Department of Consumer Affairs
California State Athletic Commission

COMMISSION MEETING

June 23, 2015

Los Angeles, CA

PUBLIC

COPY

Chairman John Carvelli
Vice Chair Mary Lehman
Commissioner John Frierson
Commissioner Martha Shen-Urquidez
Commissioner Van Gordon Sauter
Commissioner Vernon Williams
Commissioner Luis Ayala
Executive Officer Andy Foster

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STATE OF CALIFORNIA
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DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.

CALIFORNIA STATE ATHLETIC COMMISSION
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P (916) 263-2195 F (916) 263-2197
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Members of the Commission
John Carvelli, Chair
Mary Lehman, Vice Chair
John Frierson
Martha Shen-Urquidez
Van Gordon Sauter
Vernon Williams
Luis Ayala

COMMISSION MEETING AGENDA

Tuesday, June 23, 2015
10:00 a.m. - Conclusion of Business

Location:
Ronald Reagan Building - Auditorium
300 South Spring Street
Los Angeles, CA 90013

ORDER OF ITEMS SUBJECT TO CHANGE

OPEN SESSION

1. Call to Order/Pledge of Allegiance/Roll Call

2. Welcome - Chairman's opening remarks

3. Approval of the April 28, 2015, Commission Meeting Minutes

4. Review and approval of modifications to the Therapeutic Use Exemption proposed regulation language and rule 303

5. Review and approval of modifications to the Transgender Athlete proposed regulation language and rule 201

6. Appeal of license suspension and fine from Pablo Ceasar Cano

7. Appeal of license suspension and fine from Alexander Shlemenko

8. Executive Officer's Report
   a. Budget Update
   b. Report on Pending and Proposed Regulations and Legislation
   c. Traumatic Brain Injury Test Field Kits Update
   d. Catastrophic Injury Incident Plan Update
   e. Status Update of Officials Training Subcommittee
   f. Status Update of Delegated Entities
   g. Neurological Fund Update
   h. Association of Boxing Commissions' San Diego Convention Update

i. Update on Process to Monitor and Report Weight Gain from Weigh-In to Bout

9. Discussion, review and possible action regarding the status of current delegation to USA Boxing

10. Discussion and possible action regarding the USA Boxing's request for a waiver of the mandatory head gear rule for the United States Olympic Trials in August 2015

11. Return to play discussion: Is a 45/30 day medical suspension requirement adequate?

12. Discussion regarding issues brought forth at the April 28, 2015 meeting, concerning International Kickboxing Federation's social media posts and unsanctioned events.

13. Public comment on items not on the agenda
(The Commission may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting pursuant to Government Code §§ 11125, 11125.7(a))

14. Set Next Meeting and ADJOURNMENT

NOTICE: The meeting is accessible to the physically disabled. A person who needs disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Heather Jackson at (916) 263-2195 or email heather.jackson@dca.ca.gov or sending a written request to the California State Athletic Commission, 2005 Evergreen Street, Suite 2010, Sacramento, CA 95815. Providing your request at least five (5) days before the meeting will help ensure availability of the requested accommodation. Requests for further information should be directed to Heather Jackson at the same address and telephone number.

Meetings of the California State Athletic Commission are open to the public except when specifically noticed otherwise in accordance with the Open Meetings Act. The audience will be given appropriate opportunities to comment on any issue presented.

AGENDA ITEM

3

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Agenda items may be taken out of order the agenda except public comment. Action may be taken on any item listed on

CALIFORNIA STATE ATHLETIC COMMISSION

MEETING MINUTES

Tuesday, April 28, 2015
10:00 a.m. - conclusion of business

Location:
Office of the Attorney General
110 West A Street, Suite 1100
San Diego, CA 92101

Commissioners Present
Chairman John Carvelli
Vice-Chair Mary Lehman
Commissioner John Frierson
Commissioner Martha Shen-Urquidez
Commissioner Van Gordon Sauter
Commissioner Vernon Williams, MD
Commissioner Luis Ayala

Staff Present
Andy Foster, Executive Officer
Sophia Cornejo, Assistant Executive Officer
Gary Duke, DCA Legal Counsel

OPEN SESSION

Agenda Item 1 – Call the meeting to Order / Roll Call / Pledge of Allegiance
The meeting was called to order at 10:00 a.m. and a quorum was present.

Agenda Item 2 – Swearing in of new Commissioners.
The Executive Officer (EO) swore in and welcomed Commissioners Dr. Vernon Williams, Van Gordon Sauter and Luis Ayala.

Agenda Item 3 – Chairman's Opening Remarks
The Chairman gave his opening remarks. He thanked and expressed appreciation to the two former commissioners, Dr. Lemons and Dr. Giza for providing a great service to the people of California.

