PLEASANT VALLEY RECREATION & PARK DISTRICT
COMMUNITY SERVICE ORGANIZATION
ANNUAL UPDATE FORM

NAME OF ORGANIZATION: CYBA

OFFICERS	**NAME**	**EMAIL**	**ADDRESS**	**PHONE**
President	Chair - Brian Roberts - chair@cybaonline.org			
Vice President	Dir of Facilities Tammy Hall-Johnson - facilities@cybaonline.org			
Treasurer	Nick Richey - treasure@cybaonline.org			
Secretary	Traci Simandle - secretary@cybaonline.org			

Number of Participants last year: Primary season: 520 Secondary Season: _____
Projected number of participants in upcoming year: Primary season: 620 Secondary Season: _____

What day and time are Board Meetings held? Day: Wed Time: 6:30
Address where Board Meetings are held? PV East
Are Board Members elected or appointed? Elected: X Appointed: _____
When are new Board Members elected? Month: April
When are new Board Members installed? Month: May

Organization must attach a copy of current By-Laws and IRS Form 990 when submitting this form

Does organization have a snack bar or serve food? No
If yes, type of permit on file and expiration date: _____

Changes Organization has made from previous year:
Our board has completely shifted in the last year. We have new members that are working to expand our program offerings.

Please provide any comments for the PVRPD Board of Directors:

Please complete and return the Annual Update, By-Laws and IRS Form 990 to:

Nicole Lousen
Recreation Services Manager
1605 E. Burnley Street
Camarillo, CA 93010

nlousen@pvrpd.org

Phone: (805) 482-1996 x 107

Submitted By: Tammy Hall-Johnson Signature: Tammy Hall

BY-LAWS

Camarillo Youth Basketball Association

2024

(Adopted December 4, 2024)

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INTRODUCTION

The CYBA Constitution declares the organizational objective as:

> *"… to firmly implant in the youth of the community the ideals of good sportsmanship, honesty, loyalty, courage integrity, respect, and confidence, so that they may be better, stronger, and happier youth who will grow to be healthy, self-reliant adults. The attainment of exceptional skill or the winning of games shall be secondary. The molding of future responsible adults shall be of prime importance".*

The Constitution additionally outlines the governing structure for the organization including definition of Executive Board officers and other Board positions. It also directs that the rules and regulations for program operation be documented in the "By-Laws".

This document is the official adopted CYBA By-Laws.

ARTICLE I GENERAL INFORMATION

1. Program Structure.

The CYBA consists of a Boys and Girls Division. The Boys Division consists of teams for school grades 3 through High School. The Girls teams consist of school grades 3 through 8th. Unless otherwise noted, the rules for both Divisions are the same.

1.1 Membership

Players living outside of the CYBA Boundaries (as defined in the CYBA Constitution - Article III) are allowed to register and play in the CYBA. However, the number of such players is limited to 15% of the entire membership unless a temporary, single season waiver is approved by the Executive Board.

1.2 Program Schedule

The CYBA Board meets monthly for the entire year, with the only exception being the month of July which is normally a "dark" month. In general, CYBA operates using the following schedule:

- Registration: August 1st through September 15th
- Skill Assessments occur sometime between October 10th and October 20th
- Team Selection November 10th through November 24th
- Practice Begins Last week of November or 1st week of December
- Regular Season 1st or 2nd weekend after Jan 1st through the middle of March

1.3 Safe Haven Screening.

All Board Members (Executive, Committees and League Commissioners) as well as coaches, assistant coaches, referees and other League volunteers who have direct interaction with the players must submit and pass a background screening check.

The Safe Haven Chairperson monitors the results of the background checks and notifies the Executive Board and League Commissioner (if appropriate) of any volunteer that fails to pass the check.

A team is not allowed to practice and is not given any gym time by their League Commissioner until the Commissioner is notified of the team's coaches have submitted and passed the background check.

The Commissioner is responsible for ensuring that only those coaches and assistant coaches that have cleared the background check are on the bench during games. Coaches that fail the background check are relieved of their coaching duties and are replaced by a qualified (background checked) assistant.

The CYBA pays the Background Check fees for all Board (Executive, Committee and League Commissioner) volunteers. Fees are also paid for one (1) head coach per team and one (1) assistant coach per team. Additional assistant coaches must reimburse CYBA for their background check fees.

1.4 Concussion Protocol Certification.

All Board Members (Executive, Committees and League Commissioners) as well as coaches, assistant coaches, referees and other League volunteers who have direct interaction with the players must participate in a Concussion Protocol education program. Such program is identified by the Board and includes a certificate of completion which must be submitted to a designated Board representative.

1.5 Sexual Abuse and Misconduct Prevention Policy

All Board Members (Executive, Committees and League Commissioners) as well as coaches, assistant coaches, referees and other League volunteers who have direct interaction with the players must acknowledge receipt and understanding of the CYBA Sexual Abuse and Misconduct Prevention Policy. The written policy is provided to each volunteer and is included as Appendix A in these By-Laws.

2. League Composition.

Leagues within each Division are organized based on the player's school grade. Player enrollment, gym availability and volunteer participation are key factors in determining the number of teams fielded each season.

2.1 Program Groupings.

Leagues are structured by school grade as follows:

3rd grade boys	
4th grade boys	3rd, 4th, and 5th grade girls ("Junior Girls")
5th grade boys	6th, 7th, and 8th grade girls ("Senior Girls")
6th grade boys	
7th grade boys	
8th grade boys	
High School Boys	

Notes:

1. 3rd grade boys and girls must be 8 years of age or older by January 1st of the calendar year in which the actual games are played and must be classified as a 3rd grade school student (practices usually start in December, games begin in January).
2. A high school freshman, 13 years old or less by January 1st of the calendar year in which the actual games are played may petition to play in the 8th grade boy's or girl's league.
3. The Board may modify the groups from time to time based on the number of players that have signed up to allow for fair competition within the leagues.
4. Gym time availability may limit the total number of registrations that are accepted. At that point, prospective registrants are placed on a waiting list.
5. Players are required to play in the league that represents their school grade as of January 1st of the calendar year in which the actual games are played. Specifically, players are **not allowed** to "play-up" into a league beyond their school grade. Violation of the "no play-up" rule results in the player being ineligible for the following CYBA season.

By extension, the "no play-up" rule means that no player may play in the same CYBA league more than once, as doing so means that the player was in violation of the "no play-up" rule during their previous CYBA season in that league. (see note below)

Note: For multiple grade leagues (HS Boys, SR Girls, JR Girls) this means that players are restricted to playing in that league one time for each school grade represented within the league.

If a player has been discovered to have played "down" to a grade below their school grade that player will be required to play in their school grade league, skipping over any grade leagues between where they last played and their current school grade league.

2.2 Number and Size of Teams.

The target number of teams for each league is eight (8) with a desired minimum of 8 players and a maximum of 10 players per team. Teams of less than 8 players are discouraged as the likelihood of forfeitures due to too few players is high. If enrollment does not fulfill an 8-team league of 8 players, 6 (and even 4) team leagues are acceptable. Although 8 players per team is desired, leagues with smaller sized teams are allowed.

- All leagues must have an even number of teams to prevent "Bye" weeks in the schedule.
- All teams in a specific league are created with an equal number of players. This means that only the number of waitlisted players (players that registered late or after 80 players had already registered) required to make an evenly populated set of teams are initially moved off the waiting list.
- If an uneven number of registered players exists and there are none on the waiting list, players may be recruited to register before the team selection takes place.
- Same sized teams are critically important so as not to give any "short staffed" team an unfair advantage under the CYBA playing time requirements described in the "CYBA Rules of Play" booklet.

2.2.1 <u>Game Length</u>

To ensure equivalent playing time for all players irrespective of team size each league plays either 4 or 5 period games depending on the size of the teams in the League. All leagues with team size of 9 or 10 players play 5 period games. All leagues with 8 or fewer players per team play 4 period games. (The exception is High School Boys who use CIF rules and always play 4 period games).

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2.3 Games and Practice Schedules.

"Regular" season games are scheduled on Saturdays. Post-season tournament play is double elimination and is scheduled on weeknights and Saturdays. Whenever possible, the schedule is set such that a League plays all of their games in the same gym. Practice schedules are determined by the available gym time with the earliest times normally being assigned to the younger teams. Every reasonable attempt is made to provide a minimum of one-hour practice in a gym for each team per week.

2.3.1 <u>Maximum Practice Time</u>

No team may meet for practice more than twice (2 times) per week (Monday through Friday) nor may they exceed 2 ½ total practice hours per week. The 2 ½ hour practice time limit **does not include** weekend "game" time. During the pre-season (before any regular season games are played), teams may meet twice and practice a maximum of 2 ½ hours during the week (Monday through Friday) plus an additional 90 minutes [1 ½ hours of "game" time] on the weekend. Once the regular season starts, teams are limited to 2 practice sessions and 2 ½ hours of practice per week.

2.4 League Play and Post-season Tournaments.

Each league plays 8 regular season games. The League Commissioner is responsible for developing and publishing a regular season game schedule. At the conclusion of the regular

season, a post season tournament is held. The team standings at the conclusion of the regular season are used to determine the seeding for tournament play.

