

California Exempt Organization Annual Information Return

Calendar Year 2013 or fiscal year beginning (mm/dd/yyyy) 7/01/2013, and ending (mm/dd/yyyy) 6/30/2014

Corporation/Organization Name: LAGUNA BEACH EDUCATION FOUNDATION
Address: P.O. BOX 19, LAGUNA BEACH, CA 92652
California corporation number: 0576324
FEIN: 95-3565451

A First Return? [X] No
B Amended Information Return? [X] No
C IRC Section 4947(a)(1) trust? [X] No
D Final Information Return? [X] No
E Check accounting method: 1 [X] Cash
F Federal return filed? 1 [X] 990T
G Is this a group filing for the subordinates/affiliates? [X] No
H Is this organization in a group exemption? [X] No
I Did the organization have any changes in its activities... [X] No

J If exempt under R&TC Section 23701d, has the organization during the year... [X] No
K Is the organization exempt under R&TC Section 23701g? [X] No
L If organization is exempt under R&TC Section 23701d and is exclusively religious... [X] No
M Is the organization a Limited Liability Company? [X] No
N Did the organization file Form 100 or Form 109 to report taxable income? [X] No
O Is the organization under audit by the IRS or has the IRS audited in a prior year? [X] No

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

Table with 3 columns: Description, Line Number, Amount. Includes Receipts and Revenues (Total 1,050,232), Expenses (Total 1,033,608), and Filing Fee (Total 10).

Sign Here: Signature of officer ROBERT L. GAMEZ, CPA, Title PRESIDENT, Date, Telephone 949-494-6811
Paid Preparer's Use Only: Preparer's signature ROBERT L. GAMEZ, CPA, Firm's name ROBERT L. GAMEZ, CPA, 920 GLENNEYRE ST., SUITE #D, LAGUNA BEACH, CA 92651, Telephone 949-494-1034

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

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

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions.	●	1	
	2	Interest	●	2	55.
	3	Dividends	●	3	
	4	Gross rents	●	4	
	5	Gross royalties	●	5	
	6	Gross amount received from sale of assets (See instructions)	●	6	
	7	Other income. Attach schedule. SEE STATEMENT 1	●	7	340,368.
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.		8	340,423.
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule. SEE STATEMENT 2	●	9	676,346.
	10	Disbursements to or for members	●	10	
	11	Compensation of officers, directors, and trustees. Attach schedule SEE STATEMENT 3	●	11	0.
	12	Other salaries and wages	●	12	148,084.
	13	Interest	●	13	
	14	Taxes	●	14	12,612.
	15	Rents	●	15	7,500.
	16	Depreciation and depletion (See instructions)	●	16	
	17	Other Expenses and Disbursements. Attach schedule. SEE STATEMENT 4	●	17	189,066.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9.		18	1,033,608.

Schedule L Balance Sheets	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		50,367.		66,992.
2 Net accounts receivable				
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	8,734.		8,734.	
b Less accumulated depreciation		8,734.		8,734.
11 Land				
12 Other assets. Attach schedule				
13 Total assets		59,101.		75,726.
Liabilities and net worth				
14 Accounts payable				
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule STM 5				1.
19 Capital stock or principle fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		59,101.		75,725.
22 Total liabilities and net worth		59,101.		75,726.

Schedule M-1 Reconciliation of income per books with income per return
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1	Net income per books	●	16,624.	7	Income recorded on books this year not included in this return. Attach sch.	●	
2	Federal income tax	●		8	Deductions in this return not charged against book income this year.	●	
3	Excess of capital losses over capital gains	●			Attach schedule	●	
4	Income not recorded on books this year.			9	Total. Add line 7 and line 8		
	Attach schedule	●		10	Net income per return.		
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●			Subtract line 9 from line 6		16,624.
6	Total. Add line 1 through line 5		16,624.				

IF PAID ELECTRONICALLY: DO NOT FILE THIS FORM

WHERE TO FILE: Using black or blue ink, make check or money order payable to the 'Franchise Tax Board.' Write the corporation number or FEIN and '2013 FTB 3539' on the check or money order. Detach form below. Enclose, but **do not** staple, the payment with the form and mail to:

**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Calendar year corporations – File and Pay by March 17, 2014
Fiscal year filers – See instructions
Employees' trust and IRA – File and Pay by April 15, 2014
Calendar year exempt orgs – File and Pay by May 15, 2014

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

ONLINE SERVICES: Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

----- DETACH HERE ----- IF NO PAYMENT IS DUE OR PAID ELECTRONICALLY, DO NOT MAIL THIS FORM ----- DETACH HERE -----
CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR

2013

**Payment for Automatic Extension
for Corps and Exempt Orgs**

CALIFORNIA FORM

3539 (CORP)

0576324 LAGU 95-3565451 000000000000 13 FORM 3
TYB 07-01-2013 TYE 06-30-2014
LAGUNA BEACH EDUCATION FOUNDATION
PEGGY PETIG
PO BOX 19
LAGUNA BEACH CA 92652

949-494-6811

TOTAL PAYMENT AMT 10.