The Chairman stated that the UFC Staples Center Event was sold out. This was an important event where the EO was invited to do a media day with Fox Sports and other major outlets. The EO drug tested every athlete at UFC with blood and urine sample which is the kind of safety and oversight for other Commissions to follow. The Chairman recognized the hard work of the EO and staff on this event and stated this is something to be proud of.

The Chairman stated that the headline of the Los Angeles Times of the NFL settling another brain injury case is something making headlines everywhere. Brain injury is a priority and we all

need to be aware and be involved. This Commission needs to lead the industry in brain injury testing efforts.

The EO and Chair attended the Joint Legislative Committee for Sunset Review. The Committee asked many questions of the EO and the Chair. At the end of the Hearing, many legislators stated they were here to help the Commission in moving forward.

The Chairman wanted to express concerns regarding Rule 253 – throwing cans of beer at the fights. At the Chavez Jr. fight there were many cans thrown at the ring where Commissioners and judges were hit. The Chairman wants to make sure that the EO does more research on what we are doing to ensure the vendors and Promoters do what is necessary to prevent this from happening again.

Agenda Item 4 – Approval of the February 18, 2015, Commission Meeting Minutes

Commission Frierson motioned to approve the February 18, 2015, Commission Meeting minutes as presented.

Commissioner Shen-Urquidez seconded the motion.
Motion passed 7-0 by roll call vote.

Agenda Item 5 – Executive Officer's Report

a. Budget Update

The EO presented the Commission's budget. The Commission has spent $993,743 through Fiscal Month (FM) 9. Fund balance has increased $144,184 from FM 08. The EO stated that we are now entering surplus months. We have deposited close to $200,000 in April. The Commission uses approx. $115,000 per month to operate on average. EO states that he is very pleased at where the money is being spent. He is spending heavy on Athletic Inspectors and light on civil service line items. He further stated that he eliminated a position.

Commissioner Lehman asked for clarification as to why we are giving away positions if we are working so hard and are understaffed. The EO explained that the position was abolished from the Neurological Fund. The EO stated we currently have 1 vacancy right now that we are considering filling the vacancy as a PI (permanent Intermittent).

Commissioner Dr. Williams asked what the nature of the temporary help line item is. The EO explained the temporary help represents ½ a position (C. Raymond). When the 0.9 was eliminated, C. Raymond had to be moved to the support fund and that comes out of the temporary help. The EO is currently discussing with DCA about moving the position completely into the Pension Fund 100%.

The EO presented the BreEze chart that was prepared by DCA.

Commissioner Frierson asked the EO to explain to the new Commissioners what the Athletic Inspectors (AI) do. The EO explained that the AI's go to the fights, licensing in the field, monitor the fighters, drug testing, cease and desist letters, pre-weigh ins, pre-licensing, hand wraps, etc. They are basically the enforcement arm of the Commission.

Commissioner Ayala asked how many civil service positions are authorized. EO stated 7 positions – 6 filled.

b. Report on Pending Regulations
The EO presented the Regulations update. The Chairman stated the Pension regulations have been at DCA for approval for 7 months now and that these regulations are a win-win by doing the necessary clean up to the regulations.

Commissioner Dr. Williams volunteered to assist staff with the completion of the Neurological Regulation package.

c. Update on Dangers in Weight Cutting
The EO presented the dehydration flyers and poster to the Commissioners. Commissioner Frierson asked if it was possible to translate the flyer/poster into Russian. The EO stated that drugs are a problem; however, dehydration is a problem right in front of us and we see it all the time. Currently, the Commission is in the information stage but there is an action plan that will be presented at a later date.

d. BKB Matter
The EO discovered that two of the Commission's licensed officials were officiating at Bare Knuckle Boxing (BKB) events. The EO and Commissioner Shen-Urquidez discouraged these officials from participating in these events. The EO doesn't see how our regulatory structure allows for BKB in California.

e. Status of Subcommittees
Commissioner Shen-Urquidez updated the Commissioners on the Officials Training Subcommittee. The EO stated that he hasn't heard of training being offered at the Commission level. Commissioner Ayala volunteered to be on the Officials Training Subcommittee and Vice Chair Lehman removed herself from the Subcommittee. The Commissions direction for the subcommittee is to study, analyze and later report on training for judges first.

Dr. Williams volunteered to be on the Transgender Subcommittee.

f. Neurological Fund
The EO presented the Neurological Fund balance. Almost $20,000 has been spent on DCA pro-rata. $110,000 left in the appropriation but he will discuss that during Agenda Item 9.

g. Tribal Agreements Update
The Commission currently has three tribal agreements (Chumash, Cabazon, and Cache Creek). The Chairman and the EO are working on getting a Pechanga agreement. Commissioner Shen-Urquidez requested the issue regarding non-sanctioned fights on tribal lands be put on the next Commission Meeting Agenda.

h. ABC Convention
The EO stated that the Association of Boxing Commissions (ABC) Convention will be held this year in San Diego. The Chairman stated that Commissioners can register and attend. Commissioner Frierson suggested that all Commissioners attend this convention because it can be very beneficial.

i. Update on Delegated Entities

The EO stated that the Commission delegates amateur boxing to USA Boxing; amateur kickboxing to International Kickboxing Federation (IKF); youth pankration to United States Fight League (USFL); and amateur mixed martial arts to California Amateur Mixed Martial Arts Organization (CAMO).