The Program Director and Facilities Director are responsible for obtaining tournament gym time and providing each league commissioner with a tournament schedule. Wherever possible, teams play their playoff games in the same gym as their regular season games. Playoff games are played on weeknights and weekends over a two-week period at the conclusion of the Regular season. All available weeknight gym time is used to accommodate the tournament schedule. No gym time is provided for team practice during the playoffs.

2.4.1 Regular Season Scheduling

A League can opt to play the first game of the Regular season as a "practice" game. This determination should be made by the League Commissioner in conjunction with the league coaches **prior to any games being played**. This option is often useful in the younger leagues where this is the first experience with "organized" basketball (coaches, time keeping, scoreboard, referees etc.). For an 8-team league playing an 8-week schedule this allows all teams to play each other exactly one time for playoff seeding.

If a league chooses NOT to have a practice game, then the 8th week of the season is played as a "positioning" week. In this scenario, the 1st place team plays the 2nd place team, 3rd plays 4th, 5th plays 6th, and 7th plays 8th to determine final playoff seeding. This option gives all teams a chance to play a team of similar ability (this is especially good for the weaker teams who will have the toughest schedule once the playoffs start).

The preferred schedule for 6-team Leagues is to play the first game as a "practice" game. Once everyone has played everyone one time, the schedule simply repeats from the first week match-ups. (This means everyone plays each other twice prior to the 8th week of the season). The 8th week is then played as a positioning week (regardless of whether the first game was a practice game or not).

2.5 Selection of All Stars.

Each league selects their all-star Players based on performance, team spirit, and individual skill. The CYBA recognizes each All-Star player via a special award (medal, shirt, etc.).

2.5.1 All-Star Selection Procedures

To ensure fair All-Star representation, the following guidelines have been adopted for the selection. The intent is to ensure that the All-Star process recognizes those most deserving of the "All-Star" selection, while not over selecting and thus including players that are not quite at all-star caliber.

The number of All-Stars selected by each league varies and depends on the number of teams in the league and on the number of players on each team. In general, the guidelines ensure that 25 percent (one quarter) of the players in any league qualify for All-Stars. The breakdown is as follows:

For 8 team leagues:

10 players per team – (20 total All-stars)
    2 players from each team, plus up to 4 "at large" selections
9 players per team – (18 total All-stars)
    2 players from each team, plus up to 2 "at large" selections
8 players per team – (16 total All-stars)
    2 players from each team (no "at large")

For 6 team leagues:

10 players per team – (16 total All-stars)
2 players from each team, plus up to 4 “at large” selections
9 players per team – (14 total All-stars)
2 players from each team, plus up to 2 “at large” selections
8 players per team – (14 total All-stars)
2 players from each team, plus up to 2 “at large” selections

How to select the All-Stars

Coaches can use whatever method they choose to select the 2 all-stars from their team. Some coaches let the team players vote (with the coach getting the final decision). Other coaches do the selection themselves with input from their assistants.

All-Star selections must be submitted to the League Commissioner prior to that League’s end-of-season player ranking meeting. The all-star selections for each team **must be known** at the time of the end-of-season meeting.

“At Large” Selections

If “At Large” selections are indicated for a league (using the above guidelines), then these selections are made by the league’s coaches & commissioner at the end-of-season player ranking meeting. Coaches (and Commissioner) nominate players that they feel are deserving of All-Star recognition (from their own or any team in the league). Once all nominations are placed, each coach (and Commissioner) “votes” by ranking the nominees from 1st to last. Players earn varying number of points for each ranking position (6 points for 1st, 5 for 2nd, ……1 for 6th, 0 points for lower than 6th place). All points are totaled and those with the highest number become the “at large” selections.

2.5.2 All-Star recognition

The CYBA provides some type of recognition award (usually T-Shirts) to those players selected as all-stars.

It is up to each league to determine if they want to have an all-star game or other type of recognition event. If the league decides to have an all-star game or other type of event that requires a gym, the commissioner must notify the Director of Programs of these plans by the end of the regular season.

Referees and two hours of Gym time on “All-Star” Saturday (the Saturday immediately following “Championship Saturday”) are provided to any league that plans on hosting an all-star event and/or game.

The CYBA does not provide any additional funding to a League for their All-star event. If the League intends to have skills challenges (i.e. 3-point shooting contest) and wants to recognize the winners with some small token, the League is responsible for finding their own funding (often via donations from the all-star participants).

2.5.3 All-Star Games

For those leagues that have elected to hold an all-star game as part of their recognition program, each All-Star squad should consist of the following teams (based upon **REGULAR SEASON** standings):

Squad 1: Teams Seeded 1st, 4th, 5th, 8th
Squad 2: Teams Seeded 2nd, 3rd, 6th, 7th

The coaches of the 1st and 2nd seeded teams have the first option at coaching the two all-star squads. Should either coach decline the opportunity, the job should be offered to the coach of the next highest seeded team within the squad.

2.5.4 Substitute Players

Only the players selected using the above guidelines are considered "All-Stars". If one of the selected players is unable to participate in the all-star event, and the League Commissioner feels that the absence needs to be filled in order to ensure enough participants, a substitute player can be invited to fill in. A substitute player is **not an "all-star"** and does not receive the all-star recognition T-shirt. (They can wear the shirt if necessary for an all-star game, but the shirt should then be held by the Commissioner for eventual delivery to the selected all-star player).

2.6 The Sportsmanship Award

The Sportsmanship award is generally selected by the coach and his assistants. It is intended to recognize the player on the team that exhibits exceptional "sportsmanship" qualities. These include team spirit, positive attitude, helping other teammates, giving 100 percent etc. It does not necessarily have to be one of the best players on the team.

The winner of the sportsmanship award receives a plaque with their name engraved on it. It is presented to them at the league All-Star event. The sportsmanship award winner's name must be submitted no later than the league's end-of-season player evaluation meeting. (This is to allow enough time to get the Sportsmanship awards engraved).

ARTICLE II RULES OF PLAY

1. CYBA General Rules

The League Commissioner is the primary authority in ensuring that the CYBA "Rules of Play" are properly applied. Generally, any protest on the application of the rules must begin with notification to the Commissioner. Depending on the nature of the protest, resolution may be immediate via the Commissioner or the event may be escalated to the Program Director and / or the CYBA "Incident Committee" (the "Incident Committee" is appointed by the Board prior to the start of each season in compliance with the procedures outlined in the CYBA Constitution).

1.1 Unsportsmanlike Technical Foul Policy

1.1.1 General Policy

This policy mandates that any coach or player that receives two "unsportsmanlike" technical fouls over the course of the season is subject to an automatic one game suspension. Each technical received after the second results in another one game suspension.

For purposes of this policy, any "personal foul" called by the referee and deemed by the referee to be "flagrant" in nature (not a basketball play and / or recklessly aggressive) shall be automatically upgraded to an "unsportsmanlike" technical foul and treated accordingly (even if the referee did not specifically call a technical foul).

1.1.2 Disqualification:

The Commissioners keep track of all Unsportsmanlike technical fouls that are called during the season. The information is kept in their League Commissioner book and is present at every game. A player or coach that receives their second or subsequent technical foul is immediately disqualified from the current game and must sit out the next game as well. The technical foul count is cumulative for the entire CYBA season (regular and playoffs) – it does not get reset when playoffs start.

Any Coach or Player that receives 3 “qualifying” technical fouls (see 1.14 below) during the season (combined “regular season” and playoff games are considered a “season”) is automatically disqualified from participating in their league’s All-Star event.

1.1.3 Suspension

In order to count as a “suspension”, the player must attend the game and sit on the bench with their team. Simply not showing up at the game does not constitute fulfillment of the suspension. Suspended coaches are not allowed to attend the game or be present at the gymnasium before or after the game. A Safe Haven approved assistant coach (or other parent) must sit on the bench and run the team during the game.

1.1.4 Qualifying Technical Fouls

Only “personal” technical fouls (technical fouls called specifically against a player or coach) are counted for purposes of this policy. This includes “flagrant” personal fouls or other unsportsmanlike conduct calls. It does not include illegal defense, press warnings, delay of game, too many players on the court or other procedural technical fouls which are called against a team.

2. CYBA Game Rules.

The Director of Rules/Referees is responsible for developing an annual booklet titled the "CYBA - Rules of Play" The rules regulating play are the "Official High School Basketball Rules" except as modified by the CYBA Booklet. This booklet is edited each year and adopted by the CYBA Board prior to the start of each season.

The “Rules of Play” booklet outline CYBA specific modifications (such as type of defense that can be played, player substitution rules, playing time requirements, etc.) that are in effect for the current season.

2.1 Game Protests

The judgment and interpretation by the referee shall be final. No protest shall be allowed for reasons of questioning a judgment or playing rule interpretation by a referee (even if it is later determined that such determination was in error). It is not the responsibility of the referees to enforce playing time requirements or player eligibility rules of CYBA (which are documented in the “CYBA – Rules of Play” booklet described above). These rules are administered by the League Commissioner. If a coach feels that the other team violated the playing time requirements or player eligibility rules of the "CYBA -Rules of Play", he must first attempt to resolve the matter with the League Commissioner on the scene. If the Coach is not satisfied with the decision of the League Commissioner, he may appeal the decision of the League Commissioner to the CYBA Incident Committee by following these procedures:

a. Appeals to the Incident Committee for game protests must be made by the team head coach and must be in writing. The appeal must specifically detail what decision the Coach is appealing and what recourse is requested.

b. Appeals must be accompanied by a check payable to CYBA in amount $10.00. If the appeal is denied, the $10.00 will be deposited in the CYBA general treasury. If the appeal is approved, the deposit will be returned.

c. Game protest appeals must be made within 72 hours of the end of the game.

