STATE OF CALIFORNIA CT-TR-1 (Orig. 09/2017)

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

REET ADDRESS: 1300 | Street Sacramento, CA 95814 (916) 210-6400

## **ANNUAL TREASURER'S REPORT** ATTORNEY GENERAL OF CALIFORNIA

Section 12586, California Government Code 11 Cal. Code Regs., Section 301

(FORM CT-TR-1)

| DEPARTMENT OF JUSTICE PAGE 1 of 4 |  |
|-----------------------------------|--|
| or Registry Use Only              |  |

| www.oag.ca.gov/charities                               |  |                      |                                |             |                                       |
|--|--|----------------------|--------------------------------|-------------|---------------------------------------|
| CALIFORNIA ASSOCIATION  Name of Organization           | OF BOND OVERSIGHT O  | COMMITTEES           | State Charity Registration     | Numbe       | CT0267634                             |
| 121 ASH COURT Address (Number and Street)              |  |                      | Corporation or Organization    | on No.      | 4319346                               |
| HERCULES, CA 94547<br>City or Town, State and ZIP Code | ALCTRONIE TO THE PARTY OF THE P |                      | Federal Employer I.D. No       |             |                                       |
| For annua  | al accounting period ( beginning   | ig <u>1 / 1 / 20</u> | 019 ending 12 / 31             | / 2019      | 9_}                                   |
|  | BAL  | ANCE SHEET           |                                |             |                                       |
| ASSETS   | •  | LIAB                 | ILITIES                        |             |                                       |
| Cash   | \$ 5114  | Ącc                  | ounts Payable                  | \$          | 68                                    |
| Savings  | \$   | Sala                 | ary Payable                    | \$,,        |                                       |
| Investment   | \$   | Oth                  | er Liabilities                 | \$          |                                       |
| Land/Buildings   | \$   |                      | TOTAL LIABILITIES              | \$          | 10                                    |
| Other Assets   | \$   |                      | TOTAL LIABILITIES              |             | 68                                    |
| TOTAL ASSETS   | \$ 5114  | FUNI                 | D BALANCE                      |             |                                       |
| TOTAL ROOL TO  | · 577 ·  | Tota                 | al Assets less Total Liabiliti | es \$       | 5,046                                 |
|  | REVEN  | IUE STATEME          | :NT                            |             |                                       |
| REVENUE  | IVE 4 E1   |                      | ENSES                          |             |                                       |
| Cash Contributions                                     | \$ 5800  | Con                  | npensation of Officers/Direc   | tors \$     |                                       |
| Noncash Contributions                                  | \$   | Cor                  | mpensation of Staff            | / <b>\$</b> | · · · · · · · · · · · · · · · · · · · |
| Program Revenue  | \$   | Fun                  | draising Expenses              | \$          |                                       |
| Investments  | \$   | Ren                  | nt                             | \$          |                                       |
| Special Events   | \$   | Utili                | ties                           | \$          |                                       |
| Other Revenue  | \$   | Sup                  | plies/Postage                  | \$          |                                       |
| TOTAL REVENUE  | \$ 5800  | Insu                 | ırance                         | \$          | á                                     |
| TOTAL REVENUE  | * 3800   | Oth                  | er Expenses                    | \$          | 754                                   |
| NET REVENUE  |  |                      | TOTAL EXPENSES                 | \$          | 75%                                   |
| Total Revenue less Total Expenses                      | \$ 5046  |                      |                                | Ψ           | 1 37                                  |

hereby declare under penalty of perjury that I have examined this report, including accompanying documents, and, to the best of my knowledge

Anton Jungherr

Printed Name

and belief, the content is true, correct and complete and I am authorized to sign.

Signature of Authorized Agent

4.24.20

Date

Treasurer

Title



# State of California Secretary of State

N

2 ATTACHMENT

Succession Plan Secretary and Treasurer

#### 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

1. CORPORATE NAME

CALIFORNIA ASSOCIATION OF BOND OVERSIGHT COMMITTEES

GA11541 FILED

In the office of the Secretary of State of the State of California

OCT-18 2019

2. CALIFORNIA CORPORATE NUMBER

C4319346

Complete Princing Office Address (Denot abbreviate the name of the city, Item 2 contest he a E.O. Rey)