CAMO – The EO stated that dehydration is a big problem – he stated that addressing this at the amateur level will help fighters throughout their career. The EO is working with JT Steele on implementing the caliber testing for amateur athletes and will be completed during their annual physical. As the amateur fighters come up, their minimum allowed weight class is listed on their record for when they turn professional.

Mr. Steele stated that weight cutting is a big problem. What Mr. Foster wants to implement is a minimum weight standard at which a particular fighter can compete. The Commission is starting this at the grass roots level so that weight cutting doesn't continue to be a problem once they are a professional athlete. Mr. Steele urged the Commissioners' support in this endeavor. We have a chance to advance the sport.

The Chairman asked Mr. Steele how he plans on engaging the athletes. Mr. Steele stated they are in the very beginning discussion stages. How CAMO intends to engage the athletes is something that still needs to be worked out. He anticipates a full public relations operation focusing on educating the athletes.

Commissioner Ayala asked when the weigh-in is held for amateur athletes. Mr. Steele responded that it is held the day of the fight.

Commissioner Dr. Williams stated he has witnessed scenarios where behavior and culture is changed and that it is done early on. He has seen a 9-10 year effort on educating athletes on concussion, but there hasn't been a lot of effort on changing the behavior of the athletes. The problem is that there are many examples where facts and fear do not change the culture. He suggested that when you educate athletes, do it in a way that will change the behavior. Research shows that educating athletes of positive outcomes is more effective than facts and fears. He suggested that in addition to the facts, state the benefits of NOT cutting weight rather than the fears of cutting weight.

Commissioner Shen-Urquidez asked the EO and Mr. Steele if there is some value in making the age limit more consistent between amateur boxers and amateur mixed martial arts fighters. Mr. Steele responded that it is indeed a concern and creates difficulty with respect to bout approvals. Current regulations do not include parameters on age and the Commission may decide that it is time to address this concern.

Mr. Steele stated that the best way to proceed is to discuss with stakeholders and physicians and come back to the Commission with a plan.

USFL - Mr. John Frank presented to the Commission a report on youth pankration. He stated that pankration is a mild form of Mixed Martial Arts (MMA). USFL regulates kids 8-17 years old. They have had 6 events (total of 86 bouts). He stated its been challenging because of the additional regulations that participants aren't used to. There have been 13 reported injuries: 4 were major injuries including broken arm, rib injury, sprang wrist and knee. He further stated

there is a lot of media attention on the sport, where a lot is negative. The media that comes out to the events are positive.

Vice-Chair Lehman asked how the mixed gender bouts are coming along. Mr. Frank stated that its been fine and he hasn't heard anything negative, but there are not that many mixed gender bouts. He has read and heard that a lot of people don't like it.

IKF – Mr. Steve Fossum is the president of IKF. The EO stated that he is very pleased with Mr. Fossum's bout approvals. Mr. Fossum stated that they regulated approximately 40 events in the past year. He further stated that as a team, all amateur delegated entities should implement the weight cutting idea that CAMO is starting because there are athletes who compete in more than one of the sports. He believes all competitors will benefit from being consistent. The Chairman asked if Mr. Fossum would like to volunteer to work with Mr. Steele on the weight cutting education campaign.

Commissioner Shen-Urquidez thanked Mr. Fossum for the services he is providing. She stated that there are things on the IKF web site that are not favorable to CSAC. Mr. Fossum stated that everything the EO asked him to remove is off. Commissioner Shen-Urquidez stated that links he was asked to remove from the California page are still there also.

Commissioner Shen-Urquidez expressed her concerns that IKF is having "smokers" in California. She further explained to the new Commissioners what "smokers" are. She also stated that the International Sport Combat Federation (ISCF) is holding amateur MMA events on tribal lands that are not sanctioned and she has a problem with this because ISCF is part of IKF, which is a delegate of the Commission. Commissioner Shen-Urquidez thinks that this is something the Commission needs to discuss further. The Chairman asked if the EO knew about it and has any response. The EO reminded the Commissioners that the land in which these events are held is sovereign land. The EO stated that he would rather the fights on tribal lands have some sort of regulation rather than nothing and that Mr. Fossum does this.

The Chairman directed the EO and Mr. Fossum address the items brought up by Commissioner Shen-Urquidez and report back to the Commission at the next meeting.

PUBLIC COMMENT: Marc Ratner from Ultimate Fighting Championship (UFC) congratulated the new Commissioners on their appointments. He expressed how proud he is to work with Mr. Foster. He stated that the Commission treats UFC well and that he enjoys working with Mr. Foster.