The Incident Committee shall endeavor to meet and decide all protests within 72 hours. At their discretion, the Incident Committee may hear testimony or review written statements from other involved parties (Coaches, League Commissioners, referees or other witnesses). The Committee may also simply make a decision based on review of the written protest and the "CYBA - Rules of Play". The decision of the Incident Committee is determined by a majority of the members present, and their decision shall be final in all matters involving game protests.

ARTICLE III LEAGUE COMMISSIONERS

1. Duties and responsibilities

As outlined in the CYBA Constitution, Intramural League Commissioners are appointed to the position by the CYBA Executive Board and become members of the General Board. No league can be formed or operated without a league Commissioner.

If, by a deadline determined by the Board, a league has not had a qualified candidate volunteer to Commission, the Board, at its discretion, may cancel the league for the current season. All registered participants will be given a full refund in the event that a League is cancelled.

League Commissioners are members of the CYBA Board and report to the Director of Programs. League Commissioners in the Intramural Program may not coach in their respective league. Their duties and responsibilities include:

a) Familiarizing themselves with the CYBA By-Laws and Playing Rules.

b) Conducting their league operation in accordance with the By-Laws.

c) Reviewing all head coach applicants and compiling a list of recommended head coaches. This list must be provided to the Program Director for CYBA Board review and approval.

d) Approving team alternate and assistant coaches for their league.

e) Conducting meetings with the team coaches as may be required to keep the coaches apprised of league operational issues and scheduled events.

f) Working with the Save Haven Committee to ensure that all coaches and assistant coaches have completed and passed their background check per the guidelines outlined in the By-Laws.

g) Participating in the team selection process by working with the Program Director and Player Evaluations and Teams committee chairperson in accordance with the By-Laws.

h) Obtaining and maintaining a current roster of teams.

i) Providing each coach a copy of their team roster

j) Obtaining a practice time gym schedule from the Program Director and assigning specific teams to practice days and times.

k) Ensuring that all teams have a parent meeting prior to their first game.

l) If required, initiate disciplinary action or dismissal of coaches, players or spectators in accordance with the provisions of the By-laws.

m) Developing and publishing game schedules for their respective leagues using the guidelines outlined in the By-Laws.

n) Distributing CYBA correspondence as may be periodically required.

o) Monitoring league games or ensuring that a responsible and qualified (background checked) alternate is available to monitor games in their absence.

p) Ensuring that game referees are properly paid using the funds provided by the CYBA. Commissioners are responsible for managing the CYBA provided referee funds and must return any unused funds to the CYBA Treasurer at the end of the season. Referee funds cannot be used for any purpose other than paying referees for their services.

q) Collecting game results and submitting them to the Web Master by the Sunday following Saturday's games.

r) Distributing and collecting player evaluation forms within the requirements outlined in the By-Laws.

s) Ensuring that all collected evaluation forms are available at the end-of-season player evaluation meeting.

t) Ensuring that coaches are aware of, and attend, the end-of-season player evaluation meeting as outlined in the By-Laws.

u) Distributing coach evaluation forms to all parents and collecting completed forms prior to the end of the season.

ARTICLE IV TEAM COACHES

1. General Coaching Responsibilities

Coaches are expected to follow a basic set of guidelines and meet certain standards as outlined here.

1.1 Sportsmanship.
To instill in their players by example the principles of good sportsmanship. To emphasize to their players by their own conduct a respect for officials and opposing players.

1.2 Team Play.
To teach each youth the game of basketball and the meaning of playing together as a team unit.

1.3 Skill Development.
To the best of their ability, the coach shall develop the overall athletic skill of each player

1.4 Parent Involvement.
To coordinate parent volunteers to be scorekeepers and/or timekeepers, or to assist with any other team functions necessary for the efficient operation of the team.

1.5 Team Discipline.
To maintain good order and discipline for all players on the team at practices and games.

1.6 Schedules of Games and Practices.
To ensure that all parents are aware of all game and practice times and locations.

1.7 Use of Equipment and Facilities.
To maintain all CYBA equipment in their possession in a serviceable condition and to ensure that the facilities used by the team or spectators are not abused. Littering or damage of facilities by players or spectators during games or practices shall not be permitted. Any dangerous or damaged conditions of facilities should be reported to the League Commissioners immediately upon discovery.

1.8 Safety.
To ensure the safety and well being of all players

1.9 Coach Discipline.
It is important for the Team Coach to provide an example of sportsmanship and good behavior for his team. If in the opinion of the League Commissioner or other Board member, a coach or assistant is not behaving in a manner consistent with the objectives of CYBA, he/she may be subject to the following disciplinary actions.

1.9.1 Range of Disciplinary Actions.
Corrective actions may range from a simple conference with the appropriate League Commissioner up to suspension for one or several games or dismissal from the program. The action should be appropriate to the offense. Serious offenses may also be referred to civil authorities.

1.9.2 Procedures.

a. A minor infraction is usually handled by the League Commissioner who informs the Coach of the nature of his/her actions and provides them suggestions for improvement. The League Commissioner has authority to issue a verbal warning, a Letter of Caution, or up to a one game suspension. However, before a suspension is issued, the case should be reviewed with the Program Director for approval.

b. Repeat or more serious actions are called to the attention of the Incident Committee. The Incident Committee makes every reasonable attempt to review and make a decision on the matter within 72 hours. The League Commissioner, coach or assistant coach, and any other witnesses may be asked to appear before the Incident Committee to resolve the situation. Actions may be in the form of no action necessary, written letter of caution, further suspension from games or referral to the Executive Board. Voting by the Incident Committee is made in a closed session after all evidence and witnesses have had an opportunity to present their case. The final decision is determined by majority vote.

c. A coach or assistant coach who shows no indication of willingness to resolve the problem or who has committed a serious offense may be dismissed from the program. Recommendations for dismissal must be referred to the Executive Board. A quorum of the Executive Board is required to decide the issue. The Executive Board attempts to meet within 72 hours of referral. The Board reviews the situation, and at their discretion may hear the Commissioner, witnesses and the Coach or assistant coach. The Executive Board then meets in closed session to decide the issue. Dismissal requires a majority vote of the Executive Board members present. The decision of the Executive Board is final.

d. Appeals.

   A coach or assistant coach who feels he/she has been unfairly disciplined by the League Commissioner may appeal to the Incident Committee. Appeals from the decision of the Incident Committee may be made to the Executive Board. No appeal may be made to the Executive Board, until the Incident Committee has reviewed the situation. Appeal to the Incident Committee in discipline cases may be made orally or in writing.

   1) Appeals to the Executive Board must be made in writing. The appeal must specifically detail exactly what decision the Coach is appealing and what recourse is requested.

   2) Appeals must be accompanied by a check payable to CYBA in amount $10.00. If the appeal is denied, the $10.00 will be deposited in the CYBA general treasury. If the appeal is approved, the deposit will be returned.

   3) Appeals must be made within 72 hours of the decision of the Commissioner or the Incident Committee.

1.10 Removal by Referee.

If directed by a referee to leave the gym, a coach must immediately leave the gym and will not attempt to instruct or coach the team for the remainder of the game. Any referee who directs the removal of a coach from a game will immediately make a report to the Director of Rules and Referees who will consult with the appropriate League Commissioner. Depending on the circumstances that resulted in the referee's decision, the League Commissioner may determine that additional disciplinary action be initiated, in accordance with paragraph 1.9 above.

2. Team Coaches.

League coaches serve for a single season only. Each league must identify its coaching candidates and receive Board approval prior to team selection. Only “Head” coaches are initially identified and approved. Head coaches must unconditionally volunteer their services. Other than coaching their own child (which is automatic), coaches cannot offer their services under conditions such as requesting specific players or assistant coaches.

3.1 Selection Criteria.

A list of applicants for the position of "Head" Coach is prepared by the Program Director working with the League Commissioners. The CYBA Board reviews the applicants based on the following criteria:

a. Applicant's general basketball knowledge
b. Applicant's ability to coach and supervise young people.
c. Applicant's ability to interface tactfully with player's parents, other coaches and CBA Board members.
d. Applicant's past performance as a CYBA coach
e. Applicants must be at least 18 years of age and no longer attending High School unless otherwise approved by the Board
f. It is not required that a Head Coach have a son / daughter playing in the League but selection priority is given to League parents that volunteer to coach over those outside volunteers that are simply looking for an opportunity to coach a team

2.2 Appointments.

The CYBA Board shall consider the recommendations of the League Commissione*r* when making final appointments. Approval by a majority of the Board is required to approve head coach selections. The League Commissioners may, at their discretion, develop procedures for the approval of assistant coaches subject to the approval of the Program Director. Assistant coaches are expected to abide by the rules of CYBA. All coaches and assistant coaches are required to pass a CYBA background check which is monitored by the CYBA Safe Haven Committee.

