
f		All other program service revenue					
g		Total. Add lines 2a-2f	52,111.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	2,975.			2,975.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
		Less: rental expenses	(ii) Personal				
		Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	1,035.			
		Less: cost or other basis and sales expenses	(ii) Other	1,035.			
		Net gain or (loss)		95.			95.
	8 a	Gross income from fundraising events (not including \$ 178,433. of contributions reported on line 1c). See Part IV, line 18	a	88,944.			
	b	Less: direct expenses	b	87,623.			
		Net income or (loss) from fundraising events		1,321.			1,321.
	9 a	Gross income from gaming activities. See Part V, line 13	a	3,541.			
	b	Less: direct expenses	b	0.			
		Net income or (loss) from gaming activities		3,541.			3,541.
10 a	Gross sales of inventory (less returns and allowances)	a	2,513,327.				
b	Less: cost of goods sold	b	1,249,196.				
	Net income or (loss) from sales of inventory		1,264,131.			1,264,131.	
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		3,430,102.	52,111.	0.	1,251,468.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	183,950.	42,397.	110,350.	31,203.
6 Compensation not included above, to disqualifying persons (as defined under section 4958(f)(7)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,448,564.	1,158,296.	161,807.	128,461.
8 Pension plan accruals and contributions (include section 401(a) and 408(a) employer contributions)	11,548.	10,230.	329.	989.
9 Other employee benefits	242,349.	182,149.	36,972.	23,228.
10 Payroll taxes	121,488.	89,044.	20,628.	11,816.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	14,642.		14,642.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O	134,418.	7,393.	30,707.	96,318.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	344,553.	337,934.	3,467.	3,152.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	8,178.	5,378.	1,467.	1,333.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	95,888.	84,371.	8,272.	3,245.
23 Insurance	28,216.	25,002.	1,683.	1,531.
24 Other expenses. Include expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a DIRECT EXPENSES	163,352.	153,440.	314.	9,598.
b TELEPHONE AND INTERNET	113,621.	103,644.	4,999.	4,978.
c TEMPORARY HELP	99,714.	86,413.	291.	13,010.
d UTILITIES	91,315.	88,923.	1,253.	1,139.
e All other expenses	283,853.	205,557.	56,080.	22,216.
25 Total functional expenses. Add lines 1 through 24e	3,385,649.	2,580,171.	453,261.	352,217.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash (non-interest-bearing)	312,628.	1	390,932.
	2	Savings and temporary cash investments	76,342.	2	9,953.
	3	Pledges and grants receivable, net	136,632.	3	337,496.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part III of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B) and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr.) Complete Part III of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	82,854.	8	72,678.
	9	Prepaid expenses and deferred charges	97,987.	9	70,576.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,358,434.		
	10b	Less: accumulated depreciation	10b 1,111,176.	10c	1,247,258.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part V, line 11		12	
	13	Investments - program related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	73,333.	15	73,022.
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,941,349.	16	2,201,915.	
Liabilities	17	Accounts payable and accrued expenses	226,214.	17	275,860.
	18	Grants payable		18	
	19	Deferred revenue	88,210.	19	21,960.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	112,452.	25	295,169.
	26	Total liabilities. Add lines 17 through 25	426,876.	26	592,989.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,451,681.	27	1,491,566.
	28	Temporarily restricted net assets	62,792.	28	117,360.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,514,473.	33	1,608,926.	
34	Total liabilities and net assets/fund balances	1,941,349.	34	2,201,915.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,480,102.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,385,649.
3	Revenue less expenses. Subtract line 2 from line 1	3	94,453.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,514,473.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,608,926.

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
2b	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	
2c	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 in 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
3b	If "Yes" did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. Do not include any "unusual grants."						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3.						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)						
11 Total support. Add lines 7 through 10.						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 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. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>			
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>			
17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>			
b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/>			

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	962,088.	2,497,406.	2,511,346.	2,043,948.	2,179,522.	10,194,310.
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	15,220.	37,842.	78,494.	57,081.	52,111.	240,748.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	661,565.	2,640,162.	2,555,628.	2,455,555.	2,503,327.	10,816,237.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,638,873.	5,175,410.	5,145,468.	4,556,584.	4,734,960.	21,251,295.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	8,000.	25,000.	23,457.	40,000.	65,459.	161,916.
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	8,000.	25,000.	23,457.	40,000.	65,459.	161,916.
8 Public support. (See instructions to this line.)						21,089,379.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	1,638,873.	5,175,410.	5,145,468.	4,556,584.	4,734,960.	21,251,295.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	276.	2,197.	2,048.	217.	2,975.	7,713.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	276.	2,197.	2,048.	217.	2,975.	7,713.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	43,122.	49,209.	121,116.	17,637.	0.	231,084.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	1,682,271.	5,226,816.	5,268,632.	4,574,438.	4,737,935.	21,490,092.
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	98.14	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	98.23	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	.04	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	.00	%

19a 33 1/3% support tests - 2015. 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 - 2014. If the organization did not check a box on line 14 or line 19a, 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

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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11c of Part I, complete Sections A and C. If you checked 11e of Part I, complete Sections A, D, and E. If you checked 11d 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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6), and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a. Was any supported organization not organized in the United States (foreign supported organization)? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and a description despite being controlled or supervised by or in connection with its supported organizations.		
c. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).		
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? If "Yes," provide detail in Part VI.		
7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a. Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(i) regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations? If "Yes," answer 10b below.		
b. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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? If "Yes" to a, b, or c, provide detail in Part VI.		

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in those activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
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.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2015 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)		
3	Excess distributions carryover, if any, to 2015:		
a			
b			
c			
d	From 2013		
e	From 2014		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2015 distributable amount		
i	Carryover from 2010 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2015 from Section D, line 7:		
a	Applied to underdistributions of prior years		
b	Applied to 2015 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).		
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).		
7	Excess distributions carryover to 2016. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a			
b			
c	Excess from 2013		
d	Excess from 2014		
e	Excess from 2015		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015
Open to Public Inspection

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95-3497926

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

- Purpose(s) of conservation easements held by the organization (check all that apply):
 - Preservation of land for public use (e.g., recreation or education)
 - Protection of natural habitat
 - Preservation of open space
 - Preservation of a historically important land area
 - Preservation of a certified historic structure
- Complete lines 2a through 2d if the organization had a qualified conservation contribution in the form of a conservation easement on the last day of the tax year:

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/7/06 and not on a historic structure listed in the National Register	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year: ▶ _____
- Number of states where property subject to conservation easement is located: ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year: ▶ _____
- Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year: ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

- If the organization or elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (i) Revenue included on Form 990, Part VIII, line 1: ▶ \$ _____
 - (ii) Assets included in Form 990, Part X: ▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
 - a Revenue included on Form 990, Part VIII, line 1: ▶ \$ _____
 - b Assets included in Form 990, Part X: ▶ \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
43235 11-02-15

Schedule D (Form 990) 2015

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 are a 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 programs
- 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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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					

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 Temporarily restricted 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		539,937.		539,937.
b Buildings		1,172,741.	745,856.	426,885.
c Leasehold improvements		367,693.	183,312.	184,381.
d Equipment		278,063.	182,008.	96,055.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,247,258.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) NOTE PAYABLE - US BANK	295,169.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	295,169.

2. Liability for uncertain tax positions. In Part X'II, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	3,483,102.
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	3,000.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII)	2d		
	e Add lines 2a through 2d		2e	3,000.
3	Subtract line 2e from line 1		3	3,480,102.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	a Investment expenses not included on Form 990, Part VII, line 10	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	3,480,102.

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	3,388,649.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	a Donated services and use of facilities	2a	3,000.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII)	2d		
	e Add lines 2a through 2d		2e	3,000.
3	Subtract line 2e from line 1		3	3,385,649.
4	Amounts included on Form 990, Part X, line 25, but not on line 1			
	a Investment expenses not included on Form 990, Part VIII, line 10	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	3,385,649.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS THE PROVISIONS OF UNCERTAIN TAX POSITIONS AS ADDRESSED IN FASB ACCOUNTING STANDARDS CODIFICATION. THERE ARE NO AMOUNTS ACCRUED IN THE FINANCIAL STATEMENTS RELATED TO UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED JUNE 30, 2016 AND 2015.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		ENGLISH TEA (event type)	FALL GALA (event type)	NONE (total number)		
Revenue	1	Gross receipts	71,500.	195,472.		266,972.
	2	Less: Contributions	39,003.	139,430.		178,433.
	3	Gross income (line 1 minus line 2)	32,497.	56,042.		88,539.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	2,918.	26,233.		29,151.
	7	Food and beverages	3,384.	28,486.		31,870.
	8	Entertainment		2,500.		2,500.
	9	Other direct expenses	10,752.	23,350.		34,102.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				97,623.
11	Net income summary. Subtract line 10 from line 3, column (d)				-9,084.	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:
a The organization's facility

13a	%
13b	%

b An outside facility

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

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:
Name ▶ _____
Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to charity in the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95-3497926

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	1	1,131.FMV	
10	Securities - Closely held stock				
11	Securities - Partnership, LLC or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Furniture				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archaeological artifacts				
25	Other (DONATED SUPPL)	X	3	36,502.FMV	
26	Other ()				
27	Other ()				
28	Other ()				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) (2015)

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number
95-3497926

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

VIOLENCE WITH SAFETY, STABILITY, AND A PATH TO SELF-SUFFICIENCY.

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

SCHEDULE 990 IS PREPARED BY THE CHAIR AND REVIEWED BY THE EXECUTIVE
DIRECTOR OR CEO. ONCE IT IS APPROVED BY THE EXECUTIVE DIRECTOR OR CEO, IT
IS FORWARDED TO THE BOARD FOR THEIR REVIEW.

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

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING
BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT THAT AFFIRMS SUCH
PERSON:

1. HAS RECEIVED A COPY OF THE CONFLICT-OF-INTEREST POLICY,
2. HAS READ AND UNDERSTANDS THE POLICY,
3. HAS AGREED TO COMPLY WITH THE POLICY, AND
4. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN
ITS FEDERAL TAX EXEMPTION REQUIRES IT MUST ENGAGE PRIMARILY IN ACTIVITIES
THAT ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

TO ENSURE THE ORGANIZATION OPERATES IN A MANNER CONSISTENT WITH CHARITABLE
PURPOSES AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS
TAX-EXEMPT STATUS, PERIODIC REVIEWS SHALL BE CONDUCTED. THE PERIODIC
REVIEWS SHALL, AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS:

1. WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE,
BASED ON COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S-LENGTH

BARGAINING

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

Schedule O (Form 990 or 990-EZ) (2015)

532211
09-02-15

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95 3497926

2. WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES, AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT, OR IN AN EXCESS BENEFIT TRANSACTION.

EACH PERSON IS REQUIRED TO DISCLOSE ANNUALLY HIS/HER CORPORATE (EITHER NON-PROFIT OR FOR PROFIT) DIRECTORSHIPS, KEY POSITIONS, AND EMPLOYMENT, AS WELL AS HIS/HER MEMBERSHIPS IN ORGANIZATIONS; CONTRACTS, BUSINESS ACTIVITIES, AND INVESTMENTS WITH ORGANIZATIONS; HIS/HER OTHER RELATIONSHIPS AND ACTIVITIES, AND THEIR PRIMARY BUSINESS OR OCCUPATION.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD HAS THE AUTHORITY TO HIRE, EMPLOY, AND COMPENSATE SUCH PERSONNEL AS ARE NEEDED TO EXECUTE THE MISSION OF COMMUNITY RESOURCE CENTER (CRC).

ROLE OF THE EXECUTIVE COMMITTEE:

THE EXECUTIVE COMMITTEE IS A PERMANENT COMMITTEE OF THE BOARD. AMONG THE RESPONSIBILITIES AND AUTHORITY OF THE EXECUTIVE COMMITTEE IS THAT RELATING TO EXECUTIVE COMPENSATION. THIS COMMITTEE IS RESPONSIBLE FOR THE HIRING AND EVALUATION OF THE PRINCIPAL ADMINISTRATOR OF THE AGENCY. THE COMMITTEE REVIEWS COMPENSATION PRACTICES AND PROGRAMS FOR THE EXECUTIVE DIRECTOR OR CEO, PROVIDES LEADERSHIP IN THIS AREA, AND REPORTS ITS DETERMINATIONS TO THE FULL BOARD. COMPOSITION EXECUTIVE COMMITTEE MEMBERSHIP IS APPOINTED AS SPECIFIED IN THE BYLAWS.

DUTIES AND RESPONSIBILITIES:

-REVIEW AND APPROVE CASH AND NONCASH COMPENSATION POLICIES APPLICABLE

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95-3497926

TO THE EXECUTIVE DIRECTOR OR CEO.

-ESTABLISH AND PERIODICALLY REVIEW CRC'S COMPENSATION PHILOSOPHY TO ENSURE THE POLICY APPROPRIATELY SUPPORTS THE ORGANIZATION'S PURPOSE AND MISSION, ATTRACTS AND RETAINS KEY EXECUTIVES AT A REASONABLE COST, AND ENHANCES THE MISSION AND PURPOSE OF THE ORGANIZATION.

-ACT ON BEHALF OF THE BOARD IN SETTING EXECUTIVE COMPENSATION POLICY AND MAKING DECISIONS WITH RESPECT TO THE COMPENSATION OF THE EXECUTIVE DIRECTOR OR CEO BY REVIEWING THE ANNUAL BASE SALARY LEVELS AND PERFORMANCE EVALUATIONS.

-ESTABLISH REASONABLE COMPENSATION LEVELS BY:

1. ASSESSING THE NATURE AND SCOPE OF THE EXECUTIVE POSITION

2. ASSESSING THE BASIS FOR WHICH COMPENSATION IS PAID TO AN INDIVIDUAL HOLDING THIS POSITION INCLUDING UNIQUE BACKGROUND, EXPERIENCE, PERSONAL SKILLS, EXCEPTIONAL PERFORMANCE, ADDITIONAL DUTIES AND ABILITIES, AND CHALLENGES FACING THE ORGANIZATION THAT REQUIRE THE USE OF SUCH ATTRIBUTES FOR SKILLS

3. OBTAINING APPROPRIATE AND COMPARABLE COMPENSATION MARKET DATA INCLUDING DATA FROM THE FOLLOWING:

- SIMILARLY SITUATED ORGANIZATIONS, BOTH FOR-PROFIT AND TAX-EXEMPT, FOR FUNCTIONALLY COMPARABLE POSITIONS

- THE AVAILABILITY OF SIMILAR SPECIALTIES IN THE GEOGRAPHIC AREA

- INDEPENDENT COMPENSATION SURVEYS BY NATIONALLY RECOGNIZED INDEPENDENT FIRMS

4. DOCUMENT THE BASIS FOR THE DETERMINATION OF THE REASONABLE COMPENSATION, INCLUDING PERFORMANCE EVALUATIONS AND MARKET DATA.

APPOINTMENT INFORMATION:

THE COMMITTEE SHALL REVIEW AND RECOMMEND ALL EXECUTIVE DIRECTOR OR CEO

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95-3497926

APPOINTMENTS, CHANGES IN TITLE, ACTING, OR INTERIM APPOINTMENTS. THE WRITTEN CONFIRMATIONS OF EMPLOYMENT, WHICH ARE CONSIDERED NOTICES OF EMPLOYMENTS RATHER THAN CONTRACTS, SHALL BE REVIEWED AND APPROVED BY THE BOARD CHAIR PRIOR TO ISSUANCE. THE BOARD AUTHORIZES THE EXECUTIVE DIRECTOR OR CEO, IN CONSULTATION WITH THE EXECUTIVE COMMITTEE, TO ESTABLISH A JOB EVALUATION SYSTEM AND COMPENSATION POLICIES. THESE SHALL COMPLY WITH STATE AND FEDERAL LEGISLATION, AND SHALL BE ESTABLISHED AND IMPLEMENTED TO PROMOTE THE GOALS OF INTERNAL EQUITY, REWARD FOR MERITORIOUS PERFORMANCE, EFFECTIVE RECRUITMENT, AND RETENTION OF THE STAFF.

THE BOARD AUTHORIZES THE EXECUTIVE DIRECTOR OR CEO TO ESTABLISH A SET OF PAY RANGES AND CLASSIFICATION ASSIGNMENTS FOR THE STAFF.

THE BOARD AUTHORIZES THE EXECUTIVE DIRECTOR OR CEO TO MAKE ADMINISTRATIVE ADJUSTMENTS AS DEFINED BELOW, WHEN SUCH AN ADJUSTMENT IS NECESSARY:

- TO COMPENSATE FOR AN ADMINISTRATIVE ERROR,
- TO CONFORM TO OTHER PROVISIONS OF THE COMPENSATION PROGRAM,
- OR BECAUSE IT HAS BEEN OTHERWISE DEMONSTRATED TO BE THE BEST INTEREST OF THE ORGANIZATION.

THE BOARD AUTHORIZES THE EXECUTIVE DIRECTOR OR CEO TO ESTABLISH COMPENSATION POLICIES FOR PERSONNEL ACTIONS INCLUDING PROMOTION, TRANSFER, DEMOTION AND RECLASSIFICATION.

THE EXECUTIVE COMMITTEE OF THE BOARD SHALL REVIEW AND APPROVE THE COMPENSATION POLICIES ESTABLISHED BY THE EXECUTIVE DIRECTOR OR CEO.

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

Name of the organization

COMMUNITY RESOURCE CENTER

Employer identification number

95-3497926

THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

Lined area for supplemental information.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions. COMMUNITY RESOURCE CENTER	Employer identification number (EIN) or 95-3497926
	Number, street, and room or suite no. If a P.O. box, see instructions. 650 2ND STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENCINITAS, CA 92024	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

COMMUNITY RESOURCE CENTER
 • The books are in the care of **650 2ND STREET - ENCINITAS, CA 92024**
 Telephone No. **760-753-1156** Fax No.

• If the organization does not have an office or place of business in the United States, check this box
 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2017**

5 For calendar year or other tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension:
THE ORGANIZATION RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER THE INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form if required by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalty of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, this is a correct and complete, and that I am authorized to prepare this form.