USA Boxing – The EO stated that reports were received that some USA Boxing events were not complying with the Ambulance requirement. The EO presented a letter from USA Boxing that stated USA Boxing will comply with the Ambulance requirement.

USA Boxing wants to have the Olympic trials in San Diego, CA, however, they are requesting an exemption of the head gear. Mr. Gary Duke, Legal Counsel, stated that if it is not in the law or our regulations, we would be able to provide an exemption. Commissioner Shen-Urquidez stated that Dr. Charles Butler led the charge for removing the head gear based on his own unpublished study. She stated that she is not convinced that removing the head gear is a good idea. There is no medical data that has been presented to the Commission from USA Boxing to

support the approval of no head gear. Commissioner Ayala stated that it would be interesting to see how the Olympics feels about this.

Commissioner Frierson suggested that maybe the Commission should research why the head gear requirement was changed in 1976. Vice-Chair Lehman stated that Canada removed the head gear requirement because they concluded that it is safer for the boxer without the head gear. Commissioner Dr. Williams is interested in seeing the data that Canada used to change their head gear requirement. Vice-Chair Lehman asked the EO to request from USA Boxing materials to the Commission at least 10 days before the next Commission meeting so they have a chance to review the materials before the meeting.

Agenda Item 6 – Review of Professional Boxer's Pension Plan Annual Report for the year 1/1/2014 -12/31/2014

The EO presented Benefit Resources' Annual Report. The Chairman asked when the contract is up. Ms. Sophia Cornejo, the Assistant Executive Officer, responded that it expired June 30, 2015, and that she is currently working with DCA Contracts Unit on renewing the contract. She further stated this contract renewal will be sent out for bid through the contract bidding process.

Agenda Item 7 – Discussion regarding use and potential approval of a new CSAC patch.

The EO presented to the Commission a proposed new CSAC patch. Commissioner Frierson stated this patch is a way for people to know that the fight is in California and sanctioned by the California State Athletic Commission. Commissioner Sauter thinks the Commission should be concerned about the identity of the Commission and branding the Commission is important and should be done more.

Vice-Chair Lehman motioned to adopt the patch presented in the packet for referees and highly encourages all other CSAC personnel to use this patch or any other official patch approved by the Commission to be implemented in 90 days and that the patch to be placed on the left side of the lapel.

Commissioner Frierson seconded the motion.
Motion passed by roll call vote 7-0.

Vice-Chair Lehman motioned to adopt the patch presented at the meeting as the official patch of the CSAC.

Commissioner Frierson seconded the motion.
Motion passed by roll call vote 7-0.

Agenda Item 8 – Executive Officer Annual Performance Evaluation Process Policy Change

The EO presented the new policy to the Commissioners. The Commission has complied with the new policy.

Agenda Item 9 – Purchase of Dehydration Scales and handheld brain scanners from the Neurological Fund.

The EO stated there is an association between dehydration and traumatic brain injury. There are scales that measure water and various composition of the body. The scales were used at an

event in Ontario, CA and it was very beneficial. The EO would like approval to purchase at least one of these scales for use at weigh-ins.

Commissioner Dr. Williams presented information on the brain scanner. He stated that it is a portable brain scanner that can detect hematomas. He further explained how the scanner works and what the reading means. It can help identify abnormality at the event. This brain scanner does not replace clinical assessment by the Ringside Physician but it can be used as a tool to augment what they find clinically and identify an abnormality fast. It is not 100% but it has 88% sensitivity. Deep or small bleeds will be hard to identify, but it's something that is beneficial. It is being used by the military as well as by some other contact sports. An MMA club in Florida is also using it. It also serves the purpose to show that we are doing everything we can do to protect the fighters.

The EO stated the scales are approximately $5,000.00 each and brain scanners are approximately $15,000.00. The EO asked for $20,000.00 to purchase these two items. Commissioner Shen-Urquidez stated that these tools will be used to send someone to the hospital that otherwise may not have been sent to the hospital rather than stop someone from going to the hospital. Commissioner Shen-Urquidez asked if we would use it before the bouts. Commissioner Dr. Williams responded that he doesn't think it is needed before the fight but rather after the fight, during the post bout evaluation by the Ringside Physician.

Vice-Chair Lehman asked if we can negotiate a better price because we are the State of California.

The EO stated he would like to purchase the items this fiscal year because we lose our spending authority next fiscal year. Commissioner Sauter stated if there is a devise that our EO feels will help protect fighters, then this shouldn't be a hard decision. He thinks the brain scanner is quite remarkable.

Commission Ayala stated this may be an important investment, but he doesn't want to purchase something where we don't have all of the questions answered.

Public Comment: CSAC Licensed Official, Pat Russell, commented he completely agrees and supports this purchase.