2.3 Number of Coaches

Each team has a single head coach who may use as many parent volunteers as assistant coaches (subject to CYBA background checks) as they desire. However, it is the responsibility of the coach to identify all of their assistant coaches to their League Commissioner and to ensure that all assistants have completed and passed the CYBA background check.

During games, no more than three (3) coaches (head coach and two (2) assistants) may be on the bench with the players. At any given time, only one of those coaches may be standing to give directions to their players. Only verified coaches / assistant coaches are allowed on the bench and any coach on the bench must be wearing their official CYBA coach shirt and that shirt must be visible (not covered by other clothing). No other team personnel (additional assistant coaches, team parents, etc.) may be on the player side of the gym during the game (this does not include the volunteer "official scorekeeper" who sits at the score table and also does not apply to gyms where the only spectator seating is on the player side of the gym).

Within a specific league, a person may only work as an assistant coach for a single team. In the event that a volunteer has multiple player interests, they must limit their involvement to a single team and cannot act as an assistant to any other team.

The CYBA pays for background checks and official coach shirts for two (2) volunteers. Each additional assistant coach (or the team) must reimburse CYBA for their background check and coach shirt.

2.4 Other Responsibilities.

In addition to the "General" responsibilities described in section 1 (above) of this Article, Intramural program coaches also have the following responsibilities:

2.4.1 Player Evaluations.

Coaches are required to evaluate based on game skill, sportsmanship, and teamwork. Evaluations are used for the sole purpose of making balanced teams for the following season.

ARTICLE V PLAYER EVALUATION AND TEAM SELECTION

1. General.

All players that meet the CYBA registration requirements are guaranteed the opportunity to play basketball regardless of skill level. Every attempt is made to constitute teams such that they are as equal as possible in skill ratings, size and other factors.

1.1 Skills Ratings

Player ratings are required to form balanced teams. At the end of each season all players are rated by their league. These ratings are used for creating teams the following season. Players that did not participate in the prior season are given "pre-season" skill assessments. These assessments are only done for players that did not participate in the previous season.

1.1.1 End of Season Player Rankings

The League Commissioner provides player **evaluation forms** to each coach sometime during the last 2 weeks of the regular season. Coaches must complete the evaluation form and return it to their League Commissioner before their league's Player Evaluation meeting.

A team that does not provide the Player Evaluation form to their Commissioner per the above rule, and does not have the form available at their evaluation meeting, is **charged with a forfeit** of their first playoff game. (The game may still be played for "practice" but the outcome is pre-determined as a loss for the non compliant team).

The League Commissioner is responsible for ensuring that all collected forms are available at the Player Evaluation meeting that occurs during the first week of playoffs.

Player ("end-of-season") evaluation meetings are held during the first week of Tournament play. Each League meets on a night that they do not play a tournament game. Generally, there are 4 or 5 teams at each meeting. The purpose of these evaluations is solely for the creation of fair and balanced teams next season.

The Player Evaluation Committee Chairperson is responsible for scheduling the meeting and informing each League Commissioner of their scheduled date. During this meeting, the player evaluation forms that were collected from the coaches are used to help the coaches rank all players in the league.

It is required that each team in the League be represented by a Coach or assistant that is knowledgeable and comfortable doing a full league ranking. **A team that fails to send a qualified representative to the evaluation meeting will forfeit their next playoff game**.

It is not required that the League Commissioner attend this meeting. However, his presence is extremely beneficial in keeping the coaches focused and moving forward in the process. A Commissioner that does not attend the meeting must ensure that the Player Evaluation Forms collected from their coaches are delivered to the meeting.

1.1.2 Start of a New Season

At the start of a new season, players that were not rated during the previous season are required to participate in a pre-season skills evaluation. The Player Evaluation Committee Chair is responsible for scheduling one or more skills assessment dates for players that are new to the League.

1.2 Team Assignment Procedures.

The establishment of fair and balanced teams for each league is the priority of this process. This includes balancing both talent and size without bias or favoritism to any one individual. The process is accomplished using evaluation data and an automated selection program as described here.

1.2.1 Evaluation Data

a) First-time and players that did not play the previous season:

A pre-season skill assessment is required for all first-time players and any player that was not evaluated during the previous season (did not play the previous season). The skill assessment session is scheduled by the Player Evaluation Chairperson and all players requiring pre-season skill assessments are notified with the date and time of the session.

b) Returning Players

End-of-season player evaluations are used for returning players.

1.2.2 Honoring Convenience requests:

a) During registration, parents sometimes make special requests to be placed on a specific team or with another player for reasons of car-pooling, or other convenience factors. Sometimes a parent will volunteer to coach only if a specific player (other than his/her son/daughter) is on the team (perhaps for "assistant coach" purposes). These are all considered convenience requests. Since it is impossible to grant all such requests, the CYBA policy is that convenience requests **are not considered** during the selection process.

b) A special request for a son or daughter to NOT play for a specific coach is always honored. Additionally, a request to **NOT** play on a team with another specific player (perhaps due to previous conflicts) is also honored.

1.2.3 The Selection Process

The team selection process is primarily the responsibility of the Program Director and the Player Evaluations Committee chairperson. Final review assistance from each League Commissioner is also required. The intent of the process is to produce teams that are balanced in both talent and size. The general procedure is as follows:

a) The Program Director works with the League Commissioners to gather the following information:

1. List of coaches (these should have already been submitted and approved by the Board)
2. List of players that are known to have issues with certain coaches and/or other players (such information is kept in strictest confidence).
3. Information about siblings that DO NOT want to play on the same team. (By default siblings are always placed on the same team)

b) The Program Director obtains the previous season player evaluation scores and the pre-season skill assessments from the Player Evaluation Chairperson.

c) The Program Director applies an automated selection process that factors in player size, skill ratings (either pre-season or post-season), and the information provided by the League Commissioner to produce team rosters.

d) Rosters are tentatively "final" and are distributed to the League Commissioner for review and approval.

e) Prior to distribution to their coaches, a League Commissioner can request roster modifications where they believe it to correct a personality issue, team balance problem or other critical factor that was not accounted for. Such requests must be discussed and agreed upon by the Program Director who will make the required changes and re-issue the

team rosters. League Commissioners are **not** to include any of their coaches or other league participants in this review process.

f) League Commissioners should not distribute or discuss the rosters with any coaches or parents until the final version is received.

1.3 Vacancies.

A vacancy may be filled from the league waiting list if the League Commissioner and the Program Director feel that the competitive balance of the league would not be upset. If this cannot be reasonably done, the team involved may be required to play with the remaining players. Late registration fees (if applicable) are as determined by the Treasurer and/or the Executive Board. All youth participating in the CYBA program must be officially registered with the league PRIOR to participating in any practice or game.

ARTICLE VI PLAYER DISCIPLINE

1. Range of Discipline.

Because good discipline makes for good team morale, it is incumbent on the coach to maintain a high standard of behavior among members of the team. Any player who behaves in a manner not consistent with good sportsmanship or in the best interest of the team as a whole, is subject to appropriate disciplinary action ranging from a conference with the parents, suspension from a game or games, letter of caution, and ultimately dismissal from the program.

2 Procedures.

a. Minor behavior infractions should be resolved through a conference with the player's parents. The coach should use this approach first before proceeding with any stronger actions.

b. If this approach does not work or for more serious violations, the coach may bench a player for disciplinary reasons. He must obtain the concurrence of the League Commissioner, notify the parents of the player at least 24 hours in advance of the game, and notify the opposing coach before game time.

c. For flagrant fouls or misconduct during a game, a game referee may eject a player. If the team coach or the League Commissioner feels that such behavior merits suspension for the next game, the procedures of 2.b above are followed.

d. A League Commissioner may request an -Incident Committee review if he feels it is warranted due to the player's continued misbehavior or because of a particularly flagrant incident. Such review should be held within 72 hours, and may result in the issuance of a letter of caution to the player's parents, suspension for up to 3 games, or a recommendation to the Executive Board for dismissal.

e. Appeals. A player or parent who feels he/she has been unfairly disciplined by the Coach or the League Commissioner may appeal to the Incident Committee. Appeals from the decision of the Incident Committee may be made to the Executive Board. No appeal may be made to the Executive Board, until the Incident Committee has reviewed the situation.

1) Appeals to the Executive Board must be made in writing. The appeal must specifically detail exactly what decision the player or parent is appealing and what recourse is requested.

2) Appeals must be accompanied by a check payable to CYBA in amount $10.00. If the appeal is denied, the $10.00 will be deposited in the CYBA general treasury. If the appeal is approved, the deposit will be returned.

3) Appeals must be made within 72 hours of the decision of the coach, League Commissioner, or Incident Committee.

f. All recommendations for dismissal must be referred to the Executive Board. A quorum of the Executive Board is required to decide the issue. The Executive Board attempts to meet within 72 hours of referral. The Board reviews the situation, and at their discretion may hear the Commissioner, witnesses and the Coach or assistant coach. The Executive Board then meets in closed session to decide the issue. Dismissal requires a majority vote of the Executive Board members present. The decision of the Executive Board is final.

ARTICLE VII PARENTAL INVOLVEMENT AND CONDUCT

1. Responsibilities.

Registration of a youth in the CYBA brings a degree of responsibility with it. The program is team oriented which means that what affects a single player affects the entire team. We must rely on the responsibility of parents to support the objectives of CYBA, to encourage regular attendance at practices and games, and most importantly, to provide a positive and supportive role model for your child as he participates in CYBA events.