This Space for Filing Use Only

|  | Tince Address (Do not aboreviate the fighte of the ci  | ity. item o commot oc a 1 .O. Dox.)   |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| 3. STREET ADDRESS OF   | PRINCIPAL OFFICE IN CALIFORNIA, IF ANY   | CITY  | STATE  | ZIP CODE   |  |  |  |
| 121 ASH CLOURT, HERCULES, CA 94547   |  |   |  |  |  |  |  |
| 4. MAILING ADDRESS OF  | THE CORPORATION  | CITY  | STATE  | ZIP CODE   |  |  |  |
| ANTON JUNGHERR   | 121 ASH COURT, HERCULES, CA 94547  |   |  | · ·  |  |  |  |
|  |  |   |  |  |  |  |  |
|  |  |   |  |  |  |  |  |
| Names and Complete officer may be added; how   | 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 OF  | FICER/ ADDRESS   | CITY  | STATE  | ZIP CODE   |  |  |  |
| JACK WEIR 31 BA  | NDRIDGE PLACE, PLEASANT HILL, CA 94523   |   |  |  |  |  |  |
| 6. SECRETARY   | ADDRESS  | CITY  | STATE  | ZIP CODE   |  |  |  |
| ANTON JUNGHERR   |  |   |  |  |  |  |  |
| 7. CHIEF FINANCIAL OFF   |  | CITY  | STATE  | ZIP CODE   |  |  |  |
| ANTON JUNGHERR   | IZ LASE CULIKLEEK LIJES CA MASA/   |   |  |  |  |  |  |
|  |  |   |  |  |  |  |  |
| Agent for Service of address, a P.O. Box add   | Process If the agent is an individual, the agent must<br>dress is not acceptable. If the agent is another corpo-<br>lifornia Corporations Code section 1505 and Item 9 must  | oration, the agent must have on file wi<br>st be left blank.  | ith the Californi  | ia Secretary of State a  |  |  |  |
| Agent for Service of address, a P.O. Box add   | Process If the agent is an individual, the agent must<br>fress is not acceptable. If the agent is another corpo-<br>lifomia Corporations Code section 1505 and Item 9 must<br>R SERVICE OF PROCESS   | ration, the agent must have on file w   | ith the Californi  | ia Secretary of State a  |  |  |  |
| Agent for Service of address, a P.O. Box add certificate pursuant to Cala. NAME OF AGENT FOR ANTON JUNGHERR  | Process If the agent is an individual, the agent must<br>dress is not acceptable. If the agent is another corpo-<br>lifomia Corporations Code section 1505 and Item 9 must<br>R SERVICE OF PROCESS   | oration, the agent must have on file wist be left blank.  | ith the Californi  | ia Secretary of State a  |  |  |  |
| Agent for Service of address, a P.O. Box add certificate pursuant to Call NAME OF AGENT FOR ANTON JUNGHERR  9. STREET ADDRESS OF   | Process If the agent is an individual, the agent must<br>dress is not acceptable. If the agent is another corpo-<br>lifornia Corporations Code section 1505 and Item 9 must<br>R SERVICE OF PROCESS  FAGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF A<br>ERCULES, CA 94547  | oration, the agent must have on file wist be left blank.  | ith the Californi  | a Secretary of State a   |  |  |  |
| Agent for Service of address, a P.O. Box address, a P.O. Box address, a P.O. Box address and address and address of the service of the servic | Process If the agent is an individual, the agent must<br>dress is not acceptable. If the agent is another corpo-<br>lifornia Corporations Code section 1505 and Item 9 must<br>R SERVICE OF PROCESS  FAGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF A<br>ERCULES, CA 94547  | oration, the agent must have on file wist be left blank.  IN INDIVIDUAL CITY  a common interest development under the Commercial and industrial a Statement by Common interest Deve   | STATE  STATE  er the Davis-Still Common Interested                           | ZIP CODE  string Common Interest rest Development Act,                                   |  |  |  |