Vice-Chair Lehman motioned to get more information, warranty information, how it will be used, can we get a discount and have a telephone conference in 10 days to report.

Commissioner Shen-Urquidez motioned to authorized the EO to purchase 1 each of the equipment prior to fiscal year end, subject to the completion of due diligence within 10 days and a report to the chair who will determine due diligence has been completed.

Commissioner Sauter seconded the motion.
Motion passed by roll call vote 7-0.

Agenda Item 10 – Review and Approval of Modifications to the Therapeutic Use Exemption Proposed Regulation Language
This agenda item was tabled for a future meeting.

Agenda Item 11 – Review and Approval of Modifications to the Transgender Licensing Proposed Regulation Language
This agenda item was tabled for a future meeting.

Agenda Item 12 – Strategic Planning Workgroup with the Department of Consumer Affairs concerning the present and future goals and objectives of the CSAC.
The Commissioners and two members of DCA SOLID conducted a working group to put together the Commission's Strategic Plan.

Agenda Item 13 – Public Comment on Items not on the Agenda
Pat Russell commented that in any given weekend this state has as many as 6 shows and the fighters in the ring are safe because of this Commission. He thanks the Commission for being receptive of the industry and for keeping the fighters safe. The judgments are key and critical. Kudos to the EO because the matchmaking has risen to a higher level which helps the officials do their job in the ring. He commented that in California the officials are held to a very high standard but there are things in place that help them stay at that standard like officials review or evaluations.

Mr. Russell further commented that years ago when amateur fighters removed the head gear, there were many more face lacerations and head injuries.

Lastly, Mr. Russell stated there are people that have committed their lives to this industry and the Commission should recognize them for their services.

Agenda Item 14 – CLOSED SESSION

Agenda Item 15 – ADJOURNMENT

Next meeting is scheduled for Tuesday, June 23, 2015, in Los Angeles, CA.

ADJOURNMENT

AGENDA ITEM

4

CALIFORNIA STATE ATHLETIC COMMISSION

Adopt Sections 424, et seq., of Article 14 of Division 2 of Title 4 of the California Code of Regulations to read as follows:

ARTICLE 14. THERAPEUTIC USE EXEMPTIONS

§ 424. Statement of Commission's Intent, Application of Article, Definitions.

(a) It is the Commission's intent to allow a narrow exception to Regulation 303's prohibition against the Administration or Use of Prohibited Substances and/or Prohibited Methods for those athletes who are medically required to use a Prohibited Substance or Prohibited Method. Such athletes may apply for a Therapeutic Use Exemption (TUE) only as provided by this Article. It is further the Commission's intent to ban all forms of Testosterone Replacement Therapy from use by athletes who are licensed by the commission, except as expressly provided for in Commission Regulations, Chapter 6.

(b) This Article shall apply to all athletes who are licensed by the commission or are participating in commission-regulated events.

(c) Definitions. As used in this Article, the following terms shall have the following meanings:

(1) "Prohibited Substance" is defined in Commission Regulation 303.

(2) "Prohibited Method" is defined in Commission Regulation 303.

(3) "Testosterone Replacement Therapy" or "TRT" means the use of natural or synthetic testosterone to treat or replace a testosterone deficiency in men.

(4) "Board-certified physician" means a licensed doctor of medicine (M.D.) or osteopathy (O.D.), or a nurse practitioner or physician's assistant, in good standing and authorized to practice under state law, and practicing consistent with the laws governing their respective scope of practice in the state in which they are licensed.

§ 425. Application for a Therapeutic Use Exemption (TUE).

(a) A TUE shall not be granted for any form of Testosterone Replacement Therapy except as required by law.

(b) An athlete may apply to the commission for a TUE by submitting an Application for Determination of Therapeutic Use Exemption ([form number/date]). Such application must be complete and received by the commission at least twenty-one (21) days in advance of the event in which the athlete will compete.

(c) Each of the following shall accompany the Application for Determination of Therapeutic Use Exemption:

(1) Medical information, which shall include:

(a) Diagnosis and etiology based upon the treating physician's evaluation.

(b) An evaluation by a Board-certified physician in the appropriate medical field.

(c) Patient medical history, which must be consistent with the standard of practice in the appropriate medical field relevant to the exemption requested.

(d) A physical exam, which must be consistent with the standard of practice in the appropriate medical field relevant to the exemption requested.

(e) A testing/laboratory evaluation, which must be consistent with the standard of practice in the appropriate medical field relevant to the exemption requested.

(f) Pre-fight - Lab data for the Prohibited Substance in question. If a value is found to be out of the normal range, the athlete's medical provider should take action to correct the level by repeating the lab and/or adjusting medication appropriately, which should be documented in the records submitted to the commission.

(g) Day of Fight - Lab data for the therapeutic agent in question. Agent specific levels shall be drawn on the day of Fight.