2. Expected Assistance.

CYBA is a parent supported organization and the parents of players are expected to assist in the conduct of its business. Assistance is required in the following areas.

2.1 Team Assistance.
Each team is required to supply a scorekeeper and/or a timekeeper for all games. Other areas of needed assistance are the Team Parent and Assistant Coaches.

2.2 League Assistance.
Running the CYBA program requires a multitude of volunteers to fill Executive Board, Committee, League Commissioners and coaching positions.

3. Conduct.

3.1 General.
The conduct of parents and spectators when in contact with the coaches, players and officials is expected to be that of a responsible adult. Problems between coaches and parents are handled via a meeting between parent and coach. If a further action is necessary, the coach arranges a meeting between himself, the parent and the League Commissioner.

3.2 Conduct of parents and spectators during games.
The abuse of referees and league officials is not tolerated at any time. It is completely inappropriate, particularly in youth sports. At the first incidence of offensive behavior, the Head Coach, League Commissioner, or any Executive Board member present asks the offending person to refrain from such conduct. Should he/she be unable or unwilling to control such behavior, the offending spectator (s) is asked to leave the gym. The League Commissioner, or Board Member present has authority to suspend the game at that point, declare a forfeit of the game, and if necessary, to call the police to escort the offending individual (s) off premises. A review of any such incident is made by the Incident Committee, normally within 72 hours. The Incident Committee may recommend that the parent/spectator be issued a formal letter of warning, or if the incident is serious enough that the matter be referred to the Executive Board for possible suspension of the parent or spectator from any further CYBA activities. If the incident involved physical assault or threatening of a referee or other league official, notification is made to civil authorities for potential criminal charges.

APPENDIX A

Sexual Abuse and Misconduct Prevention Policy

CYBA Sexual Abuse and Misconduct Prevention Policy

Camarillo Youth Basketball Association (CYBA) prohibits and does not tolerate sexual abuse or misconduct during any organization-related activity. CYBA provides procedures for volunteers, board members or any other victims of sexual abuse or misconduct to report such acts. Those reasonably suspected or believed to have committed sexual abuse or misconduct will be appropriately disciplined, up to and including termination of membership, as well as criminally prosecuted. No volunteer, board member or other person, regardless of his or her title or position has the authority to commit or allow sexual abuse or misconduct.

Definitions and Examples

The following definitions or examples of sexual abuse, misconduct or harassment, apply to all volunteers and other third parties.

Sexual abuse or misconduct may include, but is not limited to:

- Child sexual abuse – any sexual activity, involvement, or attempt of sexual contact with a person who is a minor (under 18 years old) where consent is not or cannot be given.
- Sexual activity with another who is legally incompetent or otherwise unable to give consent.
- Physical assaults or violence, such as rape, sexual battery, abuse, molestation, or any attempt to commit such acts.
- Unwanted and intentional physical conduct that is sexual in nature, such as touching, pinching, patting, brushing, massaging someone's neck or shoulders, and/or pulling against another's body or clothes.
- Material such as pornographic or sexually explicit images, posters, calendars, or objects.
- Unwelcome and inappropriate sexual activities, advances, comments, innuendoes, bullying, jokes, gestures, electronic communications or messages (e.g. email, text, social media, voicemail), exploitation, exposure, leering, stalking or invasion of sexual privacy.
- A sexually hostile environment characterized as comments or conduct that unreasonably interferes with one's ability to do their work or creates an intimidating, hostile, or offensive environment.

Reporting Procedure

Immediately report suspected sexual abuse or misconduct to any CYBA Executive Board Member. It is not required to directly confront the person who is the source of the report, question or complaint before notifying the CYBA Executive Board. CYBA will take every reasonable measure to ensure that those named in the complaint of misconduct, or are too closely associated with those involved in the complaint will not be part of any investigative team.

Anti-retaliation and False Allegations

CYBA prohibits retaliation made against any volunteer, board member, or other person who lodges a good faith complaint of sexual abuse or misconduct or who participates in any related investigation. Making knowingly false or malicious accusations of sexual abuse or misconduct can have serious consequences for those who are wrongly accused. CYBA prohibits making false or malicious sexual misconduct allegations, as well as deliberately providing false information during an investigation. Anyone who violates this rule is subject to disciplinary action, up to and including termination of membership and criminal prosecution.

Investigation and Follow-up

CYBA will take all allegations of sexual abuse or misconduct seriously and will promptly, thoroughly, and equitably investigate whether misconduct has taken place. The organization may utilize an outside third party to conduct an investigation of misconduct. CYBA will cooperate fully with any investigation conducted by law enforcement or other regulatory/protective services agencies. CYBA will make every reasonable effort to keep the matters involved in the allegation as confidential as possible while still allowing for a prompt and thorough investigation.

Reporting to Law Enforcement or Appropriate Child or Adult Protective Services

CYBA is committed to following the state and federal legal requirements for reporting allegations or incidents of sexual abuse or misconduct to appropriate law enforcement and child or adult protective services organizations. It is the policy of CYBA not to attempt to investigate or assess the validity or credibility of an allegation of sexual or physical abuse as a condition before reporting the allegation to proper law enforcement authorities or protective services organizations.

Supervision of Youth

To provide a safe environment for minors, CYBA strives that a minimum of two adult volunteers supervise or be in attendance with minors during organization-related activities where the minor's parent or guardian is not present. The purpose is to avoid one-on-one interactions between adults and minors that are not easily observable by others. No individual meetings with a minor must be held without the minor's parent/guardian present.

Acknowledgement Form:

Sexual Abuse and Misconduct Prevention Policy

I acknowledge that I received and read the Sexual Abuse and Misconduct Prevention Policy and/or had it explained to me. I understand that it is my responsibility to abide by all rules contained in the policy. I also understand how to report incidents of sexual abuse or misconduct as set forth in the policy, including retaliation against any volunteer exercising his or her rights under the policy.

I acknowledge that I will be alerted when changes and updates are made to the Sexual Abuse and Misconduct Policy and will be responsible for reading and complying with these updates.

_____ _____

Volunteer's Signature Date

_____

Printed Name

ADAM MOORE CPA
3 CALLE DE ARENA
RANCHO SANTA MARGARITA, CA 92688
949-690-5145

October 29, 2025

Camarillo Youth Basketball Association
330 N Lantana St Ste 28 PMB 602
Camarillo, CA 93010

Dear Nick:

Your 2024 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-TE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Your 2024 California Exempt Organization Annual Information Return will be electronically filed with the Franchise Tax Board upon receipt of a signed Form 8453-EO. No tax is payable with the filing of this return.

Enclosed is your California Registration/Renewal Fee Report to the Attorney General. The original should be signed at the bottom of page one. There is a fee due of $75 payable by October 15, 2025. Make the check or money order payable to "Department of Justice" and mail your California report on or before October 15, 2025 to:

REGISTRY OF CHARITIES AND FUNDRAISERS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

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Please be sure to call us if you have any questions.

Sincerely,

Adam Moore

Camarillo Youth Basketball Association **95-3675813**

	2024	2023	Diff
FORM 990-EZ REVENUE			
Program service revenue	114,380	100,987	13,393
Investment income	13	24	-11
Total revenue	114,393	101,011	13,382
EXPENSES			
Grants and similar amounts paid	11,945	0	11,945
Professional fees/pymt to contractors	320	315	5
Printing, publications, and postage	300	1,155	-855
Other expenses	112,872	98,306	14,566
Total expenses	125,437	99,776	25,661
NET ASSETS OR FUND BALANCES			
Excess or (deficit) for the year	-11,044	1,235	-12,279
Net assets/fund bal. at beg. of year	73,176	71,941	1,235
Net assets/fund bal. at end of year	62,132	73,176	-11,044

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Camarillo Youth Basketball Association 95-3675813

	2024	2023	Diff
RECEIPTS AND REVENUES			
Gross sales or receipts	114,393	101,011	13,382
Total gross receipts	114,393	101,011	13,382
Total costs	0	0	0
Total gross income	114,393	101,011	13,382
EXPENSES			
Total expenses	125,437	99,776	25,661
Excess receipts over expenses	-11,044	1,235	-12,279
FILING FEE			
Filing fee	0	0	0
Balance due	0	0	0

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Camarillo Youth Basketball Association 95-3675813

Forms needed for this return

Federal: 990-EZ, Sch A
California: 199, 8453-EO (199), e-file Instructions, RRF-1

Carryovers to 2025

None

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Camarillo Youth Basketball Association 95-3675813

The organization's Federal tax return is NOT FINISHED until you complete the following instructions.

Prior to transmission of the return

Form 990-EZ
The organization should review their Federal Return along with any accompanying schedules and statements.

Paperless e-file
The organization should read, sign and date the Form 8879-TE, IRS e-file Signature Authorization.

Even Return
No payment is required.

After transmission of the return

Receive acknowledgement of your e-file transmission status.
Within several hours, access the program and get your first acknowledgement (ACK) that the program has received your transmission file.

Access the program again after 24 and then 48 hours to receive your Federal ACKs.

Keep a signed copy of Form 8879-TE, IRS e-file Signature Authorization in your files for 3 years.