Signature Title **CEO** Date

**COMMUNITY RESOURCE CENTER
FINANCIAL STATEMENTS**

JUNE 30, 2016



Leaf & Cole, LLP
Certified Public Accountants

**COMMUNITY RESOURCE CENTER
FINANCIAL STATEMENTS
JUNE 30, 2016**

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Leaf-Cole, LLP
Certified Public Accountants
A Partnership of Professional Corporations

Independent Auditor's Report

To the Board of Directors
Community Resource Center

Report on the Financial Statements

We have audited the accompanying financial statements of Community Resource Center, which comprise the statement of financial position as of June 30, 2016, 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 auditing standards 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 from 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 entity'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 entity'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.

To the Board of Directors
Community Resource Center

Page 2

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Community Resource Center as of June 30, 2016, 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.

Report on Summarized Comparative Information

We have previously audited Community Resource Center's 2015 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated January 29, 2016. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2015, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Leaf & Cole LLP

San Diego, California
November 30, 2016

**COMMUNITY RESOURCE CENTER
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

ASSETS		
	<u>2016</u>	<u>2015</u>
<u>Current Assets:</u> (Notes 1 and 2)		
Cash and cash equivalents	\$ 400,885	\$ 388,970
Grants and contributions receivable, net	337,496	136,632
Inventory	72,678	82,854
Prepaid expenses and other assets	70,576	97,987
Total Current Assets	<u>881,635</u>	<u>706,443</u>
<u>Noncurrent Assets:</u> (Notes 1, 3, 4, 6 and 7)		
Deposits	33,822	34,133
Property and equipment, net	1,247,258	1,161,573
Donated property	39,200	39,200
Total Noncurrent Assets	<u>1,320,280</u>	<u>1,234,906</u>
TOTAL ASSETS	<u>\$ 2,201,915</u>	<u>\$ 1,941,349</u>
LIABILITIES AND NET ASSETS		
<u>Current Liabilities:</u> (Notes 1, 5, 6 and 7)		
Accounts payable and accrued expenses	\$ 275,860	\$ 226,214
Deferred revenue	-	40,250
Reserve for client loan guarantees	21,960	47,960
Line-of-credit	100,000	-
Current portion of note payable	4,282	6,800
Total Current Liabilities	<u>402,102</u>	<u>321,224</u>
<u>Noncurrent Liabilities:</u> (Note 7)		
Note payable, net of current portion	190,887	105,652
Total Noncurrent Liabilities	<u>190,887</u>	<u>105,652</u>
Total Liabilities	<u>592,989</u>	<u>426,876</u>
<u>Commitments</u> (Note 11)		
<u>Net Assets:</u> (Notes 1, 8, 9 and 10)		
Unrestricted Net Assets:		
Unrestricted	1,466,566	1,426,681
Board designated	25,000	25,000
Total Unrestricted Net Assets	<u>1,491,566</u>	<u>1,451,681</u>
Temporarily restricted	117,360	62,792
Total Net Assets	<u>1,608,926</u>	<u>1,514,473</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 2,201,915</u>	<u>\$ 1,941,349</u>

The accompanying notes are an integral part of the financial statements.

**COMMUNITY RESOURCE CENTER
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2015)**

	2016			2015
	Unrestricted	Temporarily Restricted	Total	
Revenue and Support:				
Resale stores revenue, net of \$1,249,196 and \$1,227,777 of cost of sales of donated goods in 2016 and 2015, respectively	\$ 1,254,132	\$ -	\$ 1,254,132	\$ 1,227,777
Contributions	662,893	420,567	1,083,460	1,170,117
Grant revenue	877,544	-	877,544	719,772
Special events, net of related expenses of \$97,623 and \$86,036 in 2016 and 2015, respectively	172,890	-	172,890	169,287
Program service revenue	52,111	-	52,111	57,081
Investment income	2,880	-	2,880	4,969
In-kind contributions	40,085	-	40,085	2,408
Net assets released from restrictions	365,999	(365,999)	-	-
Total Revenue and Support	3,428,534	54,568	3,483,102	3,351,411
Expenses:				
Program Services:				
Resale stores	1,059,088	-	1,059,088	1,180,206
Social services	783,128	-	783,128	1,146,982
Domestic violence and emergency shelter	737,955	-	737,955	635,029
Total Program Services	2,580,171	-	2,580,171	2,962,217
Supporting Services:				
Management and general	456,261	-	456,261	467,877
Fundraising	352,217	-	352,217	284,471
Total Supporting Services	808,478	-	808,478	752,348
Total Expenses	3,388,649	-	3,388,649	3,714,565
Change in Net Assets	39,885	54,568	94,453	(363,154)
Net Assets at Beginning of Year	1,451,681	62,792	1,514,473	1,877,627
NET ASSETS AT END OF YEAR	\$ 1,491,566	\$ 117,360	\$ 1,608,926	\$ 1,514,473

The accompanying notes are an integral part of the financial statements.

**COMMUNITY RESOURCE CENTER
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2015)**

	Program Services					Supporting Services			2015 Total
	Social Services	Domestic Violence and Emergency Shelter	Resale Stores	Total Program Services	Fundraising	Management and General	Total Supporting Services	2016 Total	
Salaries and Related Expenses:									
Staff salaries	\$ 159,998	\$ 310,245	\$ 376,815	\$ 1,047,058	\$ 140,979	\$ 234,561	\$ 375,540	\$ 1,422,598	\$ 1,502,527
Payroll taxes and employee related expenses	135,399	119,964	164,382	419,745	55,699	97,238	152,937	572,682	666,593
Temporary help	50,825	10,395	24,993	86,413	13,010	291	13,301	99,714	191,938
Total Salaries and Related Expenses	\$ 346,222	\$ 440,604	\$ 566,190	\$ 1,553,216	\$ 209,688	\$ 332,090	\$ 541,778	\$ 2,094,994	\$ 2,301,058
Other Operating Expenses:									
Rent	26,771	11,712	279,899	337,934	3,152	3,467	6,619	344,553	447,792
Direct expenses	31,727	121,343	370	153,440	9,598	314	9,912	163,352	176,488
Professional fees	6,383	10,218	1,430	18,031	95,337	46,636	141,973	160,004	42,872
Telephone and internet	32,428	33,509	37,707	103,644	4,978	4,999	9,977	113,621	104,780
Depreciation	38,093	23,865	22,413	84,371	3,245	8,272	11,517	95,888	86,752
Utilities	16,263	21,168	51,552	88,923	1,233	2,392	2,392	91,315	105,106
Repairs and maintenance	27,503	11,736	11,657	50,896	968	1,005	2,033	52,929	40,736
Hiring costs	405	720	-	1,125	9,074	38,713	47,787	48,912	3,891
Supplies	13,155	12,324	8,082	33,701	1,476	1,624	3,100	36,861	41,929
Bank service charges	1,164	699	23,192	25,055	3,206	5,948	9,154	34,209	35,442
Advertising	342	3,775	23,031	27,148	2,916	989	3,905	31,051	19,663
Insurance	9,837	5,894	9,271	25,002	1,531	1,683	3,214	28,216	31,956
Small equipment and furniture	10,277	7,216	6,326	23,819	1,080	1,188	2,268	26,087	18,728
Vehicle	-	6,361	14,290	20,651	-	-	-	20,651	24,460
Travel, training, meals and entertainment	9,463	4,760	1,409	15,632	1,730	2,700	4,430	20,062	23,166
Staff and board development	5,178	5,147	591	10,916	1,130	2,308	3,438	14,351	17,977
Interest	2,840	1,800	736	5,378	1,353	1,467	2,800	8,178	5,231
Postage and delivery	1,336	1,424	373	3,133	463	509	972	4,105	3,650
Property taxes	2,988	541	67	3,586	121	133	254	3,840	4,388
Miscellaneous expenses	-	-	137	137	-	881	881	1,018	1,618
Bad debt expense	740	-	-	740	-	-	-	740	5,000
Taxes and permits	111	92	311	514	52	58	110	624	396
Dues and subscriptions	150	-	52	202	-	(36)	(36)	166	1,625
Client loan guarantee loss reserve	-	(7,083)	-	(7,083)	-	-	-	(7,083)	109,861
TOTAL PROGRAM AND SUPPORTING EXPENSES	\$ 783,128	\$ 737,955	\$ 1,059,088	\$ 2,580,171	\$ 352,217	\$ 456,201	\$ 808,478	\$ 3,388,649	\$ 3,714,565

The accompanying notes are an integral part of the financial statements

**COMMUNITY RESOURCE CENTER
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2015)**

	<u>2016</u>	<u>2015</u>
<u>Cash Flows From Operating Activities:</u>		
Change in net assets	\$ 94,453	\$ (363,154)
Adjustments to reconcile change in net assets to net cash provided by (used in) operating activities:		
Depreciation	95,888	86,752
(Increase) Decrease in:		
Grants and contributions receivable, net	(200,864)	(41,928)
Inventory	10,176	3,205
Prepaid expenses and other assets	27,411	(4,693)
Increase (Decrease) in:		
Accounts payable and accrued expenses	49,646	(2,123)
Deferred revenue	(40,250)	37,825
Reserve for client loan guarantees	(26,000)	4,635
Net Cash Provided by (Used in) Operating Activities	<u>10,460</u>	<u>(279,481)</u>
<u>Cash Flows From Investing Activities:</u>		
Return of deposits, net	311	778
Purchase of property and equipment	(181,573)	(62,014)
Net Cash Used in Investing Activities	<u>(181,262)</u>	<u>(61,236)</u>
<u>Cash Flows From Financing Activities:</u>		
Proceeds from line-of-credit	100,000	-
Proceeds from note payable	89,472	-
Payments on note payable	(6,755)	(17,456)
Net Cash Provided by (Used in) Financing Activities	<u>182,717</u>	<u>(17,456)</u>
Net Increase (Decrease) in Cash and Cash Equivalents	11,915	(358,173)
Cash and Cash Equivalents at Beginning of Year	<u>388,970</u>	<u>747,143</u>
CASH AND CASH EQUIVALENTS AT END OF YEAR	<u>\$ 400,885</u>	<u>\$ 388,970</u>
<u>Supplemental Disclosure for Cash Flow Information:</u>		
Cash paid for interest	<u>\$ 8,078</u>	<u>\$ 5,232</u>

The accompanying notes are an integral part of the financial statements.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies:

Organization

Community Resource Center (the "Organization") was organized as a California Nonprofit Public Benefit Corporation in 1979. Its purpose is to provide families in need, who are facing hunger, homelessness and victims of domestic violence with safety, stability, and a path to self-sufficiency. The Organization is supported by donor contributions, private and government grants and net proceeds from resale stores and events.

The following is a brief description of the Organization's programs:

Social Services

The Organization's integrated social services programs served 2,651 households in need in 2016.

These comprehensive services included:

- Homelessness prevention, providing shelter access, motel vouchers, and rental assistance.
- Access to healthy food and nutritional education programs.
- Employment preparation and job location assistance.
- Financial literacy programs and volunteer income tax preparation (VITA).
- Service referrals to collaborating agencies.
- Low cost automobile loans (Ways to Work)(Note 5).
- Counseling.
- Holiday Baskets Program (the largest distribution of food, essentials and toys of its kind in San Diego County, which served 1,710 households in December 2015).

With the hands on participation of the Organization's social workers, the Organization's clients create and execute personalized self-sufficiency plans that increase their housing and financial stability, as well as their level of self-sufficiency.

During the year ended June 30, 2016, the Organization secured transitional or permanent housing for 64% of clients who participated in the Organization's emergency shelter programs.

The Counseling program enables clients to attain mental and emotional stability, which, in combination with other Organization services, enables clients to more effectively manage personalized plans for self-sufficiency.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies: (Continued)

Organization (Continued)

Resale Stores

During the year ended June 30, 2016, the Organization operated three resale stores located in Encinitas, Carlsbad and San Marcos. Due to challenges with location and profitability, the Oceanside resale store was closed on October 14, 2015 when the lease expired.

During the current fiscal year, the Encinitas Resale store was relocated from 111 C Street ("Old Location") to 1331 Encinitas Boulevard ("New Location"). The lease at the Old Location expired on November 30, 2015; the Organization entered into a five year lease at the New Location commencing September 1, 2015 and this resale store opened on December 21, 2015. See Note 11 – Commitments.

During the current fiscal year, the Carlsbad resale store extended its lease for five years through March 30, 2021. All other terms remain the same.

The lease on the San Marcos resale store, which originally ran through December 31, 2016 has been extended through June 30, 2017. See Note 11 - Commitments and Note 12 - Subsequent Events. The organization is in the process of identifying a replacement location.

Domestic Violence and Emergency Shelter

The Organization's domestic violence program includes Carol's House emergency domestic violence shelter, a transitional housing program, and domestic violence community services. Clients receive a wide range of supportive services, including case management, counseling and group therapy, life skills classes, legal advocacy, the therapeutic children's program, and referrals to outside services.

During the year ended June 30, 2016, the Organization served 60 households and 112 children in Carol's House and 4 households and 10 children in the transitional housing program. CRC also served community based clients including 32 adults and 19 children in counseling, 17 adults in case management, and 7 adults in legal advocacy services for a total of 120 adults and 141 children served across the domestic violence programs.

As a result of program participation, 89% of adults increased their self-esteem, 88% improved their problem-solving, communication, household management, and employment skills and 86% increased or maintained their financial stability. In addition, 80% of children improved their self-concept and 71% reduced symptoms of depression and anxiety upon completion of the program.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies: (Continued)

Significant Accounting Policies

Method of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting, which is in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP) and, accordingly, reflect all significant receivables, payables, and other liabilities.

Financial Statement Presentation

The financial statements present information regarding the financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets.

- Unrestricted net assets – Net assets not subject to donor imposed stipulations.
- Temporarily restricted net assets – Net assets subject to donor imposed stipulations that will be met by actions of the Organization and/or the passage of time. When a donor stipulated time restriction ends or a purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.
- Permanently restricted net assets – Net assets subject to donor imposed stipulations requiring that they be maintained permanently by the Organization. The income from these assets is available for either general operations or specific programs as specified by the donor.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent 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.

Fair Value Measurements

Fair value accounting standards define fair value, establish a framework for measuring fair value, outline a fair value hierarchy based on inputs used to measure fair value and enhance disclosure requirements for fair value measurements. The fair value hierarchy distinguishes between market participant assumptions based on market data obtained from sources independent of the reporting entity (observable inputs that are classified within Level 1 or 2 of the hierarchy) and the reporting entity's own assumptions about market participant assumptions (unobservable inputs classified within Level 3 of the hierarchy). The Organization had no financial instruments at June 30, 2016 and 2015.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies: (Continued)

Significant Accounting Policies (Continued)

Allowance for Doubtful Accounts

Bad debts are recognized on the allowance method based on historical experience and management's evaluation of outstanding receivables. The allowance for doubtful grants and contributions receivable totaled \$2,520 and \$5,000 at June 30, 2016 and 2015, respectively.

Inventory

Inventories of donated merchandise held for resale by the Organization's resale stores are valued at market value, determined on the first-in, first-out basis.

Capitalization and Depreciation

The Organization capitalizes all expenditures in excess of \$1,000 for property and equipment at cost, while donations of property and equipment are recorded as support at their estimated fair value. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire buildings and equipment are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Organization reclassifies temporarily restricted net assets to unrestricted net assets at that time. Property and equipment are depreciated using the straight-line method over the estimated useful asset lives as follows:

Buildings	31.5 years
Leasehold improvements	5 - 15 years
Furniture and fixtures	3 - 7 years
Automobile	4 years
Software	5 years

Depreciation totaled \$95,888 and \$86,752 for the years ended June 30, 2016 and 2015, respectively.

Maintenance and repairs are charged to operations as incurred. Upon sale or disposition of property or equipment, the asset account is reduced by the cost and the accumulated depreciation account is reduced by the depreciation taken prior to the sale. Any resultant gain or loss is then recorded as income or expense.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies: (Continued)

Significant Accounting Policies (Continued)

Impairment of Real Estate

The Organization reviews its investment in real estate for impairment whenever events and changes in circumstances indicate that the carrying value of such property may not be recoverable. Recoverability is measured by a comparison of the carrying amount of the real estate to the future net undiscounted net cash flows expected to be generated by the property and any estimated proceeds from the eventual disposition of the real estate. If the real estate is considered to be impaired, the impairment to be recognized is measured at the amount by which the carrying amount of real estate exceeds the fair value of such property. There were no impairment losses recognized in 2016 or 2015.

Compensated Absences

Accumulated unpaid vacation totaling \$58,617 and \$61,239 at June 30, 2016 and 2015, respectively, is accrued when incurred and included in accounts payable and accrued expenses.

Revenue Recognition

Government grant revenue is recognized in the period in which the related work is performed in accordance with the terms of the grant. Grants receivable are recorded when revenue earned under a grant or contract exceeds the cash received. Deferred revenue is recorded when cash received under a grant exceeds the revenue earned. Deferred revenue from grants totaled \$0- and \$40,250 at June 30, 2016 and 2015, respectively.

Contributions are recognized when the donor makes a promise to give to the Organization that is in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

Donated Goods and Services

The Organization utilizes the services of many volunteers. This contribution of services by the volunteers is not recognized in the financial statements unless the services received (a) create or enhance nonfinancial assets or (b) require specialized skills which are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation. The donated services for the years ended June 30, 2016 and 2015 did not meet the requirements above, therefore no amounts were recognized in the financial statements.

In-kind contributions of goods used for program services with an estimated fair value of \$40,085 and \$2,408 for the years ended June 30, 2016 and 2015, respectively are included in in-kind contributions in the statement of activities.

In-kind contributions of donated goods and materials with an estimated fair value of \$1,249,196 and \$1,227,777 for the years ended June 30, 2016 and 2015, respectively reduce resale stores revenue on the statement of activities.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 1 - Organization and Significant Accounting Policies: (Continued)

Significant Accounting Policies (Continued)

Allocated Expenses

Expenses by function have been allocated among program and supporting services classifications on the basis of internal records and estimates made by the Organization's management.