| Agent for Service of address, a P.O. Box address, a P.O. Box address, a P.O. Box address and address and address of the service of the servic | Process If the agent is an individual, the agent must dress is not acceptable. If the agent is another corpolitomia Corporations Code section 1505 and Item 9 must SERVICE OF PROCESS  FAGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF A ERCULES, CA 94547  Evelopments  The corporation is an association formed to manage a ct, (California Civil Code section 4000, et seq.) or use Code section 6500, et seq.). The corporation must file in the corporation mu | oration, the agent must have on file wist be left blank.  IN INDIVIDUAL CITY  a common interest development under the Commercial and industrial a Statement by Common interest Deve   | STATE  STATE  er the Davis-Still Common Interested                           | ZIP CODE  string Common Interest rest Development Act,                                   |  |  |  |
| Agent for Service of address, a P.O. Box address, a P.O. Box address, a P.O. Box address and address and address of a Street Address of 121 ASH COURT, HE Common Interest De  10. Check here if the Development Address of 10. Check here if the Development Address of 11. THE INFORMATION Countries of 11. THE INFORMATION Countries and P.O. Box and | Process If the agent is an individual, the agent must fress is not acceptable. If the agent is another corpolitionia Corporations Code section 1505 and Item 9 must SERVICE OF PROCESS  FAGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF A ERCULES, CA 94547  Evelopments  The corporation is an association formed to manage a ct, (California Civil Code section 4000, et seq.) or usual code section 6500, et seq.). The corporation must file a fornia Civil Code sections 5405(a) and 6760(a). Please  | oration, the agent must have on file wist be left blank.  IN INDIVIDUAL CITY  a common interest development under the Commercial and industrial a Statement by Common interest Deve   | STATE  STATE  er the Davis-Still Common Interested                           | ZIP CODE  string Common Interest rest Development Act,                                   |  |  |  |
| Agent for Service of address, a P.O. Box address, a P.O. Box address, a P.O. Box address and address and address of a Street Address of 121 ASH COURT, HE Common Interest De  10. Check here if the Development Address of 10. California Civil Corequired by California Civil Corea Civil Civil Corea Civil Civil Corea Civil Ci | Process If the agent is an individual, the agent must fress is not acceptable. If the agent is another corporations Code section 1505 and Item 9 must SERVICE OF PROCESS  FAGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF A ERCULES, CA 94547  Evelopments  The corporation is an association formed to manage a ct, (California Civil Code section 4000, et seq.) or usually code section 6500, et seq.). The corporation must file a formia Civil Code sections 5405(a) and 6760(a). Please ONTAINED HEREIN IS TRUE AND CORRECT.   | oration, the agent must have on file wist be left blank.  AN INDIVIDUAL CITY  a common interest development under the Commercial and industrial a Statement by Common Interest Development uses see instructions on the reverse side of | STATE  STATE  er the Davis-Still Common Intelelopment Associate fithis form. | ZIP CODE  ZIP CODE  Inling Common Interest rest Development Act, iation (Form SI-CID) as |  |  |  |