Do not mail:

Form 8879-TE IRS e-file Signature Authorization

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Camarillo Youth Basketball Association 95-3675813

The entity's 2024 California tax return is NOT FINISHED until you complete the following instructions.

Prior to transmission of the return

Form 199
The entity should review their 2024 California Exempt Income Tax Return along with any accompanying schedules and statements.

Form 8453-EO
The entity should review, sign and date Form 8453-EO prior to e-filing the return.

Even Return
No payment is required.

After transmission of the return

Receive acknowledgement of your e-file transmission status.
Within several hours, access ProConnect Tax Online and get your first acknowledgement (ACK) that ProConnect Tax Online has received your transmission file.

Access ProConnect Tax Online again after 24 and then 48 hours to receive your California acknowledgements.

Keep a signed copy of Form 8453-EO in your files for 4 years.

Do Not Mail:
Form 8453-EO

Franchise Tax Board, PO Box 942857, Sacramento CA 94257-0531

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Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2024, or fiscal year beginning 6/01, 2024, and ending 5/31, 20 2025

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879TE* for the latest information.

OMB No. 1545-0047

2024

Name of filer

Camarillo Youth Basketball Association

EIN or SSN

95-3675813

Name and title of officer or person subject to tax

Nick Richey Treasurer

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a **Form 990** check here	☐	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	
2a **Form 990-EZ** check here	☒	**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**	114,393.
3a **Form 1120-POL** check here	☐	**b Total tax** (Form 1120-POL, line 22)	**3b**	
4a **Form 990-PF** check here	☐	**b Tax based on investment income** (Form 990-PF, Part V, line 5)	**4b**	
5a **Form 8868** check here	☐	**b Balance due** (Form 8868, line 3c)	**5b**	
6a **Form 990-T** check here	☐	**b Total tax** (Form 990-T, Part III, line 4)	**6b**	
7a **Form 4720** check here	☐	**b Total tax** (Form 4720, Part III, line 1)	**7b**	
8a **Form 5227** check here	☐	**b FMV of assets at end of tax year** (Form 5227, Item D)	**8b**	
9a **Form 5330** check here	☐	**b Tax due** (Form 5330, Part II, line 19)	**9b**	
10a **Form 8038-CP** check here	☐	**b Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	**10b**	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

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PIN: check one box only

☒ I authorize Adam Moore CPA to enter my PIN 68323 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

30711522450

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Adam Moore Date _____

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form, as it may be made public.

Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 6/01 , 2024, and ending 5/31 , 2025

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

C
Camarillo Youth Basketball Association
330 N Lantana St Ste 28 PMB 602
Camarillo, CA 93010

D Employer identification number
95-3675813

E Telephone number
818 383-3977

F Group Exemption Number

G Accounting Method: ☐ Cash ☒ Accrual Other (specify):

H Check ☒ if the organization is **not** required to attach Schedule B (Form 990).

I **Website:** N/A

J **Tax-exempt status** (check only one) – ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other:

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file Form 990 instead of Form 990-EZ . . . . . $ 114,393.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I . . . . . ☒

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Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	114,380.
	3	Membership dues and assessments	3	
	4	Investment income	4	13.
	5a	Gross amount from sale of assets other than inventory — 5a		
	b	Less: cost or other basis and sales expenses — 5b		
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	a	Gross income from gaming (attach Schedule G if greater than $15,000) — 6a		
	b	Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000) — 6b		
	c	Less: direct expenses from gaming and fundraising events — 6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances — 7a		
	b	Less: cost of goods sold — 7b		
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	114,393.
Expenses	10	Grants and similar amounts paid (list in Schedule O) See Schedule O	10	11,945.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	320.
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	300.
	16	Other expenses (describe in Schedule O) See Schedule O	16	112,872.
	17	**Total expenses.** Add lines 10 through 16	17	125,437.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-11,044.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	73,176.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	62,132.

Part II Balance Sheets (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II. X

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	82,678.	22	63,854.
23	Land and buildings		23	
24	Other assets (describe in Schedule O) See Schedule O	855.	24	
25	**Total assets**	83,533.	25	63,854.
26	**Total liabilities** (describe in Schedule O) See Schedule O	10,357.	26	1,722.
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	73,176.	27	62,132.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III. X

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)

28 CYBA PROVIDES AN ATMOSPHERE OF SPORTSMANSHIP, TEAMWORK, AND FELLOWSHIP THROUGH AMATEUR YOUTH ATHLETIC ACTIVITIES.
(Grants $) If this amount includes foreign grants, check here ☐ **28a** 104,154.

29 SCOREBOARD SUPPORT FOR BOYS AND GIRLS CLUB THAT SUPPORTS CYBA ATHLETIC ACTIVITIES.
(Grants $ 11,945.) If this amount includes foreign grants, check here ☐ **29a** 11,945.

30
(Grants $) If this amount includes foreign grants, check here ☐ **30a**

31 Other program services (describe in Schedule O)
(Grants $) If this amount includes foreign grants, check here ☐ **31a**

32 **Total program service expenses** (add lines 28a through 31a) **32** 116,099.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Brian Roberts Chairman	1	0.	0.	0.
Nick Richey Treasurer	2	0.	0.	0.
Ramona Vasquez Secretary	1	0.	0.	0.
Tammy Johnson Director	3	0.	0.	0.
Holly Slater Director	2	0.	0.	0.

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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. See Sch O ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		X
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a 0.			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b 0.			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a 0.			
b	Gross receipts, included on line 9, for public use of club facilities 39b 0.			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: 0. ; section 4912: 0. ; section 4955: 0.			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 0.			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed: CA			

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42a The organization's books are in care of: Nick Richey Telephone no. 818 383-3977
Located at: 330 N Lantana St Ste 28 PMB 602 Camarillo CA ZIP + 4 93010

			Yes	No
b	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)? If "Yes," enter the name of the foreign country:	42b		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here ☐ N/A
and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		X

		Yes	No
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	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 ☐

		Yes	No
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	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		

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."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

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."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

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

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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

Nick Richey — Treasurer

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
Adam Moore	Adam Moore			P02050389

Firm's name Adam Moore CPA

Firm's address 3 Calle De Arena, Rancho Santa Margarita, CA 92688

Firm's EIN 47-1443736

Phone no. 949-690-5145

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form, as it may be made public.

Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 6/01 , 2024, and ending 5/31 , 2025

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

C
Camarillo Youth Basketball Association
330 N Lantana St Ste 28 PMB 602
Camarillo, CA 93010

D Employer identification number
95-3675813

E Telephone number
818 383-3977

F Group Exemption Number

G Accounting Method: ☐ Cash ☒ Accrual Other (specify):

H Check ☒ if the organization is **not** required to attach Schedule B (Form 990).

I **Website:** N/A

J **Tax-exempt status** (check only one) – ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other:

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file Form 990 instead of Form 990-EZ . . . . . $ 114,393.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I . . . . . ☒

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Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	114,380.
	3	Membership dues and assessments	3	
	4	Investment income	4	13.
	5a	Gross amount from sale of assets other than inventory — 5a		
	b	Less: cost or other basis and sales expenses — 5b		
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	a	Gross income from gaming (attach Schedule G if greater than $15,000) — 6a		
	b	Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000) — 6b		
	c	Less: direct expenses from gaming and fundraising events — 6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances — 7a		
	b	Less: cost of goods sold — 7b		
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	114,393.
Expenses	10	Grants and similar amounts paid (list in Schedule O) See Schedule O	10	11,945.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	320.
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	300.
	16	Other expenses (describe in Schedule O) See Schedule O	16	112,872.
	17	**Total expenses.** Add lines 10 through 16	17	125,437.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-11,044.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	73,176.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	62,132.

Part II Balance Sheets (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II. X

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	82,678.	22	63,854.
23	Land and buildings		23	
24	Other assets (describe in Schedule O) See Schedule O	855.	24	
25	**Total assets**	83,533.	25	63,854.
26	**Total liabilities** (describe in Schedule O) See Schedule O	10,357.	26	1,722.
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	73,176.	27	62,132.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III. X

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)

28 CYBA PROVIDES AN ATMOSPHERE OF SPORTSMANSHIP, TEAMWORK, AND FELLOWSHIP THROUGH AMATEUR YOUTH ATHLETIC ACTIVITIES.
(Grants $) If this amount includes foreign grants, check here ☐ **28a** 104,154.

29 SCOREBOARD SUPPORT FOR BOYS AND GIRLS CLUB THAT SUPPORTS CYBA ATHLETIC ACTIVITIES.
(Grants $ 11,945.) If this amount includes foreign grants, check here ☐ **29a** 11,945.

30
(Grants $) If this amount includes foreign grants, check here ☐ **30a**

31 Other program services (describe in Schedule O)
(Grants $) If this amount includes foreign grants, check here ☐ **31a**

32 **Total program service expenses** (add lines 28a through 31a) **32** 116,099.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Brian Roberts Chairman	1	0.	0.	0.
Nick Richey Treasurer	2	0.	0.	0.
Ramona Vasquez Secretary	1	0.	0.	0.
Tammy Johnson Director	3	0.	0.	0.
Holly Slater Director	2	0.	0.	0.