Income Tax Status

The Organization is a public charity and is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and Section 23701(d) of the California Revenue and Taxation Code. The Organization 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. The Organization is not a private foundation.

Community Resource Center's Return of Organization Exempt from Income Tax and Exempt Organization Business Income Tax Returns for the periods ended June 30, 2016, June 30, 2015, June 30, 2014 and December 31, 2013, are subject to examination by Internal Revenue Service and State taxing authorities, generally three to four years after the returns were filed.

Concentration of Credit Risk

The Organization maintains its cash in bank deposit accounts which, at times, may exceed federally insured limits. The Organization has not experienced any losses in such accounts. The Organization believes it is not exposed to any significant credit risk on cash and cash equivalents.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all investment instruments purchased with a maturity of three months or less to be cash equivalents.

Reclassification

The Organization has reclassified certain prior year information to conform with the current year presentation.

Subsequent Events

The Organization has evaluated subsequent events through November 30, 2016, which is the date the financial statements are available for issuance, and concluded that there were no events or transactions that needed to be disclosed, except as disclosed in Note 12.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 2 - Grants and Contributions Receivable:

Grants and contributions receivable consist of the following at June 30:

	<u>2016</u>	<u>2015</u>
California Emergency Management Agency	\$ 130,729	\$ 14,239
Foundations and Trusts	97,605	55,517
Emergency Solutions Grant - Domestic Violence Shelter	38,587	-
Other	21,990	7,293
County of San Diego	20,438	31,201
Department of Housing and Urban Development	18,598	14,937
Victims of Crime Act Crime Victims Funds	12,069	13,450
Interfaith Community Services	-	4,995
Total Grants and Contributions Receivable	<u>340,016</u>	<u>141,632</u>
Less: Allowance for doubtful accounts	<u>(2,520)</u>	<u>(5,000)</u>
Total Grants and Contributions Receivable, Net	<u>\$ 337,496</u>	<u>\$ 136,632</u>

At June 30, 2016, contributions receivable of \$12,000 are due in more than one year.

Note 3 - Property and Equipment:

Property and equipment consist of the following at June 30:

	<u>2016</u>	<u>2015</u>
Land and buildings	\$ 1,712,678	\$ 1,687,195
Leasehold improvements	367,693	296,099
Furniture and fixtures	204,651	229,491
Automobile	62,412	62,412
Software	11,000	11,000
Subtotal	<u>2,358,434</u>	<u>2,286,197</u>
Less: Accumulated depreciation	<u>(1,111,176)</u>	<u>(1,124,624)</u>
Property and Equipment - Net	<u>\$ 1,247,258</u>	<u>\$ 1,161,573</u>

Note 4 - Donated Property:

Donated property consists of land in Apache County, Arizona donated to the Organization. The land has been recorded at fair value based on the value of the County Tax Assessor upon acquisition and totaled \$39,200 at June 30, 2016 and 2015.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 5 - Reserve for Client Loan Guarantees:

The Organization had a grant agreement with Ways to Work, Inc. (the "Grantor"), in which the Grantor provided automobile loans with a maximum value of \$6,000, a term of three years and an interest rate of 8% to the Organization's clients. The program commenced in July 2012 and the Grantor issued the last loan in July 2014. Pursuant to the grant agreement, the Organization services the client loans and provides a loan guarantee for the client as additional security to the Grantor. The Organization has established a reserve for loan guarantees totaling \$21,960 and \$47,960 at June 30, 2016 and 2015, respectively.

During the year ended June 30, 2015, the Organization terminated this program and is working only with existing clients to assist them in meeting their obligations, keeping their automobile, and protecting their credit rating. The loan guarantee loss reserve (income) expense under this program totaled \$(7,083) and \$109,861 for the years ended June 30, 2016 and 2015, respectively. The final loan matures in July, 2017.

Note 6 - Line-of-Credit:

The Organization has a line-of-credit with U.S. Bank in the amount of \$100,000 with interest at the bank's prime rate plus 1% (4.5% at June 30, 2016). The line-of-credit is renewable on September 30, 2016 (Note 12), and is collateralized by investment real property. The line-of-credit balance totaled \$100,000 and \$-0- at June 30, 2016 and 2015, respectively.

Note 7 - Note Payable:

Note payable consists of the following at June 30:

	<u>2016</u>	<u>2015</u>
The note payable to U.S. Bank, was payable originally in monthly installments of \$1,891, including interest at 4.23% and was due on January 18, 2021. On September 30, 2015, the note was amended and restated to increase the aggregate amount of the note to \$197,452 and extended the due date. The amended and restated note is payable in monthly installments of \$1,145 including interest at 4.83% and is due on October 15, 2025. The note is collateralized by investment in real estate.		
Less: Current portion	\$ 195,169	\$ 112,452
Note Payable, Noncurrent	(4,282)	(6,800)
	\$ 190,887	\$ 105,652

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 7 - Note Payable: (Continued)

Future principal payments on the note payable are as follows:

Years Ended <u>June 30</u>	
2017	\$ 4,282
2018	4,496
2019	4,722
2020	4,934
2021	5,205
Thereafter	171,530
Total	<u>\$ 195,169</u>

Note 8 - Unrestricted Net Assets:

Unrestricted net assets are available for the following purposes at June 30:

	<u>2016</u>	<u>2015</u>
Unrestricted, undesignated net assets	\$ 1,466,566	\$ 1,426,681
Board designated funds	25,000	25,000
Total Unrestricted Net Assets	<u>\$ 1,491,566</u>	<u>\$ 1,451,681</u>

Note 9 - Temporarily Restricted Net Assets:

Temporarily restricted net assets are available for the following purposes at June 30:

	<u>2016</u>	<u>2015</u>
Domestic violence	\$ 86,475	\$ 20,808
Volunteer management	15,133	-
Food	13,737	-
Time restriction	2,015	2,015
Marketing and special events	-	14,549
Ways to Work	-	15,529
Database/Software development	-	9,891
Total Temporarily Restricted Net Assets	<u>\$ 117,360</u>	<u>\$ 62,792</u>

Net assets in the amount of \$365,999 were released from donor restrictions by incurring expenses and events satisfying the purpose or time restrictions specified by donors for the year ended June 30, 2016.

**COMMUNITY RESOURCE CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2015)**

Note 10 - Beneficial Interest in Endowment Funds:

The Organization has a beneficial interest in funds held at Rancho Santa Fe Foundation (RSFF). The Organization has not recorded this asset in the accompanying financial statements. RSFF's spending policy is to disburse 5% of the value of the fund annually, based on a historical average value of the fund. The calculation is based on the average value of the fund for twelve quarters prior to the date of the distribution. The distributions are used to further the Organization's mission. The Organization received distributions totaling \$2,940 and \$-0- for the years ended June 30, 2016 and 2015, respectively. The beneficial interest in funds held at Rancho Santa Fe Foundation totaled \$58,134 and \$61,105 at June 30, 2016 and 2015, respectively, of which \$25,000 at June 30, 2016 and 2015 was contributed by the Organization.

Note 11 - Commitments:

Retirement Plan

The Organization maintains a qualified deferred compensation plan for eligible employees. Under the Plan, employees may elect to defer a percentage of pretax annual compensation, subject to the Internal Revenue Service limits. The Organization matches the participant's contribution to the Plan, not to exceed three percent of the participant's gross compensation. The Organization contributed \$14,685 and \$15,275 to the Plan for the years ended June 30, 2016 and 2015, respectively.

Operating Leases

The Organization leases several properties for resale stores, storage facilities and equipment through March, 2021. Rent expense totaled \$344,553 and \$447,792 for the years ended June 30, 2016 and 2015, respectively.

The following is a schedule of future minimum lease payments under the leases:

Years Ended <u>June 30</u>	
2017	\$ 237,831
2018	183,840
2019	187,659
2020	176,532
2021	62,399
Total	<u>\$ 848,261</u>

Note 12 - Subsequent Events:

On September 30, 2016, the Organization extended the line-of-credit through October 1, 2017 and increased the available balance on the line-of-credit to \$200,000. All other terms and conditions remain the same.

On October 18, 2016, the Organization extended the San Marcos resale store lease through June 30, 2017.

Internal Revenue Service

Date: January 25, 2007

COMMUNITY RESOURCE CENTER
SAN DIEGO R C
650 2ND ST
ENCINITAS CA 92024-3560

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Mr. Morton 31-08703
Customer Service Representative
Toll Free Telephone Number:
877-829-5500
Federal Identification Number:
95-3497926

Dear Sir or Madam:

This is in response to your request of January 25, 2007, regarding your organization's tax-exempt status.

In October 1980 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under section 509(a)(2) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations 1



FRANCHISE TAX BOARD

SACRAMENTO, CALIFORNIA 95867

Telephone: (800)852-5711

December 13, 1979

In reply refer to

344: TLC:vo:g

COMMUNITY RESOURCE CENTER
Attn.: Ronald W. Egger
275 Estrelita Dr.
Vista, CA 92083

Purpose : Charitable
Form of Organization : Corporation
Accounting Period Ending: September 30
Organization Number : 0967931

On the basis of the information submitted and provided your present operations continue unchanged or conform to those proposed in your application, you are exempt from state franchise or income tax under Section 23701d, Revenue and Taxation Code. Any change in operation, character or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address also must be reported.

You are required to file Form 199 (Exempt Organization Annual Information Return) or Form 199B (Exempt Organization Annual Information Statement) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. See annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax under Section 23731 of the Code. In this event, you are required to file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 3rd month (2 1/2 months) after the close of your annual accounting period.

If the organization is incorporating, this approval will expire unless incorporation is completed with the Secretary of State within 60 days.

Exemption from federal income or other taxes and other state taxes requires separate applications.

Robert Lute
Robert Lute, Manager
Exempt Organization Section

*This exemption effective November 26, 1979.

cc: Registry of Charitable Trusts



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: La Colonia de Eden Gardens, Inc.
 Mailing Address: PO Box 565
 City Solana Beach State CA Zip 92075
 Contact Person: Manny Aguilar
 Daytime Phone: (619) 672-5872
 Evening Phone: (SAME)
 Email address: manny@sbglobal.net

1. W-9 must be attached
 Summary of organization's budget must be attached
 Proposed program budget must be attached
 Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
 Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: _____

3. Has your organization received financial assistance from the City before?
 Yes No
 If yes, what activities and which fiscal year? 2016 2015

4. Amount requested for FY 2017-18 \$ 5,000.00

5. Proposed Total Program Costs: \$ 18,300.00
 (Includes all estimated costs to conduct proposed activity/program.)

6. Title of Proposed Program/Service: 2018 LCEG Summer Youth Leadership Program

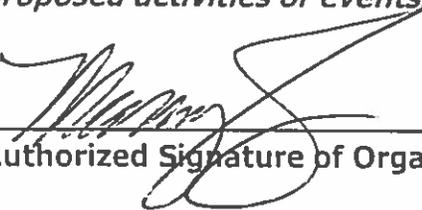
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
The funds will be used to take 60 kids (youth) and 5 adults to provide life skills to at risk youth, and help them reach their full potential and develop leadership skills.

(Attach extra sheet, if necessary.)

8. Estimated number of S.B. residents to be served by proposed program: 50
9. Program Dates/Location:
07/16/2018 to 07/18/2018 @ The Whispering Winds
Camp in Julian
10. Anticipated Program Objectives or Accomplishments:
Youth will learn life skills such as teamwork,
conflict resolution, communications,
mentoring and dealing with difficult situations.
11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?
Acknowledgment will be made via a written
report after the camp and during oral
communications at the Salana Beach City
Council Meeting.
12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?
Yes. We will apply for additional grants
via both public and private sources in
addition to our own fundraising efforts.
13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?
Yes. Virtually all of our staff are volunteers.
14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?
We will need to do whatever is in the best
interest of our youth to develop the best
camp possible with whatever resources
are available. Thank you 😊

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.



Authorized Signature of Organization

10/31/2017
Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <i>La Colonia de Eden Gardens, Inc.</i>	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC, check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3). Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) <i>P.O. Box 565</i>	
	6 City, state, and ZIP code <i>Solana Beach, CA 92075</i>	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	Employer identification number
[] [] [] - [] [] - [] [] [] [] [] []	45 - 2555259

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/irv9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

**LA COLONIA DE EDEN GARDENS, INC.
LCEG KIDS SUMMER LEADERSHIP CAMP
2018 BUDGET**

Revenues:

City of Solana Beach Grant Program	\$5,000
Santa Fe Christian Schools	\$3,200
Other Foundation & Individual Grants	\$ 10,800
Total Revenues	\$19,000

Expenses:

Camp Fees for 60 kids & 5 adults @ \$220	\$13,200
Activities & Facilities & Presenters	\$2,000
Adult lunches & dinners	\$600
Charter Bus round trip	
Contingency & Miscellaneous Expenses	\$2,500
Total Expenses	\$18,300

Please note any surplus funds will be applied to 2018 Summer Camp

LA COLONIA DE EDEN GARDENS, INC.

TREASURER'S REPORT

January 1, 2016 – December 31, 2016

Beginning Cash Balance, January 1, 2016.....\$20,408.27
Year 2015 Income.....\$48,912.30
*Year 2015 Expenses.....\$30,606.44
Ending Cash Balance, December 31, 2016.....\$38,714.13

ASSETS & LIABILITIES

CITIBANK ACCOUNT.....\$50,563.15
TUFT SHED.....\$ 1,913.61
AQUAPONICS SYSTEM.....\$ 1,933.57
GARDEN PICNIC TABLE.....\$ 750.00
TOTAL ASSETS.....\$55,160.33
LIABILITIES.....\$-----
NET ASSETS.....\$55,160.33

* 2016 Grants, Donations:

Sand Dollar Foundation.....\$12,000.00
Santa Fe Christian Schools.....\$ 4,000.00
Peter House & Carol Childs..... \$ 2,500.00
H.G. Fenton Company.....\$ 2,500.00
San Diego County..... \$ 3,500.00
St. James Mission Circle.....\$ 3,000.00
Coastal Community Foundation.....\$ 5,000.00
City of Solana Beach.....\$ 1,000.00
MiraCosta Community College.....\$ 1,000.00

Wimmer Yamada And Caughey.....\$ 500.00

2016 Major Expenses:

Summer Youth Leadership Camp.....\$18,300.00

Community Garden Terrace Project.....\$5,000.00

LCEG Website Expense.....\$ 325.00

Board of Directors Insurance.....\$ 569.00

Arena Soccer YMCA.....\$3,500.00

Please refer to: DDLM Summary Report for income and expense Youth Leadership Summer Camp
2016 Report for income and expense



STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0540

Entity Status Letter

Date: 10/31/2017

ESL ID: 5916552030

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3385879

Entity Name: LA COLONIA DE EDEN GARDENS, INC.

- 1. The entity is in good standing with the Franchise Tax Board.
- 2. The entity is not in good standing with the Franchise Tax Board.
- 3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 d.
- 4. We do not have current information about the entity.

The above information does not necessarily reflect:

- The entity's status with any other agency of the State of California, or other government agency.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or the entity did business in California at a time when it was not qualified or not registered to do business in California:
 - The status or voidability of any contracts made in California by the entity at a time when the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
 - For entities revived under R&TC Section 23305b, any time limitations on the revivor or limitation of the functions that can be performed by the entity.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the United States

916.845.6500 from outside the United States

TTY/TDD: 800.822.6268 for persons with hearing or speech impairments



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: North Coast Repertory Theatre
Mailing Address: 987 Lomas Santa Fe Drive STE D
City Solana Beach State CA Zip 92075
Contact Person: Bill Kerlin
Daytime Phone: (858) 481-2155, Ext. 222
Evening Phone: (305) 510-0217
Email address: bill@northcoastrep.org

1. W-9 must be attached
Summary of organization's budget must be attached
Proposed program budget must be attached
Financial Statements (see Application Guidelines) must be attached
2. A copy of the certificate of California Nonprofit Corporation must be attached
Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 1070451
3. Has your organization received financial assistance from the City before?
Yes No
If ^{Yes} yes, what activities and which fiscal year? Please see Attached
4. Amount requested for FY 2017-18 \$ 5,000
5. Proposed Total Program Costs: \$ 9,377
(Includes all estimated costs to conduct proposed activity/program.)
6. Title of Proposed Program/Service: Theatre School production of The Secret Garden
7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:

Grant funds from the City of Solana Beach will be used to cover part of the expenses for a May 2018 production of THE SECRET GARDEN by the Theatre School @ NorthCoastRep. The play's themes deal with acceptance of those with disabilities, the challenges faced by orphans and rejoices in the discovery, preservation and restoration of the outdoors. Please see the complete project description on the attached sheet.

(Attach extra sheet, if necessary.)

SECTION 3

Financial Assistance has been received from the City of Solana Beach in the following years for the project listed below:

- 2004-Educational Outreach Program, "Behind the Mask"
- 2005-Planning costs for Cedros Crossing
- 2006-Educational Outreach Program, "Behind the Mask"
- 2008-Education Outreach program, "Behind the Mask"
- 2010-Educational Play about Solana Beach
- 2011-Educational Outreach Program, "Behind the Mask"
- 2012-Education outreach program . "Anti-Bullying"
- 2013-Theatre School Holocaust Production, "Anne Frank"
- 2014-Theatre School Literacy Project, "Seussical"
- 2015-Theatre School Literacy Project, "Aladdin Jr."
- 2016-Theatre School Literacy Project, "Peter and the Starcatcher"

Theatre School@North Coast Rep Project: *The Secret Garden*

The Secret Garden by Frances Hodgson Burnett was a very popular children's novel and is considered a classic of children's English literature. The book was adapted to a play by Pamela Sterling. Highly theatrical and winner of Distinguished Play Award, *The Secret Garden* truly captures the magic of theatre.

Set in England, The plot begins on a bleak note, certain to capture the attention of young and old alike. Young Mary Lennox loses her parents to a cholera outbreak in India, and she is sent to live with an uncle whom she has never met, a hermit named Archibald Craven, who lives in an imposing, secluded manor on the British heath. Inside the haunting house upon the hill, Mary finds a reclusive, long-suffering collection of souls. Mary gains entrance to a locked walled garden she learns about from a good-natured maid, Martha.