(h) Name of the Prohibited Substance or Prohibited Method.

(i) Dosage taken or to be taken.

(j) Method of administration.

(k) Duration of treatment.

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(2) A copy of the medical records in which the applicant's medical condition is well documented, and which must reflect that the condition existed prior to any test for a TUE application was performed.

(3) Declaration under penalty of perjury of a Board certified physician in the appropriate field of medicine, attesting that he/she has read and understood this Therapeutic Use Exemption regulation, examined the athlete, and the athlete qualifies for an exemption.

(4) Name and contact details of the applicant's treating physician.

(d) A TUE application shall not be considered complete until the commission concludes there is sufficient medical information to determine the athlete is currently physically fit to compete safely.

(1) A TUE application may be considered incomplete if the commission cannot reasonably verify the current licensure status of the athlete's treating physician or the medical information submitted with the TUE application. If an application is incomplete, the commission may require the athlete to provide medical information, including but not limited to, an examination pursuant to Rule 280, and lab reports from a certified laboratory as designated by the commission.

(2) All costs of providing information to provide a complete Application shall be the athlete's responsibility and information provided pursuant to this Rule shall not be considered a special medical evaluation within the meaning of Business and Professions Code section 18710.

(e) If the athlete intends to compete further in any event or competition that may subject the athlete to drug testing by the commission, the athlete must apply for a separate TUE for any prohibited substance in advance of such event or competition in accordance with the provisions of this Article.

(f) Retroactive Approvals in Emergency or Acute Medical Situations: The time period specified in this Article for submitting an application shall not apply to applications for retroactive approval. Retroactive TUE applications will only be considered in cases where emergency treatment or treatment of an acute medical condition was medically necessary.

(g) An application that is approved pursuant to this Article shall be valid for one approved competition.

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§ 426. Denial of Application, Appeals.

(a) An incomplete TUE application may be deemed denied without further action by the commission.

(b) If the commission reasonably determines based upon the facts and circumstances of a particular application that the TUE application has been submitted for the purpose of enhancing the athlete's performance and/or giving the athlete an advantage over his/her competitor(s), the commission shall deny the application.

(c) A TUE shall not be granted when the commission reasonably concludes that denying the TUE application is in the best interests of protecting the public, or the health and safety of licensed athletes.

(d) If an application for TUE is denied, the athlete may submit an appeal in writing to the commission with seven (7) days of the commission's decision. The commission will set the matter for hearing within 30 days.

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§ 303. Administration or Use of Prohibited Substances, Prohibited Methods.

(a) Intent of the Commission: It is each athlete's personal duty to ensure that no Prohibited Substance enters his or her body. Athletes are responsible for any Prohibited Substance or its metabolites or markers found to be present in their Samples. All athletes licensed by the commission may be required to submit to testing for prohibited substances at any time whether in-competition or out-of-competition and whether or not they have a competition scheduled.

(b) Definitions. As used in this Regulation, the following terms have the following meanings:

(1) The "WADA Prohibited List" refers to the most current edition of "The World Anti-Doping Code, The Prohibited List International Standard (World Anti-Doping Agency) https://www.wada-ama.org/en/resources/science-medicine/prohibited-list which is hereby incorporated by reference.

(2) "Prohibited Substance" means those substances included in the WADA Prohibited List.

(3) "Prohibited Method" means those methods included in the WADA Prohibited List.

(c) Athletes with documented medical conditions requiring the use of a Prohibited Substance or a Prohibited Method in any event sanctioned by the commission or its authorized amateur sanctioning bodies shall request a Therapeutic Use Exemption (TUE) from the commission pursuant to Regulation 424.

(e) A person who applies for or holds a license from the commission and who has at any time tested positive for a Prohibited Substance or Prohibited Method that has been confirmed by any state athletic commission shall be required as a condition of licensure or renewal to provide a urine specimen. In addition, a licensed boxer shall provide a urine specimen for drug testing either before or after the bout, as directed by the commission representative.

(f) A violation of this Regulation shall subject the athlete to administrative enforcement action pursuant to Business and Professions Code section 18841, et seq.

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AGENDA ITEM

5

CALIFORNIA STATE ATHLETIC COMMISSION
Specific Language of Proposed Changes
Transgender Athletes

Add Sections 830, et seq., in Article 1, of Chapter 6, of Division 2, of Title 4 of the California Code of Regulations to read as follows:

Chapter 6. Transgender Athletes

Article 1. General Provisions

§ 830. Definitions.

As used in this Chapter, the following terms have the following meanings:

(a) "Gender Identity" is an individual's internal, deeply-felt sense of being male or female. Everyone has a gender identity, which may or may not correspond to a person's assigned sex at birth.

(b) "Transgender" individuals are people with a gender identity that is different from their assigned sex at birth. A transgender male is a person who lives and identifies as a male, but who was assigned female gender at birth. A transgender female is a person who lives and identifies as female, but who was assigned male gender at birth.