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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. See Sch O ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		X
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a 0.			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b 0.			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a 0.			
b	Gross receipts, included on line 9, for public use of club facilities 39b 0.			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: 0. ; section 4912: 0. ; section 4955: 0.			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 0.			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed: CA			

DRAFT COPY

42a The organization's books are in care of: Nick Richey Telephone no. 818 383-3977
Located at: 330 N Lantana St Ste 28 PMB 602 Camarillo CA ZIP + 4 93010

			Yes	No
b	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)? If "Yes," enter the name of the foreign country:	42b		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here ☐ N/A
and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		X

		Yes	No
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	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 ☐

		Yes	No
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	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		

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."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

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."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

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

DRAFT COPY

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

Nick Richey — Treasurer

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
Adam Moore	Adam Moore			P02050389

Firm's name Adam Moore CPA

Firm's address 3 Calle De Arena, Rancho Santa Margarita, CA 92688

Firm's EIN 47-1443736

Phone no. 949-690-5145

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
Camarillo Youth Basketball Association	95-3675813

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).)

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 on 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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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						

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12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15	Public support percentage from 2023 Schedule A, Part II, line 14	15	%

16a **33-1/3% support test—2024.** 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—2023.** 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—2024.** 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—2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					1,050.	1,050.
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			88,300.	110,987.	113,330.	312,617.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 **Total.** Add lines 1 through 5	0.	0.	88,300.	110,987.	114,380.	313,667.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 **Public support.** (Subtract line 7c from line 6.)						313,667.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	0.	0.	88,300.	110,987.	114,380.	313,667.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	41.	38.	28.	24.	13.	144.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	41.	38.	28.	24.	13.	144.
11 Net income from unrelated business activities not included on 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.)	41.	38.	88,328.	111,011.	114,393.	313,811.

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

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Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	99.95 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	0.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	0.05 %
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	0.00 %

19a **33-1/3% support tests—2024.** 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—2023.** 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 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
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.*	3b		
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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
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).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
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 line 10b below.*	10a		
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.)*	10b		

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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 on lines 11b and 11c below, the governing body of a supported organization?	**11a**	
b	A family member of a person described on line 11a above?	**11b**	
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* ***Part VI.***	**11c**	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *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 officers, 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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**	

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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 governmental entity (see instructions).*

		Yes	No
2	Activities Test. ***Answer lines 2a and 2b 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.*	**2a**	
b	Did the activities described on line 2a, above, 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.*	**2b**	
3	Parent of Supported Organizations. ***Answer lines 3a and 3b 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? *If "Yes" or "No," provide details in* ***Part VI.***	**3a**	
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.*	**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 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

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Section C – Distributable Amount

			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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

Section D — Distributions

			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required — *provide details in* ***Part VI***)	5	
6	Other distributions (describe in ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	8	
9	Distributable amount for 2024 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)

		(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required — *explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI***. See instructions.			
7	**Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

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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.)

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SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
Camarillo Youth Basketball Association	95-3675813

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).)

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 on 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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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						

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12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15	Public support percentage from 2023 Schedule A, Part II, line 14	15	%

16a **33-1/3% support test—2024.** 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—2023.** 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—2024.** 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—2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					1,050.	1,050.
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			88,300.	110,987.	113,330.	312,617.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 **Total.** Add lines 1 through 5	0.	0.	88,300.	110,987.	114,380.	313,667.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 **Public support.** (Subtract line 7c from line 6.)						313,667.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	0.	0.	88,300.	110,987.	114,380.	313,667.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	41.	38.	28.	24.	13.	144.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	41.	38.	28.	24.	13.	144.
11 Net income from unrelated business activities not included on 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.)	41.	38.	88,328.	111,011.	114,393.	313,811.

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

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Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	99.95 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	0.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	0.05 %
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	0.00 %

19a **33-1/3% support tests—2024.** 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—2023.** 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 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
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.*	3b		
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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
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).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
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 line 10b below.*	10a		
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.)*	10b		

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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 on lines 11b and 11c below, the governing body of a supported organization?	**11a**	
b	A family member of a person described on line 11a above?	**11b**	
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* ***Part VI.***	**11c**	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *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 officers, 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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**	

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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 governmental entity (see instructions).*

		Yes	No
2	Activities Test. ***Answer lines 2a and 2b 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.*	**2a**	
b	Did the activities described on line 2a, above, 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.*	**2b**	
3	Parent of Supported Organizations. ***Answer lines 3a and 3b 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? *If "Yes" or "No," provide details in* ***Part VI.***	**3a**	
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.*	**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 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

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Section C – Distributable Amount

			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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

Section D — Distributions

			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required — *provide details in* ***Part VI***)	5	
6	Other distributions (describe in ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	8	
9	Distributable amount for 2024 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)

		(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required — *explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI***. See instructions.			
7	**Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

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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.)

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SCHEDULE O
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Camarillo Youth Basketball Association

Employer identification number
95-3675813

Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid In Excess of $5,000

Donee's Name:	Boys and Girls Club of Camarillo
Donee's Address:	1500 Temple Ave Camarillo CA 93010
Cash Amount Given:	$ 11,945.

Form 990-EZ, Part I, Line 16
Other Expenses

Admin expenses	$ 394.
Advertising and Promotion	1,870.
Bank fees	36.
Conferences, Conventions, and Meetings	716.
Digital web services	1,292.
Facility rental	26,483.
Insurance	6,487.
Player awards	3,768.
Player photos	2,708.
Player supplies & equipment	287.
Referee expenses	28,200.
Registration fees	5,975.
Storage rental	1,520.
Uniform expenses	29,714.
Volunteer appreciation	225.
Volunteer background checks	3,197.
Total	$ 112,872.

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Form 990-EZ, Part II, Line 24
Other Assets

	Beginning	Ending
Prepaid Expenses and Deferred Charges	$ 855.	$ 0.
Total	$ 855.	$ 0.

Form 990-EZ, Part II, Line 26
Total Liabilities

	Beginning	Ending
Accounts Payable and Accrued Expenses	$ 10,357.	$ 0.
Other liabilities	0.	1,722.
Total	$ 10,357.	$ 1,722.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

PROVIDE AN ATMOSPHERE OF SPORTSMANSHIP, TEAMWORK, AND FELLOWSHIP THROUGH AMATEUR YOUTH ATHLETICS.

SCHEDULE O
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Camarillo Youth Basketball Association

Employer identification number

95-3675813

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ..... No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ..... No

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SCHEDULE O
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Camarillo Youth Basketball Association

Employer identification number
95-3675813

Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid In Excess of $5,000

Donee's Name:	Boys and Girls Club of Camarillo
Donee's Address:	1500 Temple Ave Camarillo CA 93010
Cash Amount Given:	$ 11,945.

Form 990-EZ, Part I, Line 16
Other Expenses

Admin expenses	$ 394.
Advertising and Promotion	1,870.
Bank fees	36.
Conferences, Conventions, and Meetings	716.
Digital web services	1,292.
Facility rental	26,483.
Insurance	6,487.
Player awards	3,768.
Player photos	2,708.
Player supplies & equipment	287.
Referee expenses	28,200.
Registration fees	5,975.
Storage rental	1,520.
Uniform expenses	29,714.
Volunteer appreciation	225.
Volunteer background checks	3,197.
Total	$ 112,872.

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Form 990-EZ, Part II, Line 24
Other Assets

	Beginning	Ending
Prepaid Expenses and Deferred Charges	$ 855.	$ 0.
Total	$ 855.	$ 0.

Form 990-EZ, Part II, Line 26
Total Liabilities

	Beginning	Ending
Accounts Payable and Accrued Expenses	$ 10,357.	$ 0.
Other liabilities	0.	1,722.
Total	$ 10,357.	$ 1,722.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

PROVIDE AN ATMOSPHERE OF SPORTSMANSHIP, TEAMWORK, AND FELLOWSHIP THROUGH AMATEUR YOUTH ATHLETICS.

SCHEDULE O
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Camarillo Youth Basketball Association

Employer identification number

95-3675813

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ..... No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ..... No

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Date Accepted _____ **DO NOT MAIL THIS FORM TO THE FTB**

TAXABLE YEAR **2024**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name: CAMARILLO YOUTH BASKETBALL ASSOCIATION

Identifying number: 95-3675813

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts or unrelated business taxable income (Form 199, line 4 or Form 109, line 5)	1	114,393.
2	Total gross income or total tax (Form 199, line 8 or Form 109, line 14)	2	114,393.
3	Refund (Form 109, line 26)	3	
4	Balance due or Total amount due (Form 199, line 16 or Form 109, line 29)	4	0.

Part II Settle Your Account Electronically for Taxable Year 2024

5 ☐ Direct deposit of refund (Form 109 only.)

6 ☐ Electronic funds withdrawal **6a** Amount _____ **6b** Withdrawal date (mm/dd/yyyy) _____

Part III Schedule of Estimated Tax Payments for Taxable Year 2025 (These are **not** installment payments for the current amount the exempt organization owes.)

	First Payment	Second Payment	Third Payment	Fourth Payment
7 Amount				
8 Withdrawal Date				

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

9 Routing number _____

10 Account number _____ **11** Type of account: ☐ Checking ☐ Savings

Part V Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 5, I declare that the bank account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return. If I check Part II, box 6, I authorize an electronic funds withdrawal for the amount listed on line 6a and any estimated payment amounts listed on Part III, line 7 from the bank account specified in Part IV.