The play evolves into a joyous story about the growth and blossoming of the earth and the human spirit. It is a garden of delight for the ears and the imagination. Mary and her friend Colin, whose natures have been badly warped, thrive with the discovery that selflessness opens a secret door to happiness. They are encouraged by the warmhearted Yorkshire maid, Martha, and her brother, Dickon, who understands the language of birds, animals and flowers; the crusty gardener, Ben Weatherstaff; and, of course, the robin who leads Mary to the garden that changes her life. Colin's reunion with his father touches all of us deeply.

The secret garden at Misselthwaite Manor is the site of both the near-destruction and the subsequent regeneration of a family. The play's themes deal with acceptance of those with disabilities, the challenges faced by orphans, and the rewards found in the discovery, preservation and restoration of the outdoors. Another theme is if something is neglected it withers and dies, but when it is worked on and cared for, it thrives, like the main characters, Mary and Colin. Just as the Theatre School@North Coast Rep students will blossom with the support of the City of Solana Beach.

Time period: 1911

Settings of play: An unspecified British colony of East India and on the grounds and interior of Misselthwaite Manor in Yorkshire, England.

Run-time: 90 min, no intermission.

Suggested rating: PG – recommended for grades 2nd & up, but all audiences may enjoy.

Cast size: 9,

8. Estimated number of S.B. residents to be served by proposed program: 800-1,000

9. Program Dates/Location:

Auditions: April 3 & 4, Callbacks on April 5th Rehearsals, April 10th-May 16th
Seven performances, May 17 -20, 2018

10. Anticipated Program Objectives or Accomplishments:

Theatre School Director Ben Cole selected the play because of its themes of tolerance and self-acceptance as well of feelings of alienation which turn into acceptance, so much a part of the preteen and adolescent experience. An educational component designed to help meet Visual Arts and Performing Arts, Common Core and STEAM goals will be incorporated.

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

The City of Solana Beach will be acknowledged in our Mainstage and Theatre School programs, on the Donor Board in the Theatre Lobby, in our Season Brochure and on the Theatre School section of theatre's website as we as the corporate support section of the website (northcoastrep.org).

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

In addition to donations from Theatre School parents, we will receive production fees from students in the cast. Production fees (similar to the fees charged to participate in youth sports) help fund the cost of the activity. Fees range from \$150 for current Theatre School students to \$350 for students not currently enrolled in classes. Partial and full scholarships are made available to students and their parents as needed. Full and partial scholarships for all five Theatre School productions at North Coast Rep last season totaled \$16,500, averaging \$3,300 per Theatre School production. Scholarships go to students from Casa de Amistad and La Colonia de Eden Gardens located in Solana Beach.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Volunteers are used in many capacities. They serve as ushers, ticket takers, counter workers selling concessions in the cafe and sewing or repairing costumes. Some work in the Box Office or hand out programs. Parent Volunteers also bring snacks for the rehearsals and help organize a party for the cast after one of the performances.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

Partial funding will cause the number of scholarships offered to be scaled back, possibly preventing the participation of minority or at-risk youth. The production will be scaled back in terms of sets and costuming. Partial funding might also cause the number of cast members to be decreased.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.



10-27-17

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

SEASON 36



as of 10.23.17

OPERATING FUND & OTHER FUNDS
Proposed Budget for FY 2017-18 (\$36) VS
Current Actuals/Projections for FY 2016-17 (\$35)

Actuals: Sep 2017
 Budget: Oct 2017 - Aug 2018

<u>Proposed</u>	<u>Current</u>	<u>VAR</u>
<u>Budget</u>	<u>Final</u>	<u>ANNUAL</u>
<u>17-18</u>	<u>16-17</u>	
S 36	S 35	S36 vs S35

UNRESTRICTED OPERATING FUND

SUPPORT AND REVENUE			
Contributions	883,197	905,057	(21,860) a
Ticket Revenue - Mainstage	1,097,376	1,049,297	48,079 b
Ticket Revenue - Variety	237,009	243,346	(6,337) c
Theatre School Revenue	194,954	217,062	(22,108) d
Other Revenue	96,051	90,526	5,525 e
Patron Service Revenue	78,493	73,342	5,151 f
Special Events Revenue	35,000	6,470	28,530 g
Total Support & Revenue	2,622,080	2,585,100	36,980
EXPENSES			
Personnel - Admin	831,792	775,709	56,083 h.1
Personnel - Artistic	435,037	399,525	35,512 h.2
Personnel - Taxes & Benefits	233,262	217,424	15,838 h.3
General & Admin Expenses	333,671	333,917	(246) i
Development Expenses	90,481	89,663	817 j
Marketing Expenses	212,527	251,161	(38,634) k
Production Expenses	253,569	259,658	(6,090) l
Theatre School Productions	43,373	37,787	5,585 m
Variety Night Expenses	112,759	213,032	(100,273) n
Total Expenses	2,546,471	2,577,873	(31,406)
NET CHANGE - OPERATIONS	75,610	7,228	68,386 p
	2.9%	0.3%	

THE THEATRE SCHOOL
AT NORTH COAST REP
SEASON 36



BUDGET
EXPENSES

THE SECRET
GARDEN

Director	\$1,000
Light Designer	\$200
Sound Designer	\$200
Lights & Sound Equip	\$50
Painting Labor/Materials	\$200
Set Design - labor	\$500
Set Materials	\$500
Specialty Designer	\$500
Stage Manager / AD Mentor	\$750
Directing/Writing Mentor	\$0
Assistant Director	\$0
Actor / Mentor	\$750
Costume Designer	\$750
Costumes - materials/rent	\$750
Costume cleaning	\$100
Prop Designer	\$300
Props - materials	\$150
Dramaturg / Dialect	\$250
Stage Combat	\$500
Musical Director	\$0
Choreographer	\$0
Accompaniment (MT Pit)	\$0
Misc / Materials	\$500
Thank You Gifts	\$100
Tech Dinner	\$0
Videographer	\$0
Royalties	\$800
Rental Fee for Materials	\$375
Script copies	\$88
Shipping	\$64
Production Total	\$9,377

North Coast Repertory Theatre
Balance Sheet
As of August 31, 2017

	Aug 31, 17
ASSETS	
Current Assets	
Checking/Savings	
1000 · BANK ACCOUNTS - OPS UNRESTRICT	334,404.66
1010 · BANK ACCTS- SAVINGS, RESTRICTED	219,220.26
Total Checking/Savings	553,624.92
Accounts Receivable	
11103 · Accounts Receivable - TM	13,327.49
11104 · Pledges Recievable	5,000.00
Total Accounts Receivable	18,327.49
Other Current Assets	
11112 · OTHER CURRENT ASSETS	40,009.83
1400 · PREPAID EXPENSES	151,299.10
Total Other Current Assets	191,308.93
Total Current Assets	763,261.34
Fixed Assets	
1600 · FIXED ASSETS - BASIS	483,242.00
1700 · ACCUMULATED DEPRECIATION	-391,265.66
Total Fixed Assets	91,976.34
TOTAL ASSETS	855,237.68
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 · Accounts payable	25,851.33
Total Accounts Payable	25,851.33
Credit Cards	
2050 · Credit card	-6,282.45
Total Credit Cards	-6,282.45
Other Current Liabilities	
2070 · ACCRUALS AND DEDUCTIONS PAYABLE	29,074.08
2250-T · DEFERRED REVENUE - TOTAL	635,425.56
Total Other Current Liabilities	664,499.64
Total Current Liabilities	684,068.52
Total Liabilities	684,068.52
Equity	
3000 · Unrestricted net assets	2,704.05
3010 · Unrestrict (retained earnings)	132,005.60
Net Income	36,459.51
Total Equity	171,169.16
TOTAL LIABILITIES & EQUITY	855,237.68

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. North Coast Repertory Theatre, a Nonprofit Corporation		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) 987 Lomas Santa Fe Drive, Suite D		Requester's name and address (optional)
	6 City, state, and ZIP code Solana Beach, CA 92075		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number										
OR										
Employer identification number										
9	5		-	3	8	1	9	3	0	7

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 10-21-17
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
 Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/w9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.
- By signing the filled-out form, you:
- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
 - Certify that you are not subject to backup withholding, or
 - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

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.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2015
 Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

A For the 2015 calendar year, or tax year beginning 09/01/15, and ending 08/31/16

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NORTH COAST REPERTORY THEATRE	D Employer identification number 95-3819307
	Doing business as	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 987-D LOMAS SANTA FE DRIVE	
	City or town, state or province, country, and ZIP or foreign postal code SOLANA BEACH CA 92075	
F Name and address of principal officer: SHARON STEIN 987 LOMAS SANTA FE DRIVE SOLANA BEACH CA 92075		E Telephone number 858-481-2155
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 2,490,636
J Website: WWW.NORTHCOASTREP.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		H(c) Group exemption number
L Year of formation: 1982		M State of legal domicile: CA

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO OPERATE A NOT-FOR-PROFIT PROFESSIONAL THEATRE FOR THE PROMOTION OF THE PUBLIC APPRECIATION AND EDUCATION REGARDING THEATRE ARTS.		
	2 Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	93
	6 Total number of volunteers (estimate if necessary)	6	0
	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 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	842,972	861,620
	9 Program service revenue (Part VIII, line 2g)	1,535,139	1,598,505
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	107	157
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	36,150	-42,012
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,414,368	2,418,270
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,113,021	1,183,279
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	163,498	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,042,983	1,102,794
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,156,004	2,286,073
19 Revenue less expenses. Subtract line 18 from line 12	258,364	132,197	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	700,110	861,570
	21 Total liabilities (Part X, line 26)	697,406	726,669
	22 Net assets or fund balances. Subtract line 21 from line 20	2,704	134,901

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 SHARON STEIN Type or print name and title	President	Date
	Print/type preparer's name Alicia M. Owens	Preparer's signature Alicia M. Owens	Date 01/31/17
Preparer Use Only	Firm's name A.M. Owens & Co., CPA, APC	Firm's EIN 45-4128534	Check <input type="checkbox"/> self-employed <input checked="" type="checkbox"/> PTIN P01212923
	Firm's address 9880 N Magnolia Ave # 188 Santee, CA 92071-1901	Phone no. 619-698-2401	

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

Part III Statement of Program Service Accomplishments

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

X

1 Briefly describe the organization's mission:

TO OPERATE A NOT-FOR-PROFIT PROFESSIONAL THEATRE FOR THE PROMOTION OF THE PUBLIC APPRECIATION AND EDUCATION REGARDING THEATRE ARTS.

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 X

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 X

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 \$ 1,978,257 including grants of \$) (Revenue \$ 1,598,505)

THE ORGANIZATION OPERATES A NOT-FOR-PROFIT PROFESSIONAL THEATRE FOR PROMOTION OF THE PUBLIC APPRECIATION OF EDUCATION REGARDING THEATRE ARTS. THEY PRODUCED 8 MAINSTAGE SHOWS AND MAIN OTHER COLLABORATIVE EVENTS. THE ORGANIZATION ALSO TEAMS WITH COMMUNITIES THROUGHOUT SAN DIEGO COUNTY TO PROVIDE ARTS AND EDUCATION PROGRAMS TO CHILDREN AND TEENS OF ALL BACKGROUNDS AND SOCIOECONOMIC LEVELS. IN-SCHOOL RESIDENCY PROGRAMS PROVIDE STUDENTS WITH EXPOSURE TO THE DRAMATIC ARTS AND WORKSHOPS INCORPORATE AFFORDABLE PROFESSIONAL INSTRUCTION AND ARE OFFERED DURING AND/OR AFTER SCHOOL. DURING FISCAL 2014, APPROXIMATELY 3,500 STUDENTS IMPROVED THEIR COMMUNICATION AND SELF-CONFIDENCE AS WELL AS THEIR TECHNICAL ACTING ABILITY AND SKILLS BY ATTENDING FALL, WINTER AND SPRING CLASS SESSIONS AND DAY CAMP

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

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

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,978,257

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 temporarily restricted endowments, permanent endowments, or 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		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 A 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		
1a	39		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
1c			
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	93		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see Instructions)	X	
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 in Schedule O		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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?		
5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VII 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 in 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 in Schedule O.		
1a	20		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	20		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)
- 19 Describe in 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: **▶**

**WILLIAM KERLIN
SOLANA BEACH**

987-D LOMAS SANTA FE DRIVE

CA 92075

858-481-1055

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.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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			
(1) DAVID ELLENSTEIN Artistic Director	40.00 0.00	X					102,000	0	0
(2) WILLIAM KERLIN Managing Director	40.00 0.00	X					81,000	0	0
(3) JAY SARNO Vice President	2.00 0.00	X		X			0	0	0
(4) HANNAH STEP Vice President	2.00 0.00	X		X			0	0	0
(5) IRA EPSTEIN Trustee	2.00 0.00	X					0	0	0
(6) PETER HOUSE Trustee	2.00 0.00	X					0	0	0
(7) SHARON STEIN President	2.00 0.00	X		X			0	0	0
(8) MARILYN TEDESCO Vice President	2.00 0.00	X		X			0	0	0
(9) HOLLY SMITH JONES Treasurer	2.00 0.00	X		X			0	0	0
(10) PATRICIA MOISES Secretary	2.00 0.00	X		X			0	0	0
(11) JOHN WEIL Trustee	2.00 0.00	X					0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(12) STEVE CHAPMAN	2.00									
Trustee	0.00	X						0	0	
(13) CYNTHIA DAVIS	2.00									
Trustee	0.00	X						0	0	
(14) MARION DODSON	2.00									
Trustee	0.00	X						0	0	
(15) DICK FRENCH	2.00									
Trustee	0.00	X						0	0	
(16) DIANE GOTKIN	2.00									
Trustee	0.00	X						0	0	
(17) RICH LEIB	2.00									
Trustee	0.00	X						0	0	
(18) JERE OREN	2.00									
Trustee	0.00	X						0	0	
(19) SUSAN ROTH	2.00									
Trustee	0.00	X						0	0	
1b Sub-total								183,000		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								183,000		

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

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

Section B. Independent Contractors

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

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

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				
	1b	Membership dues				
	1c	Fundraising events	118,113			
	1d	Related organizations				
	1e	Government grants (contributions)				
	1f	All other contributions, gifts, grants, and similar amounts not included above	743,507			
	g	Noncash contributions included in lines 1a-1f: \$				
	h	Total. Add lines 1a-1f.	861,620			
Program Service Revenue	2a	ADMISSIONS	1,363,350	1,363,350		
	b	THEATRE SCHOOL	153,153	153,153		
	c	CONCESSIONS AND OTHER SUPPORT	82,002	82,002		
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f.	1,598,505			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	157	157		
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	(i) Real				
		(ii) Personal				
	b	Less: rental exps.				
	c	Rental inc. or (loss)				
	d	Net rental income or (loss)				
	7a	(i) Securities				
		(ii) Other				
	b	Less: cost or other basis & sales exps.				
	c	Gain or (loss)				
	d	Net gain or (loss)				
	8a	Gross income from fundraising events (not including \$ 118,113 of contributions reported on line 1c). See Part IV, line 18	30,354			
	b	Less: direct expenses	72,366			
c	Net income or (loss) from fundraising events	-42,012				
9a	Gross income from gaming activities. See Part IV, line 19					
b	Less: direct expenses					
c	Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances					
b	Less: cost of goods sold					
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See instructions.	2,418,270	1,598,662	0	0	

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	183,000	129,540	26,730	26,730
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	739,776	622,261	35,248	82,267
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	161,257	144,956	5,909	10,392
10 Payroll taxes	99,246	80,857	6,666	11,723
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	16,981		11,182	5,799
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	168,565	164,533		4,032
13 Office expenses	100,603	65,788	24,744	10,071
14 Information technology	13,625	9,536	2,726	1,363
15 Royalties	81,818	81,818		
16 Occupancy	187,167	167,898	11,858	7,411
17 Travel	114,682	104,965	9,717	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	129		129	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,741	8,846	1,097	798
23 Insurance	14,405	11,523	1,441	1,441
24 Other expenses. (Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MAINSTAGE	217,353	217,353		
b OUTSIDE CONTRACTORS	54,157	54,157		
c CREDIT CARD PROCESSING	46,262	45,615	647	
d UTILITIES	25,522	22,204	2,042	1,276
e All other expenses	50,784	46,407	4,182	195
25 Total functional expenses. Add lines 1 through 24e	2,286,073	1,978,257	144,318	163,498
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 I Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	182,888	1	350,607
	2 Savings and temporary cash investments	199,533	2	198,974
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	62,307	4	14,769
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	137,140	9	187,488
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 457,698		
	b Less: accumulated depreciation	10b 354,722	10c 113,717	102,976
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,525	15	6,756
16 Total assets. Add lines 1 through 15 (must equal line 34)	700,110	16	861,570	
Liabilities	17 Accounts payable and accrued expenses	101,899	17	56,688
	18 Grants payable		18	
	19 Deferred revenue	595,507	19	669,981
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	697,406	26	726,669
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-46,650	27	86,334
	28 Temporarily restricted net assets	49,354	28	48,567
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	2,704	33	134,901	
34 Total liabilities and net assets/fund balances	700,110	34	861,570	

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. North Coast Repertory Theatre, a Nonprofit Corporation	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) 987 Lomas Santa Fe Drive, Suite D	Requester's name and address (optional)
6 City, state, and ZIP code Solana Beach, CA 92075	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
[] [] [] - [] [] - [] [] [] []	
OR	
Employer identification number	
9 5 - 3 8 1 9 3 0 7	

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 10-21-17
------------------	----------------------------	------------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

STATE OF CALIFORNIA

FRANCHISE TAX BOARD
SACRAMENTO, CALIFORNIA 95867

October 12, 1984

In reply refer to
342:APP:PTS:rjs:g

North Coast Repertory Theatre,
A Nonprofit Corporation
P. O. Box 389
Solana Beach, CA 92075

Purpose : Educational
Form of Organization : Corporation
Accounting Period Ending: April 30
Organization Number : 1070451

On the basis of the information submitted and provided your present operations continue unchanged or conform to those proposed in your application, you are exempt from state franchise or income tax under Section 23701d, Revenue and Taxation Code. Any change in operation, character or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address also must be reported.