#### **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

2019

"Open to Public Inspection

For the 2019 Calendar year, or tax year beginning 2019-01-01 and ending 2019-12-31

B Check if available Terminated for Business Gross receipts are normally \$50,000 or less C Name of Organization: CALIFORNIA ASSOCIATION OF BOND OVERSIGHT COMMITTEES D Employee Identification Number 84-3416221

121 Ash Court, Hercules, CA,

US, 94547

E Website:

F Name of Principal Officer: Anton Jungherr

121 Ash Court Hercules, CA

US#94547

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 of 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.

STATE OF CALIFORNIA (Rev. 09/2017)

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

TREET ADDRESS: 300 I Street Sacramento, CA 95814 (916) 210-6400

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

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-306, 309, 311, and 312

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

PAGE 1 of 5 (For Registry Use Only)

DEPARTMENT OF JUSTICE

| www.oeg.ca.gov/charities   | 23703;              | Government Code section 12586.1. IRS exte   | ensions will b   | be honored.                           |          |                                       |  |
|--|---------------------|---|--|---------------------------------------|----------|---------------------------------------|--|
| Name of Organization   | TON OF BON          | D OVERSIGHT COMMITTEES  | Check if:  | nge of address                        |          |                                       |  |
| NONE List all DBAs and names the organization uses or has used                                 |                     |   | Amended report   |                                       |          |                                       |  |
|  | janization uses of  | nas useu  |  |                                       |          |                                       |  |
| 121 ASH COURT Address (Number and Street) HERCULES, CA 94547 City or Town, State, and ZIP Code |                     |   | State Charity Registration Number CT0267634  Corporation or Organization No. 4319346 |                                       |          |                                       |  |
|  |                     |   |  |                                       |          |                                       |  |
| Telephone Number   |                     | -mail Address   | Federal  | Employer ID No. 843416221             |          |                                       |  |
| ANNUAL   | REGISTRATION        | RENEWAL FEE SCHEDULE (11 Cal. C<br>Make Check Payable to Departme                         |  |                                       |          |                                       |  |
| Gross Annual Revenue   | Fee                 | Gross Annual Revenue  | Fee  | Gross Annual Revenue                  |          | <u>Fee</u>                            |  |
| Less than \$25,000<br>Between \$25,000 and \$100,00  | 0<br>0 \$25         | Between \$100,001 and \$250,000<br>Between \$250,001 and \$1 million.                     |  |                                       |          |                                       |  |
| PART A - ACTIVITIES  |                     |   |  |                                       |          |                                       |  |
| For your most recen  | full accounting     | period (beginning 01 / 01 / 2019  | ending   | 12 / 31 / 2019 ) list:                |          | a C                                   |  |
| Gross Annual Revenue \$  | 5800                | Noncash Contributions \$  | 0  | Total Assets \$ 50                    | 46       |                                       |  |
| Progr  | am Expenses \$      | 754 Total   | Expenses   | * 754                                 |          | ,                                     |  |
| PART B - STATEMENTS REGA   | ARDING ORGANI       | ZATION DURING THE PERIOD OF TH  | S REPOR  | τ                                     |          |                                       |  |
|  |                     | ou answer "yes" to any of the question<br>for each "yes" response. Please revi            |  |                                       | · Yes    | No                                    |  |
|  |                     | ontracts, loans, leases or other financial<br>tly or with an entity in which any such off |  |                                       |          | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |  |
|  |                     | eft, embezziement, diversion or misuse o  |  |                                       |          | -                                     |  |
| 3. During this reporting period,   | were any organiz    | ration funds used to pay any penalty, fine  | or judgme  | ent?                                  |          | ~                                     |  |
| During this reporting period,<br>coventurer used?  | were the services   | s of a commercial fundraiser, fundraising   | counsel fo   | or charitable purposes, or commercial |          | v                                     |  |
| 5. During this reporting period,   | did the organizat   | ion receive any governmental funding?   |  |                                       |          |                                       |  |
| 6. During this reporting period,   | did the organizat   | ion hold a raffle for charitable purposes?  |  |                                       |          | ~                                     |  |
| 7. Does the organization cond  | uct a vehicle dona  | ation program?  |  |                                       | · ·      | ~                                     |  |
| <ol> <li>Did the organization conduction generally accepted account</li> </ol>                 |                     | audit and prepare audited financial state<br>his reporting period?                        | ments in a   | ccordance with                        |          | ~                                     |  |
| 9. At the end of this reporting p  | period, did the org | anization hold restricted net assets, while   | e reporting  | negative unrestricted net assets?     |          | "                                     |  |
|  |                     | xamined this report, including accomp<br>e, and I am authorized to sign.                  | oanying do   | ocuments, and to the best of my know  | viedge a | and                                   |  |
| Q a lead   | ln                  | Anton Jungherr  |  | Treasurer                             | 4.2      | 24.20                                 |  |
| Signature of Authorize   | d Agent             | Printed Name  |  | Title                                 | D        | ate                                   |  |



199N e-Postcard

# Confirmation

Print this page for your records. The Confirmation Number below is proof that you successfully filed your 199N e-Postcard.

We received your 199N e-Postcard on 4/24/2020 6:05:46 PM.

Confirmation Number: 431934611500

**Entity ID:** 

4319346

**Entity Name:** 

CALIFORNIA ASSOCIATION OF BOND OVERSIGHT COMMITTEES

# **Account Period Information**

**Account Period Beginning:** 

1/1/2019

**Account Period Ending:** 

12/31/2019

This is 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: \$5800** 

This is not an amended return.

An IRS Form 1023/1024 is not pending.

# **Entity Information**

FEIN:

843416221

**Doing Business As:** 

Website Address:

# **Entity's Mailing Address**

121 Ash Court Anton Jungherr Hercules CA 94547

# **Principal Officer's Information**

Anton Jungherr 121 Ash Court Anton Jungherr Hercules CA 94547

# **Contact Information**

Name:

**Anton Jungherr** 

Phone:

5106977212

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.

Print

Log Out

Copyright © 2020 State of California | Privacy Notice