(c) "Gender Dysphoria" refers to the condition described in the United States diagnostic manual (DSM-5 2013). Gender Dysphoria is characterized by intense and persistent discomfort with one's sex characteristics—one's assigned sex. The suffering that arises has often been described as "being trapped in the wrong body."

(d) "Health Care Provider" includes any licensed doctor of medicine (M.D.) or osteopathy (D.O.) in good standing and authorized to practice medicine or surgery in their respective jurisdiction, as well as nurse practitioners or physician's assistants in good standing and authorized to practice and practicing consistent with the laws governing their respective scope of their practice in the jurisdiction in which they are licensed.

(e) "State-licensed physician or Doctor of Osteopathic Medicine" means a licensed doctor of medicine (M.D.) or osteopathy (D.O.) in good standing and authorized to practice under state law and practicing consistent with the laws governing their respective scope of practice in the state in which they are licensed.

(f) "Hormone" means a member of a class of signaling molecules produced by glands in the body that are transported in the blood stream to certain targeted organs to regulate physiology and behavior. Among other things, hormones can regulate or augment mood, weight and strength.

(g) "Application" refers to the Application for Professional Athlete (Form No./Date).

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§ 831. Transgender Female Athletes (Male to Female).

(a) Transgender female (male to female) athletes who are not undergoing hormone therapy and without gonadectomy are eligible for licensure and participation in men's events.

(b) Transgender female athletes shall be eligible for licensure and participation in women's competitions if the commission approves the athlete's Application.

§ 832. Transgender Male Athletes (female to male).

(a) Transgender male (female to male) athletes who are not taking testosterone shall be eligible for licensure and participation in women's events.

(b) A transgender male athlete who is undergoing hormone treatment shall be eligible for licensure and participation in male competitions if the commission approves the athlete's Application.

§ 833. Applications and Appeals.

(a) At least 30 days before the event in which the athlete intends to compete, (1) a transgender female athlete who applies to compete in women's competitions, or (2) a transgender male athlete who applies to compete in men's competitions, shall submit their Application.

(1) No Application will be granted on an emergency basis.

(2) No Application will be granted on a retroactive basis.

(b) Transgender female athletes who apply to compete in women's competitions:

(1) A transgender female athlete who has had a gonadectomy shall also include as part of her Application:

(A) Written confirmation by a State-licensed physician or Doctor of Osteopathic Medicine has confirmed that hormone therapy has been administered by a Health Care Provider for a minimum of 2 years after gonadectomy.

(B) A letter from the State-licensed physician or Doctor of Osteopathic Medicine responsible for the care of the applicant that must include the following:

(i) Name of surgeon who performed the gonadectomy and the date and location of surgery;

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(ii) Initial date hormone therapy began after gonadectomy (and prior to surgery, if relevant);

(iii) Hormone name/type, dose and interval of administration over the past two years;

(iv) Name, dose and duration of any anti-androgen treatment used over the past two years.

(2) A transgender female athlete who is undergoing hormone therapy but has not had a gonadectomy shall also include as part of her Application:

(A) Written confirmation by a State-licensed physician or Doctor of Osteopathic Medicine that hormone therapy has been administered by a Health Care Provider for a minimum of two years.

(B) A letter from the State-licensed physician or Doctor of Osteopathic Medicine responsible for the care of the applicant that must include the following:

(i) Initial date hormone therapy began;

(ii) Hormone name/type, dose and interval of administration over the past two years;

(iii) Lab reports of estradiol and testosterone levels with a goal of serum estradiol levels within the normal range for healthy premenopausal women (lab specific) and suppression of testosterone levels to those normally found in women (lab specific) for the past two years;

(iv) Name, dose and duration of any anti-androgen treatment used over the past two years.

(c) Transgender male athletes who apply to compete in men's competitions:

(A) The athlete's Application shall also include:

(i) Confirmation from a State-licensed physician or Doctor of Osteopathic Medicine that hormone therapy has been administered by a Health Care Provider for a minimum of 2 years.

(ii) A letter from the State-licensed physician or Doctor of Osteopathic Medicine responsible for the care of the applicant that must include the following:

(a) Initial date of hormone therapy;

(b) Hormone name/type, dose and interval of administration for the past six months;

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(iii) Lab reports of estradiol and testosterone levels for the past six months with a goal of serum estradiol levels within the normal range for healthy men (lab specific) and testosterone levels within the range for healthy men (lab specific).

(d) If the commission denies an Application submitted pursuant to this Chapter, the athlete may appeal that decision; such appeal must be submitted in writing to the commission within seven (7) days of the Commission's decision. The commission will set the matter for hearing within thirty (30) days.

§ 834. Provisions Applicable to All Transgender Athletes.

(a) An Application shall not be considered complete until the commission concludes there is sufficient medical information to determine the athlete is currently physically fit to compete safely.