You are required to file Form 199 (Exempt Organization Annual Information Return) or Form 199B (Exempt Organization Annual Information Statement) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. See annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax under Section 23731 of the Code. In this event, you are required to file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 5th month (4 1/2 months) after the close of your annual accounting period.

If the organization is incorporating, this approval will expire unless incorporation is completed with the Secretary of State within 60 days.

Exemption from federal income or other taxes and other state taxes requires separate applications.

October 12, 1984
North Coast Repertory Theatre,
A Nonprofit Corporation
Organization Number 1070451
Page 2

This exemption is granted on the express condition that the organization will secure federal exempt status with the Internal Revenue Service. The organization is required to furnish a copy of the final determination letter to the Franchise Tax Board within 9 months from the date of this letter.

This exemption effective as of April 9, 1982.

D. Hareid, Supervisor
Exempt Audit Unit
Telephone (800) 852-5711

cc: James T. Blakistone
Registrar of Charitable Trusts

Enc. .

City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION

All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.

Please Print Clearly or Type

All requests will be determined by the following criteria:

Name of Organization: North County Immigration and Citizenship Center (NCICC)

Mailing Address: 120 Stevens Avenue

City Solana Beach State: CA Zip: 92075

Contact Person: Linda Martinez Haley

Daytime Phone: 858 509-2589

Evening Phone: 650 703-8440

Email address: linda@northcountycitizenship.org

1. W-9 must be attached

Summary of organization's budget must be attached

Proposed program budget must be attached

Financial Statements (see Application Guidelines) must be attached

2. A copy of the certificate of California Nonprofit Corporation must be attached

Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 3567665

3. Has your organization received financial assistance from the City before?

Yes

If yes, what activities and which fiscal year? 2016-2017; Creation of the Pathways to Citizenship Program at the Solana Beach Public Library

4. Amount requested for FY 2017-18 \$5,000

5. Proposed Total Program Costs: \$9,000 (coordination costs, supplies, insurance, affiliations, textbooks, hospitality, etcetera for 11 months of tutoring. (Includes all estimated costs to conduct proposed activity/program.)

6. Title of Proposed Program/Service: Pathways to Citizenship Scholarship Program

7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used: (Attach extra sheet, if necessary.)

In its first year, the Pathways to Citizenship Program (funded by last year's grant) made twenty new citizens in Solana Beach! 100% of the students passed their naturalization examination and interview. One problem we encountered was that

low-income residents do not apply for citizenship due to lack of funds. They often wait until they can "save up" to pay the fees. This delays their process of becoming a citizen, which has a negative impact on their family and our community.

For the 2018 grant, NCICC seeks to provide eligible Solana Beach residents who participate in the Pathways to Citizenship Program with a \$200 scholarship that will cover their legal costs for the immigration paperwork prepared by authorized Department of Justice accredited representatives/practitioners at NCICC. \$150 will pay for the processing of the paperwork, and \$50 will pay for the year-round instruction and materials they will get in preparation for their English and civics examinations and their interviews.

8. Estimated number of S.B. residents to be served by proposed program:
25-40 permanent residents and 10-15 volunteer tutors

9. Program Dates/Location:

Wednesdays, 5:30-7pm at the Solana Beach Public Library (all year, except certain holidays)

10. Anticipated Program Objectives or Accomplishments:

a. 100% of our students will pass their English and civics tests and their oral interview with the United States Customs and Immigration Services (USCIS) as a result of their preparation in the Pathways to Citizenship Program.

b. At least 25 Solana Beach residents will become citizens of the United States in 2018.

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

The City of Solana Beach will be recognized on the NCICC Web site and promotional materials that advertise the services and at the donor events and fundraisers as well. In the press we receive in local papers, we will also name the City of Solana Beach as the sponsor of Pathways to Citizenship.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

The Daughters of the American Revolution have agreed to help provide additional teaching supplies needed for the citizenship examination (\$100). The awarding of this grant will allow us to see if this new idea of providing scholarships for low-income Solana Beach naturalization applicants will increase the number of new citizens in Solana Beach. If this succeeds, we can apply for permanent funding elsewhere.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Ten volunteer tutors/teachers work with approximately twenty students each week, so the instruction is free, yet high quality since the ratio of student to teacher is in the students' advantage. This reduces teaching costs. The only costs are the materials (flashcards, study guides, color copies, examination materials and folders)

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

If partial funding is received, we will offer fewer scholarships to low-income Solana Beach residents who want to become citizens of the United States.

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

Jm Auley 10/31/17
Authorized Signature of Organization Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS

**North County Immigration and Citizenship Center (NCICC)
Pathway to Citizenship Scholarship Program
Grant Budget Proposal
FY 2017-2018 Grant Application**

NCICC Mission: to help immigrants navigate the legal and cultural pathways to citizenship.

Project Goal: Provide eligible Solana Beach residents who participate in the Pathways to Citizenship Program with a \$200 scholarship that will cover their legal costs for the immigration paperwork prepared by authorized Department of Justice accredited representatives/practitioners at NCICC as well as their interview/exam preparation and materials.

Activity	Notes	Amount
Citizenship Application Scholarship	Pays for the \$150 fee to complete the N-400, Application for Naturalization, including a waiver for fees	150/student
Student Scholarship	Year-round instruction, tutoring, and materials in preparation for their English and civics examinations and their interviews with USCIS.	50/student
	TOTAL: 25 student scholarships x \$200/student=	\$5,000

Revised 10/30/17

NORTH COUNTY IMMIGRATION CITIZENSHIP CENTER (NCICC) BUSINESS PLAN AND CASH FLOW MANAGEMENT TOOL

	2017												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
INCOME													
SBPC Office Provision	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	6,000.00
SBPC Phone / Internet Provision	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	1,200.00
SBPC Subtotal Provisions	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	7,200.00
Grant Funds Available													
Presbytery of San Diego			16,000.00										16,000.00
Kingdom Builder Grants						850.00							3,850.00
Outside Grants & Gifts			4,900.00										4,900.00
Donations & Fundraising													
Congregation Donations			4,606.50										5,106.50
Individual Donations													5,100.00
Fundraising				0.17	7,514.01	8,693.40	100.00						17,307.58
Class Donation (Citizenship, ESL & AB60)		40.00											120.00
Board of Directors Voluntary Donations			200.00		300.00				200.00				1,000.00
Cost of Fundraising							(2,600.00)						(2,600.00)
Operating Income													
Consultation Income @													0.00
BIA Legal Income @		1,140.00	300.00			350.00			150.00				5,045.00
Business to Business ESL Income					1,500.00				1,500.00				1,500.00
Other Income, Reimbursements					353.76								353.76
TOTAL INCOME	0.00	1,180.00	26,006.50	0.17	10,017.77	9,693.40	(2,070.00)	0.00	7,075.00	500.00	2,380.00	3,900.00	58,682.84
EXPENSES													
Start-up & Nonrecurring Costs													0.00
Operating Costs													
Office Staffing & NCICC Personnel	2,285.34	3,202.87	4,825.16	2,726.88	2,981.05	3,217.56	2,540.41	2,767.37	2,905.13	3,200.00	3,200.00	2,500.00	36,351.77
Withholding, FICA & Workman	776.91	1,080.25	1,566.62	991.83	978.60	1,030.21	785.11	885.16	833.13	1,056.00	1,056.00	825.00	11,864.82
Heartland Fees	82.00	82.00	123.00	41.00	41.00	82.00	82.00	82.00	82.00	82.00	82.00	82.00	943.00
Citizenship Scholarship Reimbursements													0.00
Insurance - Liability, E&O, etc	313.86	740.00	1,500.00						2,164.00				4,679.00
Legal Services Membership & training,													2,553.86
Immigration Legal Assistance													0.00
Accounting & Tax Reporting (ADP)													0.00
Office Supplies, Print, Postage & Shipping	72.18	25.44	78.35	8.13	17.31	492.19	111.50	814.02	276.85	50.00	20.00	20.00	1,453.78
Continuing Education													0.00
Website & Marketing	147.35	203.66	20.00	360.00	692.75	492.19	70.03	20.00	20.00	20.00	20.00	20.00	1,725.98
ESL/Civics Teachers	150.00		730.00				650.00						1,990.00
Server / Data Storage													0.00
Travel Expense													0.00
Bank Charges													0.00
Hospitality			63.76	0.17	6.01	6.00							75.94
California Tax Board				20.00									0.00
Employment Development Dept.													20.00
													0.00
TOTAL EXPENSES	3,827.64	5,334.22	8,906.89	4,148.01	4,716.72	4,827.96	4,239.05	4,568.55	6,281.11	4,408.00	6,873.00	3,427.00	61,558.15
GAIN OR (LOSS) ON OPERATIONS	(3,827.64)	(4,154.22)	17,099.61	(4,147.84)	5,301.05	4,865.44	(6,309.05)	(4,568.55)	793.89	(3,908.00)	(4,493.00)	473.00	(2,875.31)
CUMULATIVE FUNDS AVAILABLE	16,449.36	12,621.72	8,467.50	25,567.11	21,419.27	26,720.32	31,585.76	25,276.71	20,708.16	21,502.05	17,594.05	13,101.05	13,574.05
Bank Statement Ending Balance	12,621.72	8,467.50	25,567.11	21,419.27	26,720.32	31,585.76	25,276.71	20,708.16	21,502.05	17,594.05	13,101.05	13,574.05	
Difference	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
													Actual revenues & expenses in blue

NORTH COUNTY IMMIGRATION CITIZENSHIP CENTER (NCICC) BUSINESS PLAN AND CASH FLOW MANAGEMENT TOOL

	2018	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
INCOME														
SBPC Office Provision		500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	6,000.00
SBPC Phone / Internet Provision	Non-cash	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	1,200.00
SBPC Subtotal Provisions	Non-cash	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	600.00	7,200.00
Grant Funds Available														
Presbytery of San Diego						10,000.00								10,000.00
Kingdom Builder Grants														0.00
Outside Grants & Gifts														0.00
Donations														
Congregation Donations							500.00							500.00
Individual Donations														0.00
Fundraising														0.00
Class Donation (Citizenship, ESL & AB60)														0.00
Board of Directors Voluntary Donations														0.00
Cost of Fundraising														0.00
Operating Income														
Consultation Income @														0.00
81A Legal Income @														0.00
Business to Business ESL Income														0.00
Other Income, Reimbursements														0.00
TOTAL INCOME		0.00	0.00	0.00	0.00	10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	0.00	10,500.00
EXPENSES														
Start-up & Nonrecurring Costs														0.00
Operating Costs														0.00
Office Staffing & NCICC Personnel														0.00
Withholding, FICA & Workman														42%
Hearland Fees														0.00
Citizenship Scholarship Reimbursements														0.00
Insurance - Liability, E&O, etc														0.00
Legal Services Membership & Training														0.00
Immigration Legal Assistance														0.00
Accounting & Tax Reporting (ADP)														0.00
Office Supplies														0.00
Continuing Education														0.00
Website & Marketing														0.00
ESL/Civics Teachers														0.00
Server / Data Storage														0.00
Travel Expense														0.00
Bank Charges														0.00
Hospitality														0.00
California Tax Board														0.00
Employment Development Dept.														0.00
TOTAL EXPENSES		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GAIN OR (LOSS) ON OPERATIONS														
		0.00	0.00	0.00	0.00	10,000.00	500.00	0.00	0.00	0.00	0.00	0.00	0.00	10,500.00
CUMULATIVE FUNDS AVAILABLE														
Bank Statement Ending Balance	12/31/17	13,574.05	13,574.05	13,574.05	13,574.05	23,574.05	24,074.05	24,074.05	24,074.05	24,074.05	24,074.05	24,074.05	24,074.05	24,074.05
Difference		13,574.05												
			Actual revenues & expenses in blue											

Articles of Incorporation of a Nonprofit Public Benefit Corporation

3567665

FILED IN THE OFFICE OF THE SECRETARY OF STATE OF THE STATE OF CALIFORNIA

APR 29 2013

100

This Space For Office Use Only

To form a nonprofit public benefit corporation in California, you can fill out this form or prepare your own document, and submit for filing along with

- A \$30 filing fee.
- A separate non-refundable \$15 service fee also must be included, if you drop off the completed form or document.

Important! Nonprofit corporations in California are not automatically exempt from paying California franchise tax or income tax each year. For information about tax requirements and/or applying for tax-exempt status in California go to https://www.ftb.ca.gov/businesses/exempt_organizations or call the California Franchise Tax Board at (916) 845-4171.

Note Before submitting this form, you should consult with a private attorney for advice about your specific business needs.

For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm

Corporate Name (List the proposed corporate name. Go to www.sos.ca.gov/business/bename-availability.htm for general corporate name requirements and restrictions.)

1 The name of the corporation is North County Immigration and Citizenship Center

Corporate Purpose (Item 2a Check one or both boxes. Item 2b The specific purpose of the corporation must be listed if you are organizing for "public" purposes, or if you intend to apply for tax-exempt status in California.)

- a This corporation is a nonprofit Public Benefit Corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for public charitable purposes.
b The specific purpose of this corporation is to educate and charitably assist immigrants on citizenship.

Service of Process (List a California resident or an active 1505 corporation in California that agrees to be your initial agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may not list your own corporation as the agent. Do not list an address if the agent is a 1505 corporation.)

3 a Steve Carlton
Agent's Name
b 1318 Walnutview Dr. Encinitas CA 92024
Agent's Street Address (if agent is not a corporation) City (no abbreviations) State Zip

Corporate Addresses

4 a 120 Stevens Avenue Solana Beach, CA 92075
Initial Street Address of Corporation City (no abbreviations) State Zip
b Initial Mailing Address of Corporation, if different from 4a City (no abbreviations) State Zip

Additional Statements (The following statements are for tax-exempt status in California.)

- a This corporation is organized and operated exclusively for the purposes set forth in Article 2a hereof within the meaning of Internal Revenue Code Section 501(c)(29).
b No substantial part of the activities of this corporation shall consist of carrying on propaganda or otherwise attempting to influence legislation, and this corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.
c The property of this corporation is irrevocably dedicated to the purposes in Article 2a hereof and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.
d Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational and/or religious purposes and which has established its tax-exempt status under Internal Revenue Code section 501(c)(3).

This form must be signed by each incorporator. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are made part of these articles of incorporation.

[Signature]
Incorporator - Sign here

Doug Stinson
Print your name here

Make check/money order payable to Secretary of State. Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

By Mail
Secretary of State
Business Entities P O Box 944260
Sacramento, CA 95834-2600

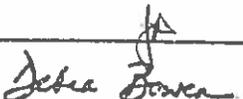
Drop-Off
Secretary of State
1500 11th Street, 3rd Floor
Sacramento, CA 95814



I hereby certify that the foregoing
transcript of _____ page(s)
is a full, true and correct copy of the
original record in the custody of the
California Secretary of State's office.

MAY 22 2013

Date: _____


DEBRA BOWEN, Secretary of State

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Yes No
46 [] [x]

Part VI Section 501(c)(3) organizations only

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

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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

Yes No
47 [] [x]

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48 [] [x]

49a Did the organization make any transfers to an exempt non-charitable related organization?

49a [] [x]

b If "Yes," was the related organization a section 527 organization?

49b [] [x]

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

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation

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

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

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation

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

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

Yes No

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

Sign Here: Signature of officer (Judith L. Enns), Date (4.11.17), Type or print name and title (Chair NCTCC Board of Directors)

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 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
- 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						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			35220	43501	44648	123369
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3			35220	43501	44648	123369
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						123369

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4			35220	43501	44648	123369
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			35220	43501	44648	123369
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)				12		
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 <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
4c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).		
5b	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?		
5c	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? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
9b	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? If "Yes," provide detail in Part VI .		
9c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
10b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

- 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? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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? 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.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** 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).

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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

	Yes	No
2a		
2b		
3a		
3b		

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

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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

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

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

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

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 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.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)

**(i)
Excess Distributions**

**(ii)
Underdistributions
Pre-2016**

**(iii)
Distributable
Amount for 2016**

1	Distributable amount for 2016 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2016:		
a			
b			
c	From 2013		
d	From 2014		
e	From 2015		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2016 distributable amount		
i	Carryover from 2011 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2016 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2016 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2017. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a			
b	Excess from 2013		
c	Excess from 2014		
d	Excess from 2015		
e	Excess from 2016		

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.)

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.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

North County Immigration and Citizenship Center

Employer identification number

46-2522640

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 North County Immigration and Citizenship Center	Employer identification number 46-2522640
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Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	San Diego Presbytery 3707 Udall Street San Diego, CA. 92107	\$ 24,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Solana Beach Presbyterian Church 120 Stevens Avenue Solana Beach, CA. 92075	\$ 6657	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

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 **North County Immigration and Citizenship Center** Employer identification number **46-2522640**

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.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

Note: Terms in **bold** are defined in the *Glossary of the Instructions for Form 990*.

Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt from Income Tax, Part VIII, *Statement of Revenue*, line 1;
- Form 990-EZ, Short Form Return of Organization Exempt from Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it doesn't meet the filing requirements of this schedule by taking the following action:

- Answering "No" on Form 990, Part IV, *Checklist of Required Schedules*, line 2, or
- Checking the box on
 - Form 990-EZ, line H, or
 - Form 990-PF, Part I, *Analysis of Revenue and Expenses*, line 2.

See the separate instructions for these lines on those forms.

If an organization isn't required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Accounting Method

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, *Financial Statements and Reporting*, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

Public Inspection

Note: Don't include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF.

- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.

- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors aren't required to be made available for public inspection. All other information, including the amount of contributions, the description of **noncash contributions**, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it shouldn't include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that don't require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the Instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

Contributors to be Listed on Part I

A *contributor* (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

Contributions

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions don't include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

General Rule

Unless the organization is covered by one of the *Special Rules* below, it must list in Part I every contributor who, during the year, gave the organization, directly or indirectly, money, **securities**, or any other type of property that total \$5,000 or more for the organization's **tax year**. In determining the total amount,

separate and independent gifts of less than \$1,000 can be disregarded.

