



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

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

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

# ANNUAL TREASURER'S REPORT ATTORNEY GENERAL OF CALIFORNIA

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

(For Registry Use Only)

(FORM CT-TR-1)

|                                  |  |
|----------------------------------|--|
| Friends of Carmel Valley Library | State Charity Registration Number 039352 |
| Name of Organization             |  |
| PO Box 248                       | Corporation or Organization No. 0928750  |
| Address (Number and Street)      |  |
| Carmel Valley CA 93924-0248      | Federal Employer I.D. No. 94-2605389     |
| City or Town, State and ZIP Code |  |

For annual accounting period ( beginning 01 / 01 / 2020 ending 12 / 31 / 2020 )

## BALANCE SHEET

### ASSETS

### LIABILITIES

|                     |                     |
|---------------------|---------------------|
| Cash                | \$ 31,777.00        |
| Savings             | \$ 4,414.00         |
| Investment          | \$                  |
| Land/Buildings      | \$                  |
| Other Assets        | \$                  |
| <b>TOTAL ASSETS</b> | <b>\$ 36,191.00</b> |

|                          |           |
|--------------------------|-----------|
| Accounts Payable         | \$        |
| Salary Payable           | \$        |
| Other Liabilities        | \$        |
| <b>TOTAL LIABILITIES</b> | <b>\$</b> |

### FUND BALANCE

|                                     |    |
|-------------------------------------|----|
| Total Assets less Total Liabilities | \$ |
|-------------------------------------|----|

## REVENUE STATEMENT

### REVENUE

### EXPENSES

|                       |                     |
|-----------------------|---------------------|
| Cash Contributions    | \$ 26,180.00        |
| Noncash Contributions | \$                  |
| Program Revenue       | \$ 1,037.00         |
| Investments           | \$ 1.00             |
| Special Events        | \$                  |
| Other Revenue         | \$                  |
| <b>TOTAL REVENUE</b>  | <b>\$ 27,218.00</b> |

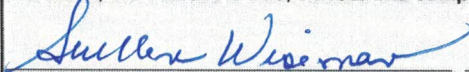
|                                    |              |
|------------------------------------|--------------|
| Compensation of Officers/Directors | \$           |
| Compensation of Staff              | \$           |
| Fundraising Expenses               | \$           |
| Rent                               | \$           |
| Utilities                          | \$           |
| Supplies/Postage                   | \$ 430.00    |
| Insurance                          | \$ 1,150.00  |
| Other Expenses                     | \$ 14,455.00 |

### NET REVENUE

|                       |                     |
|-----------------------|---------------------|
| <b>TOTAL EXPENSES</b> | <b>\$ 16,035.00</b> |
|-----------------------|---------------------|

|                                   |              |
|-----------------------------------|--------------|
| Total Revenue less Total Expenses | \$ 11,183.00 |
|-----------------------------------|--------------|

I hereby 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.

|  |                 |           |         |
|--|-----------------|-----------|---------|
|  | Suellen Wiseman | Treasurer | 2/19/21 |
| Signature of Authorized Agent  | Printed Name    | Title     | Date    |