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Statement 1
Form 199, Part II, Line 7
Other Income

Income from Special Events..... \$ 340,368.
 Total \$ 340,368.

Statement 2
Form 199, Part II, Line 9
Contributions, Gifts, Grants, and Similar Amounts Paid

Class of Activity: CONTRIBUTION TO GEN. FUND
 Donee's Name: LAGUNA BEACH UNIFIED SCH.
 Donee's Street Address: BLUMONT DRIVE
 Donee's City, State, ZIP: LAGUNA BEACH, CA 92651
 Relationship of Donee: NONE
 Amount Given: \$ 589,735.

Class of Activity: CASH DONATION TO ENDOW.
 Donee's Name: LAGUNA BEACH EDUCATION FOUND.
 Donee's Street Address: 675 PARK AVE
 Donee's City, State, ZIP: LAGUNA BEACH, CA 92651
 Relationship of Donee: NONE
 Amount Given: 86,611.

Total \$ 676,346.

Statement 3
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

Name and Address	Title and Average Hours Per Week Devoted	Compen-sation	Contri-bution to EBP & DC	Expense Account/ Other
JENNIFER AND STEVE BAKER 2012 SAN REMO LAGUNA BEACH, CA 92651	Director 1.00	\$ 0.	\$ 0.	\$ 0.
KELLY AND WILLIS BOYD 3 S. LAENDA LAGUNA BEACH, CA 92651	Director 2.00	0.	0.	0.
DIANA AUSTIN 325 DIAMOND LAGUNA BEACH, CA 92651	Vice President 2.00	0.	0.	0.
CRAIG AND ELAINE BRASHIER 651 VIRGINIA PARK LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Statement 3 (continued)
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
KRISTI CANCELLIERI 15 BAY DRIVE LAGUNA BEACH, CA 92651	Director 2.00	\$ 0.	\$ 0.	\$ 0.
KENT AND JULIETT CHESLEY 1212 STARLIT LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
MARI BARTON 931 EMERALD BAY LAGUNA BEACH, CA 92651	Director 1.00	0.	0.	0.
JEB AND TESS DICKERSON 366 MYRTLE LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
PETER AND ELISSA ELKIN 2265 BRIDGE LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
JOHN AND ELIZABETH CARPINO 5 S ALTA MIRA LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
KEVIN AND PAMELA FRANCK 520 DIAMOND ST LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
BOB AND NANCY JACKSON 263 EMERALD BAY LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
DENISE FORNARO 31898 CIRCLE DR LAGUNA BEACH, CA 92651	Director 1.00	0.	0.	0.
LYNN GREGORY 860 PARK AVE LAGUNA BEACH, CA 92651	President 1.00	0.	0.	0.
MIKE AND HILARY GILLES 371 DARTMOOR LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
STEVE AND GAIL HAGLUND 31 HUMMINGBIRD LN ALISO VIEJO, CA 92653	Director 0	0.	0.	0.