Include each contribution included on Form 990, Part VIII, line 1, in calculating a contributor's total contributions and determining whether that contributor must be reported on Schedule B under this General Rule (or one of the following *Special Rules*, if applicable). For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the *Special Rules*, if applicable), even if the organization didn't receive the property during the tax year.

Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A), or Form 990-EZ, line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 33 $\frac{1}{3}$ % support test for the current year or prior year, or (2) check the box on Schedule A (Form 990 or 990-EZ), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A)(vi) organization in its first five years.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 wouldn't be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it didn't exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

However, if a section 501(c)(7), (8), or (10) organization didn't receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently wasn't required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

Specific Instructions



Don't attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution

includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an employee's cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization didn't receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that aren't reported on Form 8872, Political Organization Report of Contributions and Expenditures, don't need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the noncash contribution received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, marked quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property isn't immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the *bona fide* bid and

asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV can't be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any qualified conservation contributions and contributions of conservation easements listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.



**State of California
Secretary of State**

N

Statement of Information

(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions.
IMPORTANT ± READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

**FM15157
FILED**

In the office of the Secretary of State
of the State of California

APR-18 2017

1. CORPORATE NAME

NORTH COUNTY IMMIGRATION AND CITIZENSHIP CENTER

2. CALIFORNIA CORPORATE NUMBER

C3567665

This Space for Filing Use Only

Complete Principal Office Address (Do not abbreviate the name of the city. Item 3 cannot be a P.O. Box.)

3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY

CITY

STATE

ZIP CODE

120 STEVENS AVENUE, SOLANA BEACH, CA 92075

4. MAILING ADDRESS OF THE CORPORATION

CITY

STATE

ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

5. CHIEF EXECUTIVE OFFICER/

ADDRESS

CITY

STATE

ZIP CODE

JUDY ENNS 120 STEVENS AVENUE, SOLANA BEACH, CA 92075

6. SECRETARY

ADDRESS

CITY

STATE

ZIP CODE

MARIE GREY 120 STEVENS AVENUE, SOLANA BEACH, CA 92075

7. CHIEF FINANCIAL OFFICER/

ADDRESS

CITY

STATE

ZIP CODE

WILLIAM RICHARD CARSON 3301 CADENCIA ST., CARLSBAD, CA 92009

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 9 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 9 must be left blank.

8. NAME OF AGENT FOR SERVICE OF PROCESS

STEVE CARLTON

9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

1318 WALNUTVIEW DR., ENCINITAS, CA 92024

Common Interest Developments

10. Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act, (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act, (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). Please see instructions on the reverse side of this form.

11. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/18/2017

LINDA MARTINEZ-HALEY

EXECUTIVE DIRECTOR

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

*All Applications MUST BE RECEIVED by 5:00 p.m. Tuesday, October 31, 2017.
Please Print Clearly or Type*

All requests will be determined by the following criteria:

Name of Organization: REALITY CHANGERS
 Mailing Address: 3910 UNIVERSITY AVE, SUITE 300-RC
 City SAN DIEGO State CA Zip 92105
 Contact Person: CHRISTOPHER YANOV
 Daytime Phone: 619 516 2222
 Evening Phone: 619 516 2222
 Email address: CHRIS@REALITYCHANGERS.ORG

1. W-9 must be attached
 Summary of organization's budget must be attached
 Proposed program budget must be attached
 Financial Statements (see Application Guidelines) must be attached

2. A copy of the certificate of California Nonprofit Corporation must be attached
 Or, Calif. Non-profit 501 (c) 3 Corporation Certification Number: 26-3757305

3. Has your organization received financial assistance from the City before?
 Yes No
 If yes, what activities and which fiscal year? LOW-INCOME SOLANA BEACH STUDENTS PARTICIPATING IN COLLEGE-PREP PROGRAMS, 2014-17

4. Amount requested for FY 2017-18 \$ 5,000

5. Proposed Total Program Costs: \$ 55,000
 (Includes all estimated costs to conduct proposed activity/program.)

6. Title of Proposed Program/Service: SOLANA BEACH'S COLLEGE APPS ACADEMY

7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used:
SEE ATTACHED

(Attach extra sheet, if necessary.)

8. Estimated number of S.B. residents to be served by proposed program: 100

9. Program Dates/Location:

40 Monday evenings from 6pm-9pm at
120 Stevens Ave, Solana Beach CA 92075

10. Anticipated Program Objectives or Accomplishments:

SEE ATTACHED

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

SEE ATTACHED

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

SEE ATTACHED

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

SEE ATTACHED

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

SEE ATTACHED

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.



Oct 31, 2017

Authorized Signature of Organization

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how grant funds will be used: (Attach extra sheet, if necessary.)

Reality Changers believes that college changes everything, especially for low-income youth. Along with supporting Reality Changers' entire program in Solana Beach for 60 students and their families, this grant will specifically support 20% of Reality Changers' College Apps Academy program in Solana Beach. Approximately 25 low-income youth will be guided through a year-long course that will help them produce the best applications possible for college, financial aid, and scholarships.

10. Anticipated Program Objectives or Accomplishments

In 2016, 17 high school seniors at Reality Changers' Solana Beach location earned \$1,353,740 in college scholarships. The cost to serve each student was \$1,000 and they earned \$79,631 in scholarships apiece, an 79:1 ROI. We expect to replicate this success next year with your support.

11. How will the organization acknowledge the City's financial contribution to the community/ beneficiaries of the proposed activity?

Reality Changers will recognize the City's contribution in front of 5,000 attendees at our 18th Annual Scholarship Celebration in May 2018. We will include the City in all print materials for the event as well as any major pieces of promotion that list sponsors in the year 2018. The City will also be recognized on our website throughout the year.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources?

If the 2018 students produce the same return on investment as previous years, a \$5,000 investment in Reality Changers' College Apps Academy program in Solana Beach will produce \$410,000 in scholarships for the City's low-income youth. Additionally, for 12th graders who choose to attend UCSD, the Chancellor will give each student an additional \$40,000 each over four years.

13. Will volunteers be used for the proposed program or service and, if so, will they reduce expenses?

Yes, approximately 40 volunteers are used on a weekly basis to help build more first generation college students at Reality Changers' location in Solana Beach. Furthermore, the students' parents volunteer to cook food for 75-100 people every week throughout the school year to ensure that students and mentors are well-nourished and that families are included in the college-going process.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward?

Reality Changers is committed to serving low-income youth in Solana Beach. The faster that full funding can be secured, the faster we can solely focus on delivering high-quality programming to these students. The program will still move forward with partial funding, but we will continue to spend other resources on fundraising until all funding is secured.

**Request for Taxpayer
Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
REALITY CHANGERS

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
 Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
 Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
 (Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
3910 UNIVERSITY AVE, SUITE 300-RC

6 City, state, and ZIP code
SAN DIEGO CA 92105

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	
26	3757305

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *Christy* Date ▶ **MARCH 27, 2017**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
 Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1098-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(f)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(f)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. **Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.
2. **Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
3. **Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
4. **Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
5. **Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ¹
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ¹
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.
² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.
⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.
 *Note. Grantor also must provide a Form W-9 to trustee of trust.
 Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

- To reduce your risk:
- Protect your SSN,
 - Ensure your employer is protecting your SSN, and
 - Be careful when choosing a tax preparer.
- If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.
- If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, *Identity Theft Prevention and Victim Assistance*.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Realty Chargers
Profit & Loss Budget vs. Actual
July 2016 through June 2017

	JUL '16 - JUN '17		JUL '17 - JUN '18	
	Budget	Actual	Budget	Actual
Ordinary Income/Expense				
Income				
4000 Contributions				
4010 Individual/Family Foundations	700,000.00	873,470.79	750,000.00	
4020 Corporate contributions	125,000.00	204,178.18	250,000.00	
4030 Church contributions	60,000.00	47,122.21	80,000.00	
4040 Competitive Grants	1,415,000.00	1,434,981.00	1,500,000.00	
4050 Event Income (Contributions)	229,000.00	232,920.77	400,000.00	
4060 Stock Dividend		48,958.83		
4100 Gifts in kind				
4110 In-kind Laptop computers		1,189.00		
4120 In-kind scholarship @ fee income		34,028.00		
4130 UCSB Academic Coun. In-kind		11,400.00		
4140 Gifts in-kind - Other		43,530.00		
Total 4100 Gifts in-kind		80,177.00		
4900 Contributions - Other				
Total 4000 Contributions	1,929,000.00	2,971,512.84	2,960,000.00	
4980 Academy Revenue	20,000.00	7,817.00	260,000.00	
4990 Funds Released from Restriction		83,000.00		
5310 Int. savings/short term invest.		4.48		
Total Income	2,545,000.00	3,071,534.47	3,300,000.00	
Gross Profit	2,545,000.00	3,071,534.47	3,300,000.00	
Expense				
7000 Scholarships, Support & Awards				
7040 Awards to current RC students	41,000.00	15,843.84	23,000.00	
7041 Princeton Review		58,285.00	28,000.00	
7043 RC Student Support	10,000.00	9,881.11	10,000.00	
7044 Outside Scholarships	10,000.00	29,811.24	20,000.00	
7046 Scholarships UCSB - Academic Con	200,000.00	391,800.00	237,300.00	
7046 SAT, ACT Transcript & app fees	4,800.00	-5,281.50	1,500.00	
7047 Forest Home Scholarships	82,000.00	82,192.00	80,000.00	
7049 Laptop Computers for Students	6,000.00	800.00	2,000.00	
7060 Board Discretionary Scholarship	300,000.00	0.00		
7060 Scholarships, Support & Awards		801.57	100,000.00	
Total 7000 Scholarships, Support & Awards	623,800.00	587,330.15	681,700.00	
7200 Salaries and Benefits				
7227 Contractor payments	18,000.00	10,477.78	75,000.00	
7240 Health Insurance premiums	35,000.00	31,866.52	30,000.00	
7241 Life Insurance		311.83	3,000.00	
7248 Workers Comp Insurance		140.00		
7256 Payroll taxes	130,000.00	108,322.83	180,000.00	
7260 Salaries and Benefits - Other	1,328,450.00	1,242,787.84	1,703,888.93	
Total 7200 Salaries and Benefits	1,501,850.00	1,362,805.97	2,010,888.93	
7270 Payroll taxes and benefits		678.28	15,000.00	
7800 General Operating Expenses				
7820 Accounting fees				
8400 Payroll Expenses	4,000.00	8,987.53	12,000.00	
7830 Accounting fees - Other	30,000.00	45,170.00	40,000.00	
Total 7820 Accounting fees	34,000.00	54,157.53	52,000.00	
7821 Bank/merchant fees	3,000.00	2,461.38	2,500.00	
7823 Gifts & Recognition	8,000.00	13,788.41	8,000.00	
7826 Legal fees		8,900.00	90,000.00	
7840 Speaker fees	3,000.00	0.00		
8114 Food & beverage	24,000.00	10,339.21	18,000.00	
8116 Office supplies	8,000.00	4,448.79	8,000.00	
8117 Program supplies	20,000.00	26,781.56	20,000.00	
8130 Telephone & telecommunications	1,858.00	1,898.00	9,000.00	
8140 Shipping/delivery/postage	6,000.00	4,237.88	8,000.00	
8170 Printing & copying	7,800.00	9,067.49	12,000.00	
8180 Bank, subscriptions, reference	3,000.00	717.38	2,000.00	
8210 Rent	78,000.00	80,398.78	203,000.00	
8262 Computer software & hardware	25,900.00	48,875.68	45,000.00	
8270 Deprec. PPE		3,478.00	3,000.00	
8310 Mileage & Off-site parking	22,000.00	20,856.88	22,500.00	
8310 Transportation Program related	8,000.00	9,906.24	8,000.00	
8317 Field Trips	7,000.00	3,314.38	4,000.00	
8320 Travel, conferences, meetings	14,000.00	9,861.80	12,000.00	
8346 Background Checks	1,500.00	919.98	900.00	
8320 Insurance, Liability/C&D	34,000.00	24,679.41	35,000.00	
8330 Membership dues & meals	4,000.00	4,184.25	12,000.00	
8340 Staff development	8,000.00	8,119.37	8,000.00	
8380 Media & Outside computer serv	8,800.00	841.00	2,000.00	
8485 Payroll Fees	2,000.00	0.00		
8570 Advertising & Promo expense	4,500.00	37,898.05	8,000.00	
8575 Events				
8576 Advertising	2,000.00	1,413.96	3,500.00	
8577 Equipment Rental	2,700.00	4,854.72	19,000.00	
8578 Food & Beverage	24,000.00	12,417.07	25,000.00	
8579 Photography & AV	2,500.00	3,088.58	5,000.00	
8580 Printing & Copying	5,000.00	3,136.80	8,000.00	
8581 Security	1,000.00	739.08	10,000.00	
8582 Shipping/delivery/postage	1,000.00	17.70	4,000.00	
8583 Supplies	8,800.00	8,786.54	20,000.00	
8584 Venue Rental	800.00	2,861.00	15,000.00	
8585 Entertainment and Speakers	2,800.00	-4,117.00	23,000.00	
8576 Events - Other		250.00	8,000.00	
Total 8575 Events	49,700.00	38,381.38	133,000.00	
8590 Other operating expenses	3,998.98	0.00		
8595 Taxes & Government Filing Fees	33.00	145.00	145.00	
Total 7800 General Operating Expenses	387,491.00	428,896.14	873,145.08	
8600 Investment Loss		2,753.81		
Total Expense	2,458,341.04	2,180,784.78	3,180,331.98	
Net Ordinary Income	82,438.98	820,749.88	118,468.01	
Net Income	82,438.98	820,749.88	118,468.01	

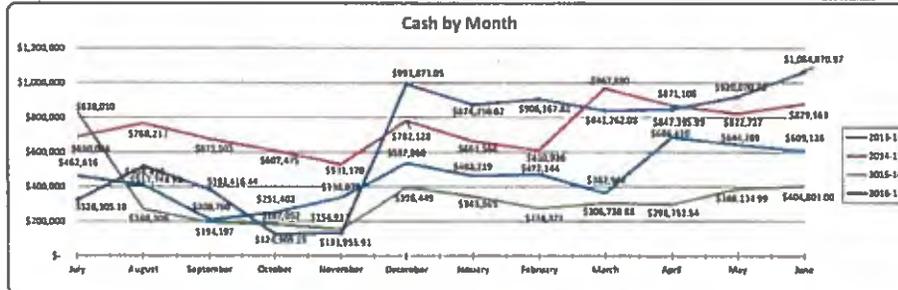
2017-18 Budget for Reality Changers' Program in Solana Beach

\$25,000	25 students attending College Apps Academy @ \$1,000 each
\$20,000	Program Staff
\$5,000	Leadership Camp
\$2,250	Food/Activities/Supplies
\$1,500	Rent
\$1,250	25 College Sweatshirts @ \$50 each
<hr/>	
\$55,000	Total

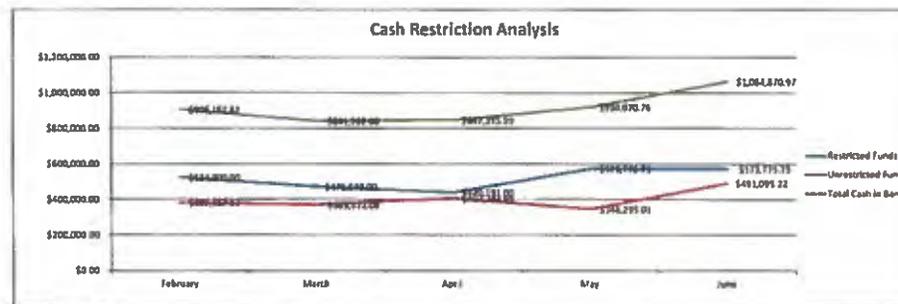
REALITY CHANGERS
June 2017 Executive Summary

INCOME SUMMARY								
Revenue Source	June Revenue	YTD June Budget	YTD Revenue	YTD Budget	Variance	Annual Budget	Am't. Remaining	% Received
Individual / Family Foundations	73,728	50,000	822,428	700,000	222,428	700,000	(222,428)	132%
Corporate	25,000		204,178	125,000	79,178	125,000	(79,178)	163%
Church	171	3,000	47,122	60,000	(12,878)	60,000	12,878	79%
Competitive Grants	125,384	242,500	1,434,741	1,415,000	19,741	1,415,000	(19,741)	101%
Events	111,845		232,921	225,000	7,921	225,000	(7,921)	104%
Gifts in Kind	13,200		90,177		90,177		(90,177)	
Academy Revenue	3,547	1,000	7,917	20,000	(12,083)	20,000	12,983	35%
Funds released from restriction			63,000		63,000			
*Grants recognized as revenue								
Sub total - cash ba	352,875	298,500	3,001,584	2,545,000	456,584	2,545,000	(393,580)	118%
Interest			4		4			
*Total	352,875	298,500	3,001,584	2,545,000	456,584	2,545,000	(393,580)	118%

	June Expenses	June Budget	Actual YTD Expenses	YTD Budget	Variance	Annual Budget	Remaining Amount	% Spent
Scholarships, support & awards	4,982	228,250	357,350	525,600	(168,250)	525,600	168,250	68%
Health Insurance	2,012	2,917	31,899	35,000	(3,101)	35,000	3,101	91%
Payroll, Taxes and Benefits	105,831	126,823	1,351,081	1,458,450	(107,369)	1,458,450	107,369	93%
Rent	7,055	0,000	80,309	78,000	2,309	78,000	(2,309)	106%
Events	2,851		38,391	49,700	(11,309)	49,700	11,309	77%
General Operating Expenses	30,287	20,731	321,681	318,791	2,890	318,791	(2,890)	102%
Investment Loss								
Total	158,828	387,821	2,180,711	2,459,541	(278,830)	2,459,541	278,830	89%
Net Income	194,047	(86,021)	820,873	85,459	735,414	85,459		