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 2024 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 tax liability, the exempt organization will remain liable for the tax 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 or intermediate service provider the reason(s) for the delay or the date when the refund was sent.**

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Sign Here ▶ _____ (Signature of officer) _____ (Date) ▶ TREASURER (Title)

Part VI 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, 2024 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 ▶ ADAM MOORE | Date | Check if also paid preparer [X] | Check if self-employed [X] | ERO's PTIN P02050389

Firm's name (or yours if self-employed) and address ▶ ADAM MOORE CPA; 3 CALLE DE ARENA; RANCHO SANTA MARGARITA CA | Firm's FEIN 47-1443736 | ZIP code 92688

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 ☐ | Paid preparer's PTIN

Firm's name (or yours if self-employed) and address ▶ | Firm's FEIN | ZIP code

TAXABLE YEAR **2024**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2024 or fiscal year beginning (mm/dd/yyyy) 6/01/2024 , and ending (mm/dd/yyyy) 5/31/2025 .

Corporation/Organization name	California corporation number
CAMARILLO YOUTH BASKETBALL ASSOCIATION	9787590
Additional information. See instructions.	FEIN 95-3675813
Street address (suite or room)	PMB no. 602
330 N LANTANA ST STE 28	
City: CAMARILLO / State: CA / ZIP code: 93010	
Foreign country name / Foreign province/state/county / Foreign postal code	

A First return. . . . . ☐ Yes ☒ No
B Amended return . . . . . ● ☐ Yes ☒ No
C IRC Section 4947(a)(1) trust . . . . . ☐ Yes ☒ No
D Final information return?
● ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
Enter date: (mm/dd/yyyy) ● _____
E Check accounting method:
1 ☐ Cash 2 ☒ Accrual 3 ☐ Other
F Federal return filed? 1 ● ☐ 990T 2 ● ☐ 990-PF
3 ● ☐ Sch H (990) 4 ☐ Other 990 series
G Is this a group filing? See instructions . . . . . ● ☐ Yes ☒ No
H Is this organization in a group exemption . . . . . ☐ Yes ☒ No
If "Yes," what is the parent's name?
_____

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. . . . . ● ☐ Yes ☒ No
J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions . . . . . ● ☐ Yes ☒ No
K Is the organization exempt under R&TC Section 23701g? . . . ● ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources . . . . . $ _____
L Is the organization a limited liability company? . . . . . ● ☐ Yes ☒ No
M Did the organization file Form 100 or Form 109 to report taxable income? . . . . . ● ☐ Yes ☒ No
N Is the organization under audit by the IRS or has the IRS audited in a prior year? . . . . . ● ☐ Yes ☒ No
O Is federal Form 1023/1024 pending? . . . . . ☐ Yes ☐ No
Date filed with IRS _____

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

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 . . . . . ●	1	114,393.
	2	Gross dues and assessments from members and affiliates . . . . . ●	2	
	3	Gross contributions, gifts, grants, and similar amounts received . . . . . ●	3	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. **This line must be completed.** If the result is less than $50,000, see General Information B . . ●	4	114,393.
	5	Cost of goods sold . . . . . ● 5		
	6	Cost or other basis, and sales expenses of assets sold . . . . . ● 6		
	7	Total costs. Add line 5 and line 6	7	
	8	Total gross income. Subtract line 7 from line 4 . . . . . ●	8	114,393.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 . . . . . ●	9	125,437.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 . . . . . ●	10	-11,044.
Payments	11	Total payments . . . . . ●	11	
	12	Use tax. See General Information K . . . . . ●	12	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 . . . . . ●	13	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 . . . . . ●	14	
	15	Penalties and interest. See General Information J	15	
	16	**Balance due.** Add line 12 and line 15. Then subtract line 11 from the result . . . . . ◉	16	0.

Sign Here

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

Signature of officer ► | Title: TREASURER | Date | ● Telephone: 818 383-3977

Paid Preparer's Use Only

Preparer's signature ► ADAM MOORE | Date | Check if self-employed ► ☒ | ● PTIN: P02050389

Firm's name (or yours, if self-employed) and address ► ADAM MOORE CPA, 3 CALLE DE ARENA, RANCHO SANTA MARGARITA, CA 92688 | ● Firm's FEIN: 47-1443736 | ● Telephone: 949-690-5145

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

CACA1112L 01/14/25

CAMARILLO YOUTH BASKETBALL ASSOCIATION 95-3675813

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	
	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	114,393.
	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	114,393.
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule SEE STATEMENT 2	9	11,945.
	10	Disbursements to or for members	10	
	11	Compensation of officers, directors, and trustees. Attach schedule SEE STMT 3	11	0.
	12	Other salaries and wages	12	
	13	Interest	13	
	14	Taxes	14	
	15	Rents	15	
	16	Depreciation and depletion (See instructions)	16	
	17	Other expenses and disbursements. Attach schedule SEE STATEMENT 4	17	113,492.
	18	**Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	125,437.

Schedule L **Balance Sheet**

		Beginning of taxable year		End of taxable year	
Assets		(a)	(b)	(c)	(d)
1	Cash		82,678.		63,854.
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				
10a	Depreciable assets				
b	Less accumulated depreciation				
11	Land				
12	Other assets. Attach schedule		855.		
13	**Total assets**		83,533.		63,854.
Liabilities and net worth					
14	Accounts payable		10,357.		
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				
18	Other liabilities. Attach schedule STM 5				1,722.
19	Capital stock or principal fund		73,176.		62,132.
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund				
22	**Total liabilities and net worth**		83,533.		63,854.

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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	-11,044.	7	Income recorded on books this year not included in this return. Attach schedule	
2	Federal income tax		8	Deductions in this return not charged against book income this year. Attach schedule	
3	Excess of capital losses over capital gains		9	Total. Add line 7 and line 8	
4	Income not recorded on books this year. Attach schedule		10	Net income per return. Subtract line 9 from line 6	-11,044.
5	Expenses recorded on books this year not deducted in this return. Attach schedule				
6	Total. Add line 1 through line 5	-11,044.			

Camarillo Youth Basketball Association 95-3675813

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

Other Investment Income	$ 13.
Program Service Revenue	114,380.
Total	$ 114,393.

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

Donee's Name - Ind	Boys and Girls Club of Camarillo
Donee's Street Address:	1500 Temple Ave
Donee's City	Camarillo
Donee's State	CA
Donee's Zip code	93010
Cash and Noncash Amount:	$ 11,945.
Total	$ 11,945.

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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	Total Compensation	Contribution to EBP & DC	Expense Account/ Other
Brian Roberts 330 N Lantana St Ste 28 PMB 602 Camarillo, CA 93010	Chairman 1.00	$ 0.	$ 0.	$ 0.
Nick Richey 330 N Lantana St Ste 28 PMB 602 Camarillo, CA 93010	Treasurer 2.00	0.	0.	0.
Ramona Vasquez 330 N Lantana St Ste 28 PMB 602 Camarillo, CA 93010	Secretary 1.00	0.	0.	0.
Tammy Johnson 330 N Lantana St Ste 28 PMB 602 Camarillo, CA 93010	Director 3.00	0.	0.	0.
Holly Slater 330 N Lantana St Ste 28 PMB 602 Camarillo, CA 93010	Director 2.00	0.	0.	0.
	Total	$ 0.	$ 0.	$ 0.

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

Accounting Fees	$ 320.
Admin expenses	394.
Advertising and Promotion	1,870.
Bank fees	36.
Conferences, Conventions, and Meetings	716.
Digital web services	1,292.
Facility rental	26,483.
Insurance	6,487.
Player awards	3,768.
Player photos	2,708.
Player supplies & equipment	287.
Postage and Shipping	300.
Referee expenses	28,200.
Registration fees	5,975.
Storage rental	1,520.
Uniform expenses	29,714.
Volunteer appreciation	225.
Volunteer background checks	3,197.
Total	$ 113,492.

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

Other liabilities	1,722.
Total	$ 1,722.

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STATE OF CALIFORNIA
RRF-1
(Rev. 01/20/2024)
IN

MAIL TO:
Registry of Charities and Fundraisers
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814

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

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, and 310

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

(For Registry Use Only)

CAMARILLO YOUTH BASKETBALL ASSOCIATION
Name of Organization

List all DBAs and names the organization uses or has used

330 N LANTANA ST STE 28 PMB 602
Address (Number and Street)

CAMARILLO, CA 93010
City or Town, State, and ZIP Code

818 383-3977
Telephone Number

TREASURER@CYBAONLINE.ORG
Email Address

Check if:
- ☐ Change of address
- ☐ Amended report
- ☐ Organization requests email notifications

State Charity Registration Number 046625

Corporation or Organization No. 9787590

Federal Employer ID No. 95-3675813

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, and 310)
Make Check Payable to Department of Justice

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

PART A – ACTIVITIES

For your most recent full accounting period (beginning 6/01/24 **ending** 5/31/25 **) list:**

Total Revenue $ (including noncash contributions) 114,393. **Noncash Contributions** $ 0. **Total Assets** $ 63,854.

Program Expenses $ 116,099. **Total Expenses** $ 125,437.

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

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

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

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

Signature of Authorized Agent	Printed Name	Title	Date
	NICK RICHEY	TREASURER	