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Statement 3 (continued)
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
AMY AND JOE KRAMER 2811 RIDGE DR LAGUNA BEACH, CA 92651	Director 0	\$ 0.	\$ 0.	\$ 0.
BILL AND KATHLEEN MOORE 84 EMERALD BAY LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
TOM AND ALLISON MOTHERWAY 2851 RIDGE DR LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
JEFF AND CINDY JACOBS 3098 ZELL LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
ARI AND KIM NOVICK 2830 CHATEAU WAY LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
SHAWN AND ANNEMEIEKE ROGERS 547 TEMPLE HILLS LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
MICHAEL AND ILANA ROSENBERG 22212 RICO RD LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
MARK AND LISA ROSSI 708 EMERALD BAY LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
GARY AND BELINDA RUBEL 7 S STONINGTON LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
CARRIE AND MICHAEL REYNOLDS 223 FAIRVIEW LAGUNA BEACH, CA 92651	Director 1.00	0.	0.	0.
CHARLES AND LAURA KELLER 3079 BERN DR LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
KIRK AND NINA LANGTON 535 PEARL LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Statement 3 (continued)
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
THERESA AND BILL OHARE 888 REMBRANDT LAGUNA BEACH, CA 92651	Director 1.00	\$ 0.	\$ 0.	\$ 0.
ED AND REGINA SCHLATTER 2980 ZURICH CT LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
ROB AND KELLY SMITH 1662 HILLCREST LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
BRENT AND WENDY MARTINI 2470 MONACO LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
ANGELA AND DAVE SHIPP 444 LINDEN ST LAGUNA BEACH, CA 92651	Director 1.00	0.	0.	0.
JOHN AND KERRY TREVINO 21452 OCEAN VISTA LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
MIKE NOZZARELLA 812 MANZANITA DR LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
TAMMY AND MARCUS SKENDERIAN 3009 MOUNTAIN VIEW LAGUNA BEACH, CA 92651	President 1.00	0.	0.	0.
SAMANTHA AND GREG WASHER 345 EMERALD BAY LAGUNA BEACH, CA 92651	Vice President 1.00	0.	0.	0.
KRISTIN AND RALPH WINTER 417 PALMER PL LAGUNA BEACH, CA 92651	Vice President 1.00	0.	0.	0.
ERIC AND BECKY WILLS 92 S LA SENDA LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
TAYLOR AND JILL PILLSBURY 63 S LA SENDA LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Statement 3 (continued)
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
MIKE AND FRANA SADLER 30502 S COAST HWY LAGUNA BEACH, CA 92651	Director 0	\$ 0.	\$ 0.	\$ 0.
JOSH AND PEGGY WOLFF 1488 BLUEBIRD CANYON LAGUNA BEACH, CA 92651	Secretary 0	0.	0.	0.
CHRIS LOIDOLT 2965 TERRY RD LAGUNA BEACH, CA 92651	Director 0	0.	0.	0.
Total		<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

Statement 4
Form 199, Part II, Line 17
Other Expenses

Accounting Fees.....	\$ 740.
Advertising and Promotion.....	315.
BANK CHARGES.....	1,105.
BOARD EXPENSE.....	450.
BUSINESS ALLIANCE COSTS.....	4,140.
COMMUNITY CAMPAIGN.....	19,175.
COMPUTER COSTS.....	740.
CONFERENCE.....	2,002.
COPIES.....	3,470.
DIRECTORY EXPENSE.....	20,876.
FEES.....	20.
Insurance.....	3,510.
JOB SEARCH.....	644.
OFFICE SUPPLIES.....	1,019.
OUTSIDE SERVICES.....	419.
PAYROLL SERVICE.....	1,027.
Postage and Shipping.....	1,280.
Printing and Publications.....	759.
PUBLIC RELATIONS.....	1,115.
REAL ESTATE HONOR ROLL.....	205.
REPAIRS & MAINTENANCE.....	13,834.
Special Event Expenses.....	104,313.
TELEPHONE.....	2,176.
UTILITIES.....	181.
YEAR END EVENT.....	5,551.
Total	<u>\$ 189,066.</u>

Statement 5
Form 199, Schedule L, Line 18
Other Liabilities

Rounding Total \$ 1.
1.

Date Accepted

TAXABLE YEAR

California e-file Return Authorization for Exempt Organizations

FORM

2013

8453-EO

Exempt Organization name

Identifying number

LAGUNA BEACH EDUCATION FOUNDATION

95-3565451

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	1,050,232.
2	Total gross income (Form 199, line 8)	2	1,050,232.
3	Total expenses and disbursements (Form 199, Line 9)	3	1,033,608.

Part II Settle Your Account Electronically for Taxable Year 2013

4 Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____
 6 Account number _____ 7 Type of account: Checking Savings

Part IV Declaration of Officer

I authorize the exempt organization's account be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my Electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2013 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO, intermediate service provider, the reason(s) for the delay.**

Sign Here

 Signature of Officer Date **President**
 Title

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an Intermediate Service Provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2013 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input checked="" type="checkbox"/>	ERO's PTIN
Robert L. Gamez, CPA				P00046993
Firm's name (or yours if self-employed) and address	FEIN			
920 Glenneyre St., Suite #D	95-6400610			
Laguna Beach CA	ZIP Code		92651	

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN
Firm's name (or yours if self-employed) and address	FEIN		
	ZIP Code		

For Privacy Notice, get form FTB 1131 ENG/SP.

FTB 8453-EO 2013