	07/31/16 Actual	08/31/16 Actual	09/30/16 Actual	10/31/16 Actual	11/30/16 Actual	12/31/16 Actual	1/31/2017 Actual	2/28/2017 Actual	3/31/2017 Actual	4/30/2017 Actual	5/31/2017 Actual	6/30/2017 Actual	Annual Total
Monthly Revenue	\$73,182	\$332,232	\$93,368	\$48,879	\$111,270	\$793,562	\$48,373	\$165,647	\$422,644	\$109,485	\$450,080	\$352,875	\$ 3,001,584
Monthly Expenses	\$97,498	\$229,028	\$182,946	\$322,327	\$132,288	\$169,852	\$198,107	\$158,111	\$170,158	\$146,478	\$217,095	\$158,828	\$ 2,180,710
Total Cash Assets	\$326,305	\$517,749	\$383,418	\$124,809	\$133,958	\$993,873	\$874,357	\$906,106	\$841,262	\$847,306	\$920,071	\$1,064,871	



Restricted Grants

Grantor	February	March	April	June
Thrive	\$225,000.00	\$0.00	\$0.00	\$0.00
The California Wellness Foundation	\$249,000.00	\$248,640.00	\$247,920.00	\$247,800.00
The Parker Foundation	\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00
AT & T	\$173,000.00		\$134,771.00	\$33,875.75
Country Friends			\$7,500.00	\$7,500.00
Satterberg Foundation				\$260,000.00
The Catarpillar Foundation				\$15,000.00
McCarthy Family Foundation				\$20,000.00
Total	\$524,000.00	\$471,640.00	\$440,191.00	\$573,775.75

EXTENDED TO NOVEMBER 15, 2016

Form **990**

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

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization REALITY CHANGERS		D Employer identification number 26-3757305
	Doing business as		E Telephone number 619-516-2222
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3910 UNIVERSITY AVE SUITE 300-RC	G Gross receipts \$ 2,291,983.	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code SAN DIEGO, CA 92105	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	H(c) Group exemption number ▶
F Name and address of principal officer: CHRISTOPHER YANOV SAME AS C ABOVE		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ REALITYCHANGERS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2009 M State of legal domicile: CA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE BELIEVE THAT COLLEGE CHANGES EVERYTHING. WE HELP 8TH GRADERS WITH GPAS BELOW 2.0 BECOME		
	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	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	38
	6 Total number of volunteers (estimate if necessary)	6	600
	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 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,779,033.	Current Year 2,096,313.
	9 Program service revenue (Part VIII, line 2g)	55,587.	22,880.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4.	3.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	114,128.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,834,624.	2,233,324.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	547,456.	745,774.
	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)	911,046.	1,275,444.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 307,008.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	260,617.	304,412.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,719,119.	2,325,630.
19 Revenue less expenses. Subtract line 18 from line 12	115,505.	-92,306.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 809,143.	End of Year 712,262.
	21 Total liabilities (Part X, line 26)	150,833.	146,258.
	22 Net assets or fund balances. Subtract line 21 from line 20	658,310.	566,004.

Part III 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			
	CHRISTOPHER YANOV, PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name RICHARD HOTZ	Preparer's signature	Date 09/20/16	Check <input type="checkbox"/> self-employed	PTIN P00452784
	Firm's name ▶ CONSIDINE & CONSIDINE	Firm's EIN ▶ 95-2694444			
	Firm's address ▶ 1501 FIFTH AVENUE, SUITE 400 SAN DIEGO, CA 92101-3297	Phone no. 619.231.1977			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF REALITY CHANGERS IS TO TRANSFORM LIVES, SCHOOLS, AND COMMUNITIES BY PROVIDING YOUTH FROM DISADVANTAGED BACKGROUNDS WITH THE ACADEMIC SUPPORT, FINANCIAL ASSISTANCE, AND LEADERSHIP TRAINING TO BECOME FIRST GENERATION COLLEGE STUDENTS. + TO ADVANCE THIS MISSION,

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

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 [X] 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 \$ 1,427,655. including grants of \$ 745,774.) (Revenue \$ 22,880.)

COLLEGE ASSISTANCE. REALITY CHANGERS PROVIDES ITS 12TH GRADERS WHO PLAN TO ATTEND A FOUR-YEAR UNIVERSITY WITH A NEW LAPTOP COMPUTER, SAT FEES AND PRINCETON REVIEW. WE ALSO PROVIDE PROGRAM GRADUATES WITH EDUCATIONAL SCHOLARSHIPS IN CASES WHERE FINANCIAL HARDSHIP WOULD PRECLUDE STUDENTS FROM CONTINUING HIS OR HER EDUCATION.

4b (Code:) (Expenses \$ 227,224. including grants of \$) (Revenue \$)

UCSD ACADEMIC CONNECTIONS. REALITY CHANGERS STUDENTS WHO ACHIEVE A 3.5 GPA QUALIFY TO ATTEND ACADEMIC CONNECTIONS, AN INTENSIVE, 3 WEEK RESIDENTIAL PROGRAM OFFERED EACH JULY BY UC SAN DIEGO. AT ACADEMIC CONNECTIONS, STUDENTS TAKE REAL COLLEGE CLASSES AND EARN REAL COLLEGE CREDIT BEFORE EVEN BECOMING SOPHOMORES IN HIGH SCHOOL, THUS CONVINCING THEM THAT THEY CAN ACHIEVE SUCCESS AT HIGH ACADEMIC LEVEL.

4c (Code:) (Expenses \$ 50,888. including grants of \$) (Revenue \$)

SUMMER LEADERSHIP CAMP. THIS WEEK LONG SUMMER CAMP ALLOWS STUDENTS TO MAKE TRANSFORMATIONAL DECISIONS THAT WILL IMPACT THEIR DAILY LIVES BOTH INSIDE AND OUTSIDE OF THE CLASSROOM.

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,705,767.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Form 990 (2015)

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

Input box for Schedule O

Table with columns for question number, description, and Yes/No boxes. Includes questions 1a through 14b regarding IRS filings and tax compliance.

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 in 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

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	12													
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 in Schedule O.														
b Enter the number of voting members included in line 1a, above, who are independent		12												
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, or trustees, or key employees to a management company or other person?				X										
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					X									
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						X								
6 Did the organization have members or stockholders?							X							
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								X						
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									X					
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?						X								
b Each committee with authority to act on behalf of the governing body?						X								
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O												X		

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

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	X														
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?															
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			X												
b Describe 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										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						X									
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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?															
a The organization's CEO, Executive Director, or top management official										X					
b Other officers or key employees of the organization											X				
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?													X		
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?															

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)
- 19 Describe in 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: **RICHARD EVANS - 619-516-2222**
3910 UNIVERSITY AVE SUITE 300-RC, SAN DIEGO, CA 92105

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHRISTOPHER YANOV FOUNDER/PRESIDENT	50.00	X		X				126,626.	0.	0.
(2) RICHARD EVANS TREASURER	5.00	X						0.	0.	0.
(3) ROBERT FREUND CHAIRMAN	5.00	X						0.	0.	0.
(4) JUANCHO EEKHOUT VICE CHAIRMAN	5.00	X						0.	0.	0.
(5) MADDY KILKENNY SECRETARY	5.00	X						0.	0.	0.
(6) MALCOLM BUND DIRECTOR	2.00	X						0.	0.	0.
(7) MARYE ANNE FOX DIRECTOR	2.00	X						0.	0.	0.
(8) CHAD NELLEY DIRECTOR	2.00	X						0.	0.	0.
(9) ELI MORGAN DIRECTOR	2.00	X						0.	0.	0.
(10) MARCIA BORGMAN DIRECTOR	2.00	X						0.	0.	0.
(11) CELIA LANNING DIRECTOR	2.00	X						0.	0.	0.
(12) BEN MARTINEZ DIRECTOR	2.00	X						0.	0.	0.
(13) HEATHER BERGMAN DIRECTOR	2.00	X						0.	0.	0.
(14) EDUARDO GUERRA DIRECTOR	2.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,096,313.			
	g	Noncash contributions included in lines 1a-1f, \$		233,085.			
	h	Total. Add lines 1a-1f		2,096,313.			
Program Service Revenue	2 a	COLLEGE APPS ACADEMY	Business Code 611600	22,880.	22,880.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		22,880.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3.			3.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real (ii) Personal				
		Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		Less: cost or other basis and sales expenses					
		Gain or (loss)					
		Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	172,787.			
		Less: direct expenses	b	58,659.			
		Net income or (loss) from fundraising events		114,128.			114,128.
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
		Less: direct expenses	b				
		Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a					
	Less: cost of goods sold	b					
	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				Business Code			
11 a							
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		2,233,324.	22,880.	0.	114,131.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	745,774.	745,774.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	126,626.	86,325.	14,312.	25,989.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,018,963.	694,657.	115,167.	209,139.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	28,768.		28,768.	
10 Payroll taxes	101,087.	69,424.	11,249.	20,414.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	36,404.	4,409.	30,390.	1,605.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	51.	6.	43.	2.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	66,179.	2,668.	63,511.	
17 Travel	49,099.	28,864.	1,396.	18,839.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,138.		6,138.	
23 Insurance	8,072.	338.	7,734.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUPPLIES	46,006.	34,497.	6,372.	5,137.
b PUBLISHING AND MAILING	28,663.	11,000.	1,847.	15,816.
c FOOD AND BEVERAGE	19,600.	12,296.	3,768.	3,536.
d EQUIPMENT	16,869.	9,577.	1,901.	5,391.
e All other expenses	27,331.	5,932.	20,259.	1,140.
25 Total functional expenses. Add lines 1 through 24e	2,325,630.	1,705,767.	312,855.	307,008.
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 if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1	Cash - non interest-bearing	805,122.	1 396,748.
	2	Savings and temporary cash investments		2
	3	Pledges and grants receivable, net		3 288,000.
	4	Accounts receivable, net		4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges		9
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 50,165.	
	b	Less: accumulated depreciation	10b 22,651.	10c 4,021. 27,514.
	11	Investments - publicly traded securities		11
	12	Investments - other securities. See Part IV, line 11		12
	13	Investments - program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	Total assets. Add lines 1 through 15 (must equal line 34)	809,143.	16 712,262.	
Liabilities	17	Accounts payable and accrued expenses	150,833.	17 146,258.
	18	Grants payable		18
	19	Deferred revenue		19
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties		24
	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		25
	26	Total liabilities. Add lines 17 through 25	150,833.	26 146,258.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	563,009.	27 278,004.
	28	Temporarily restricted net assets	95,301.	28 288,000.
	29	Permanently restricted net assets		29
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	Total net assets or fund balances	658,310.	33 566,004.	
34	Total liabilities and net assets/fund balances	809,143.	34 712,262.	

Form 990 (2015)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,233,324.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,325,630.
3	Revenue less expenses. Subtract line 2 from line 1	3	-92,306.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	658,310.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	566,004.

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 in 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 in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

REALITY CHANGERS

Employer identification number

26-3757305

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 11, 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 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		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,442,864.	1,015,041.	1,234,906.	2,162,570.	2,096,314.	7,951,695.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,442,864.	1,015,041.	1,234,906.	2,162,570.	2,096,314.	7,951,695.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						7,951,695.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1,442,864.	1,015,041.	1,234,906.	2,162,570.	2,096,314.	7,951,695.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,092.	1,117.	158.	4.	3.	2,374.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7,954,069.
12 Gross receipts from related activities, etc. (see instructions)					12	22,880.
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.97 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.97 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subject line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 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 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. 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 - 2014. 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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).		
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? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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? If "Yes" to a, b, or c, provide detail in Part VI.		

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		

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

	Yes	No
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 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.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015
Open to Public Inspection

Name of the organization

REALITY CHANGERS

Employer identification number
26-3757305

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2015

532051
11-02-15

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 are a 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 programs
- e Other _____

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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					

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 Temporarily restricted endowment %

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		50,165.	22,651.	27,514.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				27,514.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	2,301,984.
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	10,000.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	58,660.	
e	Add lines 2a through 2d	2e		68,660.
3	Subtract line 2e from line 1	3		2,233,324.
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		2,233,324.

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

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

1	Total expenses and losses per audited financial statements		1	2,394,290.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	10,000.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	58,660.	
e	Add lines 2a through 2d	2e		68,660.
3	Subtract line 2e from line 1	3		2,325,630.
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		2,325,630.

Part XIII Supplemental information.

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS WHICH CLARIFY THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE ORGANIZATION'S FINANCIAL STATEMENTS AND PRESCRIBE A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE STANDARDS ALSO PROVIDE GUIDANCE ON DERECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR TO BE TAKEN IN A TAX RETURN. AS OF DECEMBER 31, 2015 AND 2014, THE ORGANIZATION HAS NOT ACCRUED INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSE 58,660.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSE 58,660.

Lined area for supplemental information.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GRADUATION (event type)	(event type)	NONE 0 (total number)	
Revenue	1	Gross receipts	172,787.		172,787.
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	172,787.		172,787.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	13,423.		13,423.
	7	Food and beverages	13,858.		13,858.
	8	Entertainment	7,659.		7,659.
	9	Other direct expenses	23,720.		23,720.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			58,660.
	11	Net income summary. Subtract line 10 from line 3, column (d)			114,127.

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:
a The organization's facility 13a %
b An outside facility 13b %

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

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ +

c If "Yes," enter name and address of the third party:
Name
Address

16 Gaming manager information:

Name
Gaming manager compensation \$
Description of services provided
 Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOOL ASSISTANCE	70	745,774.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

ALL RECEIPTS ARE TRACKING IN DONOR SYSTEM AND CODED AS UNRESTRICTED OR RESTRICTED. RESTRICTED GRANTS ARE PERIODICALLY REVIEWED TO MAKE SURE PROCEEDS USED FOR GRANT PURPOSES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

REALITY CHANGERS

Employer identification number
26-3757305

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>SCHOLARSHIPS</u>)	X	1	233,085.FMV	
26	Other ▶ (_____)				
27	Other ▶ (_____)				
28	Other ▶ (_____)				

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

29

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
- b If "Yes," describe in Part II.
- 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) (2015)

532141
08-21-15

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

REALITY CHANGERS

Employer identification number

26-3757305

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COLLEGE-READY BY 11TH GRADE, OFFER 12TH GRADERS YEAR-LONG TRAINING ON
COLLEGE APPLICATIONS, AND PROVIDE PROGRAM GRADS WITH ACADEMIC AND
CAREER SUPPORT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WE OFFER COLLEGE APPS ACADEMY, A FOR BENEFIT ENTERPRISE THAT SERVES ALL
STUDENTS SEEKING ADMISSION TO FOUR-YEAR UNIVERSITIES.

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

E-MAILED TO ALL THE MEMBERS

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

REVIEWED ANNUALLY

FORM 990, PART VI, SECTION B, LINE 15:

REVIEWED ANNUALLY

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

UPON REQUEST

**City of Solana Beach
Community Grant Program
Request for Financial Assistance
FY 2017-18 APPLICATION**

Name of Organization: Solana Beach Civic and Historical Society (SBC&HS)

Mailing Address: P. O. Box 504

City: Solana Beach **State:** California **ZIP:** 92075

Contact Persons: Lisa Montes Sandy Mills

Daytime Phone: 858-519-6645 (cell) 619-952-0268

Evening Phone: same same

Email address: monteslisa1964@gmail.com sandynew2@yahoo.com

1. W-9 must be attached

Summary of organization's budget must be attached

Proposed program budget must be attached

Financial Statements (see Application Guidelines) must be attached

2. A copy of the certification Nonprofit Corporation must be attached OR, California Non-profit 501(C)3 Certificate Number: 95-1950979

3. Has your organization received financial assistance from the City before? NO

4. Amount requested FY 2017-2018: \$5000.00

5. Proposed Total Program Costs: (Includes all estimated costs to conduct proposed activity/program.) This will be an ongoing project. in that there will always be new items added to our collection, so it's difficult to estimate "Total Program Costs". Initial start-up costs will be to send 11 large scrapbooks to a professional digitizing company since these can only be handled on special machines. From then on, there will be purchase of large amounts of external hard drive space, archival acid-free paper and storage boxes for the original documents for starters. These range in price from \$6.00 to \$39.00. At this point, we do not anticipate purchase of a cradle scanner as we can use the one at the Carlsbad Library, but this might be advisable at a later date.

6. Title of Proposed Program/Service: "Preserving Solana Beach History by Digitalization of all our Records"

7. Grant funds must be used for services or materials directly associated to proposed activity. Please describe how the funds will be used: We want to convert all saved documents to digitization in order that they are preserved for posterity. To begin, we are taking all the scrapbooks which date to the beginning of Solana Beach and will then tackle other documents. On the recommendation of Sarah Dana, Archivist at the Carlsbad Library, we will

SBC&HS GRANT APPLICATION - Page 2

first outsource our digitization to The BackStage Library Works company, because of the large size of our scrapbooks. Later we hope to do much of the work ourselves or with Interns and College students. We are presently checking with other digitizing companies to get several more estimates of this cost. We will always check prices and use good sense in spending every penny! We've learned we must also purchase Liability insurance to cover workers in this project and that cost is \$650.00. We've just received a quote for the 11 large scrapbooks to be fully digitalized and preserved and that comes to \$800.00. We will be getting other quotes before we move forward.

8. Estimated number of S.B. residents to be served by proposed program: 13,000++ We believe our project will be available to ALL S.B. residents AND to all future researchers who want to know all about our early history.

9. Program Dates/Location: This will be an ongoing project as there are many documents that have accumulated over the past thirty-plus years and these will deteriorate and be gone forever unless they are preserved by digitization.

10. Anticipated Program Objectives or Accomplishments: To preserve the history of our area and to save through digitalization the many years of accumulated scrapbooks, newspapers and clippings, photos, and documents of all our citizens. Currently, these materials have been housed on shelving in the Solana Beach Heritage Museum, under no protection at all. They are quickly deteriorating, yellowing and being devoured by various insects, mostly silverfish!

11. How will the organization acknowledge the City's financial contribution to the community/beneficiaries of the proposed activity? It will enable us to begin this huge project. We'll come to City Council and report regularly on our progress due to the City's Grant contribution and we'll ask the City to put out an E-Blast about this exciting project. Copies of all the digitized records and documents will be housed at a local library, with total access for all our interested residents and researchers! We also hope to have a website that will keep our community abreast of our progress.

