CITY OF SOUTH SAN FRANCISCO PARKS AND RECREATION DEPARTMENT

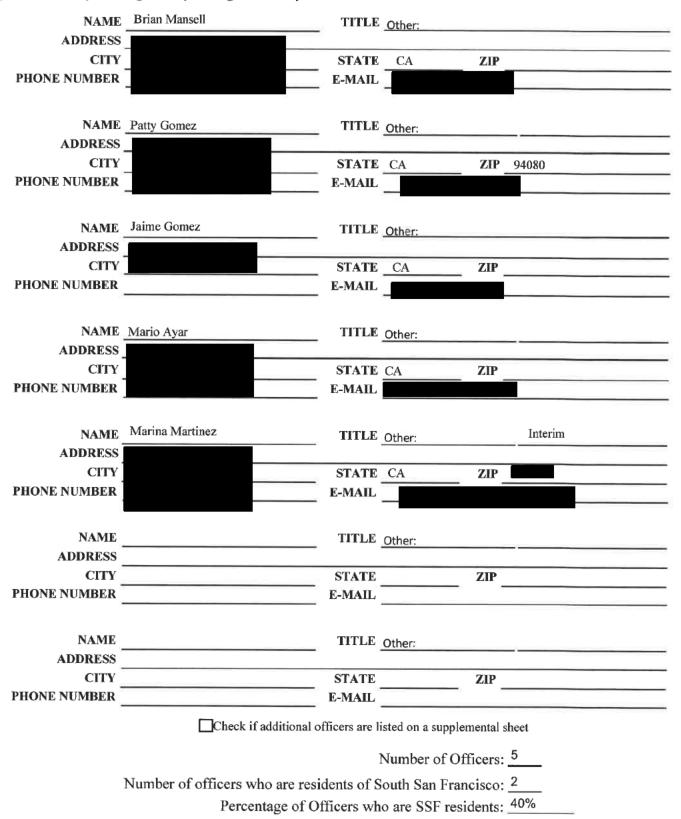
NON-PROFIT GROUP CO-SPONSORSHIP ANNUAL RENEWAL REPORT FOR YEAR <u>Due: 05/23/2025</u>

CLUB/ORGANIZATION	San Mateo County Athletic Club	,		
PREPARER'S NAME	Brian Mansell	TITLE	President	
ADDRESS				
CITY				
PHONE NUMBER				
Please review the list of	required documents and return th	nem with you	ur completed application:	
Current Officers Roste	er (page 2)			
Program Report (page	s 3-4)			
Financial Statement (p Ending balances from	ages 5-7) or <u>attach</u> (must include all re Bank Statements)	venues & expe	nditures and match Beginning &	
	y 2024 and December 2024 Bank States			
☐ Statement of Complian	nce with Co-Sponsorship Agreement (pa	age 8)		
Current Certificate of	General Liability Insurance, attach			
Supplemental Sel	f-Insured Retention (SIR) Questionnair	e, <u>attach</u>		
☐City of South San	Francisco must be listed as additionally	y insured, <u>atta</u> c	<u>ch</u>	
Current Certificate of	Workers Compensation Insurance or St	atement of Wa	niver (if no employees), attach	
Co-Sponsored Permit l	Fee, attach			
Current Membership Roster (Must include addresses for all participants), attach				
☐ Copy of Organization's	Bylaws, attach			

All non-profit organizations must file appropriate tax returns in accordance with the law. Please note that the City may audit your records and you would be required to comply with our requests to produce relevant documents.

SAN MATEO COUNTY ATHLETIC CLUB OFFICERS ROSTER

To be submitted with annual renewal and whenever officers change. An officer includes executive officer positions, board of directors, trustees, agents, or other leadership roles with control or substantial influence over the organization's policies or operations as may be designated by the organization bylaws.



I.

II.

PROGRAM REPORT

MEMBERSHIP:	
Total number of members as of 12/31/23:	154
Total number of members as of 12/31/24:	158
Number of members as of 12/31/24 who are South San Francisco residents:	96
Percentage of members as of 12/31/24 that are South San Francisco residents:	60.75%
Net Membership Gains (Losses):	4 KOSKINXX
Staff reserves the right to request additional documentation from the membershi	p as verification of residency
Please describe any membership requirements (100 word limit):	
Annual Membership Fees/Dues:	
Form(s) of Payment accepted: Cash, Check or Credit Card CC	- : .
Describe how fees are collected (auto-pay, in person, mail) and rep	orted:
online/credit card payment	
ARD MEETINGS monthly First (1)	Friday
Meetings are held <u>reconnectors month</u> on the xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	xsunday
of each month	at 6pm
Location of meetings: 533 Airport Blvd., Suite 419, Burlingame	
Are meetings open to the public? Wes Yes Average #	f of attendees: 5

III. CLUB ACTIVITIES

A: Describe the on-going activities put on by your organization for the membership in a calendar year:

ACTIVITY/TYPE Practice	LOCATION Orange Park	FREQUENCY (1 x week, etc.) Please indicate season dates, if any. 2-3Xweek	TOTAL # ACTIVITY MEETINGS	AVG. # MEMBERS ATTENDING (Each Activity)	TOTAL # PARTICIPANTS PER YEAR
Sporting Games	Orange Park	3xweek	150		
Tryouts	Orange Park	2xyear	40		
clinics	Orange Park	2-3Xweek	30		
	-				

B: Describe the one-time events put on by your organization for the membership in a calendar year:

			# ATTENDING
ACTIVITY	DATE(S)	LOCATION	Members Others
Tournament	2/24/2024	Weekend OMP	
Tourament	6/15/2024	Weekend OMP	
Tournament	11/23/2024	Weekend OMP	
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11			
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		30	

FINANCIAL STATEMENT

CONTRIBUTIONS, gifts, grants SOURCE Ex.: Amateur Athletic Foundation	FORM Grant	AMOUNT 500.00		
PROGRAM revenue Ex.: Registration Fees	Annual	PRIBUTIONS, gifts, grants		A
MEMBERSHIP fees/dues Ex.: Membership Dues		TAL PROGRAM revenue	440,042.29	Œ
Inventory/Concession Sales Gross Receipts: Gross Receipts:	Description	MEMBERSHIP fees/dues		0
37 (7)	net profit) Day Picnic Fundra naments			
OTHER (please describe) Ex. Money Market Interest	TOTAL SPEC	EIAL EVENTS/fundraisers	158,100.00	E
		TOTAL OTHER		F
		TOTAL REVENUE	\$ 598,142.29	G

AMOUNT

OPERATING EXPENSES:

	Grants and allocations (attach schedule)
	Cash \$
	Non-cash \$
	Specific assistance to individuals (attach schodule)
	Benefits paid to or for members (attach schedule)
	Compensation of officers, directors, etc.
216,535.00	Other salaries and wages
	Pension plan contributions
	Other employee benefits
	Payroll taxes
	Professional fundraising fees
9,060.00	Accounting fees
71,209.98	Legal fees
18,621.36	Supplies
1,123.2	Telephone
	Postage and shipping
51,321.45	Occupancy/Rental
	Equipment rental and maintenance
	Printing and publications
18,806.02	Travel
	Conferences, conventions, and meetings
7,663.50	Interest
	Depreciation, depletion, etc. (attach schedule)
18.58	Advertising
3,006.52	Bank Charges
5/40	Registration Fees Paid
17,211.90	Equipment/Supplies
	Promotion
76,890.92	Subcontractors
	Team Clothing, etc.
129.00	Repairs & Maintenance
225,00	Value of Inventory
10.453.96	Liability Insurance
552459	Other (itemize):
10,842.03	Auto
14,792.42	Other business expenses
67,524.77	Outside Services
3,160.37	Tax and Licenses
\$ 598,371.05	TOTAL

STATEMENT OF EQUITY For the Year ending 12/31/2024

	CHANGES	BALANCE
●Beginning Balance (01/01/2024)		\$ 5,385.64
CONTRIBUTIONS, gifts, grants		
PROGRAM revenue	Control of the contro	
MEMBERSHIP fees/dues		
Gross Profit from Sales		
SPECIAL EVENTS/fundraisers		
OTHER	6	
SUBTOTAL of REVENUE	\$ 598,142.29	
	SUBTOTAL	\$ 603,527.93
Tot	al Liabilities Paid	\$ 598,371.05 (II)
② Ending Balance (12/31/2024)		\$ 5,156.88
☐ I certify that this report and the attached Financial State of the records of the club by a representative of the City	ment(s) are correct a	nd true, and agree to a reviewisco, if requested.
Marina Marinez (Aug 6, 2025 21:43:02 PDT)	Blesca	
Treasurer President	-/-	
08/06/2025	1077	
Date		

I understand that I, or an organization representative, shall attend the Parks and Recreation Commission meeting for the month our organization is agenized for renewal.

The date for this meeting is June 17, 2025

CO-SPONSORSHIP ANNUAL STATEMENT OF COMPLIANCE

I (we) have reviewed the executed Co-Sponsorship Agreement and hereby certify that the Organization remains in compliance with all obligations under the Co-Sponsorship Agreement.

I (we) certify that the information provided in to the City is accurate. I acknowledge that I will promptly provide the City with any changes from what was originally provided in the Application for Co-Sponsorship. I hereby acknowledge that any material misrepresentations will result in immediate termination of the Co-Sponsorship Agreement and any related privileges.

Club/Organization Name:	SAN MATEO COUNTY ATHLETIC CLUB
Signature:	Before
Print Name:	Brian Mansell
Title	President

Att 1 Co-Sponsor Annual Renewal Application SMC Athletics (1) (1)

Final Audit Report 2025-08-07

Created: 2025-08-07

By: Patty Gomez (ssfsoccer1@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAsDWm8Xx521ilXokAxfVmqoc8AxFuo_fG

"Att 1 Co-Sponsor Annual Renewal Application SMC Athletics (1) (1)" History

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