12. Will there be any matching funds or other grants that would be applied to this program or service? If awarded this grant, will that enable other funding sources? Not at this point, but perhaps we can use some of the SBC&HS funds to help out when special handling is needed. Solana Beach may be the first City to undertake a project such as this and once again, we will be the leaders in providing digitized historical records to all its citizens!

13. Will volunteers be used for the proposed program or service, and if so, will they reduce expenses? Yes, we hope to be innovative in our utilization of many volunteers! We have made contact with two colleges who want to use our project as a Service Learning Project

for students and this will be at no cost to us. We also will be available for Research Assistants and Archivists to work under the auspices of a librarian while they earn college credit. Of

SBC&HS GRANT APPLICATION - Page 3

course. some of our volunteers will be from the SBC&HS membership as they are very anxious to participate in saving our great city's history.....current to very early history.

14. If the proposed program or service is only awarded partial funding, will it still move forward? Will the program or service be scaled back and/or is there a threshold at which it will not move forward? We will certainly try to keep this project moving forward, but it will need to be scaled back if we do not receive Grant money. We feel very impassioned by this project because we know this MUST be done or all of the saved historical photos, clippings, ad documents will be gone forever! We feel this project will be a huge benefit to the entire City of Solana Beach for now and for years to come.

Thank you for this opportunity to apply for this Grant!

Acknowledgment of Responsibility:

Authorized Signature assumes all responsibility for developing and implementing proposed activities or events in this application, including public acknowledgment of the City's financial contribution. Authorized signature will comply with all accounting and budget procedures outlined by the City. Authorized signature and accompanying group will hold harmless the City of Solana Beach from all losses, claims, accidents and problems associated, directly or indirectly with the development and implementation of proposed activities or events.

Don Mills & Mills

Authorized Signature of Organization

10/30/17

Date

ALL INFORMATION REQUESTED ON THIS APPLICATION MUST BE COMPLETED AS A CONDITION FOR BEING CONSIDERED FOR PUBLIC FUNDS BY THE CITY COUNCIL OF SOLANA BEACH.

Solana Beach Civic and Historical Society
Income & Expenses
July 2016 through June 2017

30-Jun-17

Income

Functions			
	Barbecue	\$	960.00
	Holiday Luncheon	\$	1,470.00
	Installation Dinner	\$	676.00
	Sub Total	\$	3,106.00
Interest			
		\$	33.33
	Sub Total	\$	33.33
Sales			
	Holiday Bazaar	\$	7,303.90
	Photo Sales	\$	190.00
	Poinsettia Sales	\$	2,220.00
	Book Sales	\$	505.00
	Sub Total	\$	10,218.90
Memberships			
		\$	3,325.00
	Sub Total	\$	3,325.00
Donations			
		\$	3,840.00
	Sub Total	\$	3,840.00
TOTAL INCOME		\$	20,523.23

Expenses

	Beautification	\$	281.00
	Donations	\$	2,000.00
	Education	\$	3,609.99
	Functions	\$	3,523.90
	Insurance	\$	1,022.00
	Miscellaneous	\$	684.93
	Printing	\$	994.45
	Postage	\$	209.50
	Sales	\$	2,402.33
	Scholarships/Sponsorships	\$	5,000.00
	Taxes	\$	314.00
TOTAL EXPENSES		\$	20,042.10

Solana Beach Civic and Historical Society
Balance Sheet
As of June 30, 2017

June 30, 2017

ASSETS

Current Assets

Checking/Savings

SDCCU Checking	\$ 4,512.34
SDCCU Money Market	41,575.66
SDCCU Savings	55.00

TOTAL Checking/Savings	46,143.00
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TOTAL Current Assets	\$ 46,143.00
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LIABILITIES & EQUITY

Current Liabilities

Restricted Grant/Memorial Funds

S. Sprague Fund for art, community improvement	18,350.27
Seaweeder Fund for community beautification	6,079.05
Memorial Gifts for 4 deceased Society Leaders	4,435.00

Total Restricted Funds	28,864.32
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TOTAL Liabilities	28,864.32
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Equity

Opening Balance Equity	\$ 16,511.75
Unrestricted Net Assets	-17,789.81
Net Income	481.13

Total Equity	17,278.68
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TOTAL LIABILITIES & EQUITY	\$ 46,143.00
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PMartin 10/29/2017

Solana Beach Civic & Historical Society Proposed Budget for 2017-18

INCOME:

Memberships	\$	3500
Social Outreach Activities		500
Holiday Boutique		
BBQ		
Book, Photo Sales		200
Poinsettia Sales		500
Donations		1500
Interest		150

Restricted Funds Capital: 28,864

S. Sprague Fund for art, education, community improvement
Seaweeders' Fund for community beautification
Memorial Fund

TOTAL INCOME & RESTRICTED FUNDS **\$ 35,214**

EXPENSES:

Administration/Operations 4,000
P.O.Box; Insurance; CA & IRS fees/taxes'; Supplies,
Speaker's Honorarium; Dues to outside organizations;

Social, Community Outreach 1,500
Holiday Luncheon
Fall BBQ
Annual Dinner at Tony's JaCal
Ice Cream Social Friendraiser

Educational Outreach 8,400
Scholarships 3000
Sponsorships 2000
School Buses 3050
Student Booklets 350

Community Improvements – 15,000
Fletcher Cove Community Centre
Post Office
Community Beautification

Museum Maintenance, repairs, 1,500
Memorial Project 4,335
Miscellaneous, incidentals 150

TOTAL EXPENSES **\$ 34,885**

California State Board of Equalization

Taxpayer Name: SOLANA BEACH CIVIC/HSTRCL.SOCIETY

Account Number: 25705377

Filing Period: 01/01/2016 to 12/31/2016

Express Login Code: h621844x

Due Date: 01/31/2017

For assistance during regular business hours call 1-800-400-7115 (TTY:711)

Your filing has been accepted 01/26/2017 at 11:28:38 (PT). Your payment has been submitted for processing. Your filing confirmation number is 00028656968.

Sales and Purchase Information

1 Total Gross Sales	\$3,672.00
2 Purchases Subject to Use Tax	\$0.00
3 Total	\$3,672.00

No Deductions Entered

12 Total Taxable Transactions	\$3,672.00
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District Tax

Total District Tax	\$ 18.00
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Computation Schedule for District Tax

Amount Due

13 Sales and Use Tax Due	\$294.00
15 Remaining Tax Due	\$294.00
18 Total Amount Due and Payable	\$294.00

Preparer Information

Preparer Name	Walter F. Oliver
Preparer Title	Treasurer
Preparer Phone Number	858-603-6060

Return and Payment Information

Effective Date of Filing	01/26/2017 11:28:38 (PT)
Payment Method	E-Check (ACH Debit)
Bank Routing Number	322281617
Bank Account Number	*****0395
Bank Account Type	Checking
Payment Amount	\$294.00
Payment Effective Date	01/26/2017

*Paid online
1/26/2017
JML*



Secretary of State
Statement of Information
 (California Nonprofit, Credit Union and
 General Cooperative Corporations)

SI-100

✓ 289
 Pd by ck #289
 1/17

IMPORTANT — Read instructions before completing this form.

Filing Fee — \$20.00;
Copy Fees — First page \$1.00; each attachment page \$0.50;
Certification Fee — \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State)

Solana Beach Civic and Historical Society
 Post Office Box 504
 Solana Beach, California 92075

This Space For Office Use Only

2. 7-Digit Secretary of State File Number
C0445698

3. Business Addresses

a. Street Address of California Principal Office, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
1412 San Lucas Court	Solana Beach	CA	92075
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code
Post Office Box 504	Solana Beach	CA	92075

4. Officers The Corporation is required to enter the names and addresses of all three of the officers set forth below. An additional title for Chief Executive Officer or Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/	First Name	Middle Name	Last Name	Suffix
Michele			Stribling	
Address	City (no abbreviations)		State	Zip Code
12 Ocean Street	Solana Beach		CA	92075
b. Secretary	First Name	Middle Name	Last Name	Suffix
Cindi			Clemons	
Address	City (no abbreviations)		State	Zip Code
543 Glenmont Drive	Solana Beach		CA	92075
c. Chief Financial Officer/	First Name	Middle Name	Last Name	Suffix
Walter		Francis	Oliver	
Address	City (no abbreviations)		State	Zip Code
1412 San Lucas Court	Solana Beach		CA	92075

5. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete items 5a and 5b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
Walter	Francis	Oliver	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
1412 San Lucas Court	Solana Beach	CA	92075

CORPORATION — Complete item 5c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 5a or 5b

6. Common Interest Developments

Check here if the corporation is an association formed to manage a common interest development under the Davis-Sterling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See Instructions.

7. The information contained herein, including in any attachments, is true and correct.

2/18/2017 Walter F. Oliver Treasurer
 Date Type or Print Name of Person Completing the Form Title Signature

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury
Internal Revenue Service

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

2016

Open to Public Inspection

For the 2016 Calendar year, or tax year beginning 2016-07-01 and ending 2017-06-30

3 Check if available

- Terminated for Business
- Gross receipts are normally \$50,000 or less

C Name of Organization: SOLANA BEACH CIVIC AND HISTORICAL SOCIETY

D Employee Identification Number 95-1950979

P O Box 504, Solana Beach, CA, US, 92075

E Website:

www.solanabeachcivicandhistoricalsociety.org

F Name of Principal Officer: Walter Oliver

P O Box 504, Solana Beach, CA, US, 92075

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

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

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

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

*Filed online
is under
\$50,000 that is
required by
IRS for filing
9/11/12
Dan
10-29-2012*

FOR GRANT REQUIREMENTS RE FINANCIALS:

Here are the hard copies for:

- * The California State Board of Equalization tax return (we paid \$294) for the sales taxes we collected prior to Dec. 2016
- * The Secretary of State Statement of Information form Si-100 for 2016 - 2017
- * The California Franchise Tax Board 199N-e-Postcard filing for 2016-17
- * The IRS Electronic e-Postcard Form 990-N for 2016 (this is a copy of the filing--no confirmation in file (I found reference to it being done online)
- * The Balance Sheet of Assets and Equity/Liability for 2016-2017
- * The Proposed Budget for 2017- 2018
- * The Income & Expenses sheet for 2016-17

* The requirement for a W-9 does not pertain to us as it is for individuals to use.

Peggy Martin, Treasurer for SBCHS.
10-20-2017

City of SB Grant Committee

This explanation from our Treasurer is why there is no W-9 Form attached to our application

Lander Mills



STAFF REPORT CITY OF SOLANA BEACH

TO: Honorable Mayor and City Councilmembers
FROM: Gregory Wade, City Manager
MEETING DATE: November 15, 2017
ORIGINATING DEPT: City Manager's Office
SUBJECT: **Consideration of Resolution 2017-164 Calling Upon Congress to Continue the Existing DACA Program and Provide DACA Recipients with a Pathway to Permanent Residence and Eventually US Citizenship**

BACKGROUND:

At the request of Councilmember Zito, this item is being presented to the City Council to consider approval of a resolution to call upon Congress to continue the existing Deferred Action for Childhood Arrivals (DACA) program and provide DACA recipients with a pathway to permanent residence and eventual United States (US) citizenship. The DACA program, implemented in 2012, offered work authorization and a renewable two-year reprieve from deportation to unauthorized immigrants who were brought to the United States as children and met specific eligibility requirements. To be eligible for the DACA program, some of the requirements for applicants included having entered the United States prior to the age of 16, being enrolled in school, having earned a high school diploma or its equivalent or being an honorably discharged veteran of the United States Armed Forces or Coast Guard.

DACA recipients are commingly referred to as "Dreamers". According to the United States Citizenship and Immigration Services (USCIS), as of March 2017, some 887,000 individuals had applied for DACA and 788,000 applications had been approved. According to the Pew Research Center, there are 222,795 DACA recipients in California, more than a quarter of the program's total. Supporting communities and public schools are an important part of the successful assimilation of Dreamers into American society and into the American workforce.

This item is before the City Council to consider approval of Resolution 2017-164 (Attachment 1) calling upon Congress to continue the existing DACA program and provide DACA recipients with a pathway to permanent residence and eventually US citizenship.

CITY COUNCIL ACTION: _____

DISCUSSION:

On September 5, 2017, the current Administration announced that, without action by Congress to approve legislation to formally create or replace the DACA program, the current program would cease to exist within six months, or by March 2018. This announcement by the current Administration has reportedly caused panic and distress in the DACA-eligible community and for many undocumented students and families throughout California. The uncertainty over DACA is reportedly creating an atmosphere that discourages some undocumented students from attending schools, as is their legal right. Diminished attendance jeopardizes the ability of schools to prepare all students for the demands of the 21st century and success in college, career and civic life.

There are no fewer than four separate bills pending in Congress to address the DACA program, including the bipartisan "DREAM Act," sponsored by Senators Lindsey Graham (R-SC) and Richard Durbin (D-IL) to expand eligibility for conditional residency to 1.8 million immigrants, including all DACA recipients, who entered the United States before the age of 18 and who have been in the country longer than four years, and the Republican-sponsored "Recognizing America's Children Act," which would provide conditional residency for immigrants who arrived in this country before the age of 16 and who have been in the country for five years.

More than 400 Chief Executive Officers of America's largest corporations, including the CEOs of such companies as AT&T, Best Buy, Amazon, Apple, Wells Fargo, Microsoft, Facebook and Alphabet, have signed a letter calling upon President Trump to "preserve the DACA program," and calling upon Congress to "pass the bipartisan DREAM Act or legislation that provides these young people raised in our country the permanent solution they deserve." The letter signed by more than 400 CEOs states that "97% (of DACA participants) are in school or in the workforce" and that without these Dreamers, "the US economy would lose \$460.3 billion from the national GDP and \$24.6 billion in Social Security and Medicare tax contributions."

This item is before the City Council to consider calling upon Congress to continue the existing DACA program and provide DACA recipients with a pathway to permanent residence and eventually US citizenship.

CEQA COMPLIANCE STATEMENT:

Not a project as defined by CEQA.

FISCAL IMPACT:

There is no fiscal impact.

WORK PLAN: N/A

OPTIONS:

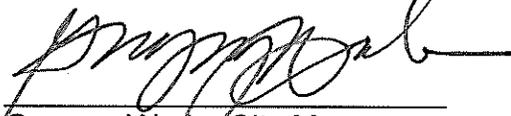
- Approve Staff recommendation
- Approve Staff recommendation with modifications
- Deny Staff recommendation and provide direction

DEPARTMENT RECOMMENDATION:

This item is before the City Council to consider approval of Resolution 2017-164 calling upon Congress to continue the existing DACA program and provide DACA recipients with a pathway to permanent residence and eventually US citizenship.

CITY MANAGER RECOMMENDATION:

Approve Department Recommendation



Gregory Wade, City Manager

Attachments:

1. Resolution 2017-164

RESOLUTION NO. 2017-164

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLANA BEACH, CALIFORNIA, CALLING UPON CONGRESS TO CONTINUE THE EXISTING DACA PROGRAM AND PROVIDE DACA RECIPIENTS WITH A PATHWAY TO PERMANENT RESIDENCE AND EVENTUALLY US CITIZENSHIP

WHEREAS, the Deferred Action for Childhood Arrivals (DACA) program, implemented in 2012, offered work authorization and a renewable two-year reprieve from deportation to unauthorized immigrants who were brought to the United States as children and met specific eligibility requirements; and

WHEREAS, to be eligible for the DACA program, some of the requirements for applicants included having entered the United States prior to the age of 16, being enrolled in school, having earned a high school diploma or its equivalent or being an honorably discharged veteran of the United States Armed Forces or Coast Guard; and

WHEREAS, DACA recipients are commonly referred to as "Dreamers"; and

WHEREAS, according to the United States Citizenship and Immigration Services (USCIS), as of March 2017, some 887,000 individuals had applied for DACA and 788,000 applications had been approved; and

WHEREAS, according to the Pew Research Center, there are 222,795 DACA recipients in California, more than a quarter of the program's total; and

WHEREAS, supporting communities and public schools are an important part of the successful assimilation of Dreamers into American society and into the American workforce; and

WHEREAS, there are no fewer than four separate bills pending in Congress to address the DACA program, including the bipartisan "DREAM Act," sponsored by Senators Lindsey Graham (R-SC) and Richard Durbin (D-IL) to expand eligibility for conditional residency to 1.8 million immigrants, including all DACA recipients, who entered the United States before the age of 18 and who have been in the country longer than four years, and the Republican-sponsored "Recognizing America's Children Act," which would provide conditional residency for immigrants who arrived in this country before the age of 16 and who have been in the country for five years; and

WHEREAS, more than 400 Chief Executive Officers of America's largest corporations, including the CEOs of such companies as AT&T, Best Buy, Amazon, Apple, Wells Fargo, Microsoft, Facebook and Alphabet, have signed a letter calling upon President Trump to "preserve the DACA program," and calling upon Congress to "pass the bipartisan DREAM Act or legislation that provides these young people raised in our country the permanent solution they deserve; and

WHEREAS, the letter signed by more than 400 CEOs states that "97% (of DACA participants) are in school or in the workforce" and that without these Dreamers, "the US economy would lose \$460.3 billion from the national GDP and \$24.6 billion in Social Security and Medicare tax contributions."

NOW, THEREFORE, the City Council of the City of Solana Beach, California, does resolve as follows:

1. That the above recitations are true and correct.
2. The City Council calls upon Congress to continue the existing DACA program and provide DACA recipients with a pathway to permanent residence and eventually US citizenship.

PASSED AND ADOPTED this 15th day of November, 2017, at a special meeting of the City Council of the City of Solana Beach, California by the following vote:

AYES: Councilmembers –
NOES: Councilmembers –
ABSENT: Councilmembers –
ABSTAIN: Councilmembers –

MIKE NICHOLS, Mayor

APPROVED AS TO FORM:

ATTEST:

JOHANNA N. CANLAS, City Attorney

ANGELA IVEY, City Clerk