(1) An athlete's Application may be considered incomplete if the commission cannot reasonably verify the current licensure status of the athlete's treating physician or the medical information submitted with the Application. If an Application is incomplete, the commission may require the athlete to provide medical information, including but not limited to, an examination pursuant to Rule 280 that is conducted by a doctor of medicine or osteopathy as assigned by the commission, and lab reports showing Hormone levels (or other related blood work) from a certified laboratory as designated by the commission.

(2) All costs of providing information to provide a complete Application shall be the athlete's responsibility and information provided pursuant to this Rule shall not be considered a special medical evaluation within the meaning of Business and Professions Code section 18710.

(b) Pre-Competition and Day of Competition Testing Requirements:

(1) Transgender female athletes who have not had a gonadectomy and are participating in a female competition:

(a) Two weeks before a scheduled competition, the athlete must submit lab reports of estradiol and testosterone levels for the past six months showing serum estradiol levels within the normal range for healthy premenopausal women (lab specific) and suppression of testosterone levels to those normally found in women (lab specific).

(b) The day prior to any scheduled competition, the athlete must submit on Form PB001 (Date) the time, date, amount and method of the last dose(s) of estradiol used within the past two weeks.

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(c) On the day of any scheduled competition, the athlete's test results for testosterone shall not be above the normal range for healthy premenopausal women.

(2) Transgender male athletes who are participating in a male competition:

(a) Two weeks before a scheduled competition, the athlete must submit lab reports of estradiol and testosterone levels for the past six months showing serum estradiol levels within the normal range for healthy men (lab specific) and testosterone levels within the range for healthy men (lab specific).

(b) The day prior to any scheduled competition, the athlete must submit on Form PB001 (Date) the time, date, amount and method of the last dose(s) of testosterone used within the past two weeks.

(c) On the day of the scheduled competition, the athlete's testosterone levels must not be above the normal range for healthy men (lab specific).

(3) Any level of testosterone above the normal range may result in the athlete's disqualification or other administrative enforcement action.

(4) Repeat elevated testosterone levels during the 6 months prior to the competition may be grounds for disqualification or other administrative enforcement action.

(c) Depending on the facts unique to each applicant, the commission may require or prohibit the use of certain clothing and/or safety equipment in competitions as a condition of licensure.

(d) The commission shall keep the athlete's medical information and application documentation confidential in accordance with applicable state and federal privacy laws.

§ 835. Commission Education.

(a) Commission representatives shall be educated regarding Gender Dysphoria and Transgender athletes to ensure their safe and equal participation in events regulated by the commission.

§ 836. Not Subject to Delegation.

(a) The provisions of this Chapter shall not be delegable by the commission pursuant to Business and Professions Code section 18646.

§ 837. Approved Application Exempt from Rule 303.

(a) An athlete whose Application is submitted pursuant to section 831(b) or 832(b) and is approved under this Chapter shall be exempt from Rule 303, "Administration or Use of

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Prohibited Substances, Prohibited Methods," for only those substances and methods that are identified in the athlete's Application.

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DIVISION 2. STATE ATHLETIC COMMISSION

CHAPTER 1. PROFESSIONAL BOXING RULES

ARTICLE 1. GENERAL PROVISION

§ 201. Citation.

The rules in this chapter shall be cited as the "Professional Boxing Rules."

§ 201.5. Definitions, Gender-neutral pronouns.

As used in this chapter:

(a) "commission" means the State Athletic Commission;

(b) "code" means the Business and Professions Code;

(c) "rules" means the Professional Boxing Rules.

(d) the terms "club" and "promoter" are synonymous and used interchangeably, and include any person, partnership, club, corporation, organization or association conducting, holding or giving boxing contests.

(e) all pronouns are gender-neutral unless the context clearly indicates otherwise.

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AGENDA ITEM

6

STATE OF CALIFORNIA
dca
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.
CALIFORNIA STATE ATHLETIC COMMISSION
2005 Evergreen Street, Suite 2010 | Sacramento, CA 95815
P (916) 263-2195 F (916) 263-2197
csac@dca.ca.gov | www.dca.ca.gov/csac

REQUEST FOR APPEAL
(Pursuant to Rule 389)

This request is to be mailed to the Commission office addresses listed above AND the Office of the Attorney General at 300 South Spring Street, Ste. 5212, Los Angeles, CA 90013

Appellant Name: PABLO CEASAR CALDO

Appellant Address: [redacted]

Appellant Telephone Number: [redacted]

Appellant E-mail Address: [redacted]

Type of License Appellant holds: BOXER

Is Appellant represented by an Attorney? ____ Yes ✓ No If yes, please provide contact information:

Attorney Name: ____

Attorney Address: ____

Attorney Telephone Number: ____

Attorney E-mail Address: ____

Will you require the services of an interpreter? ✓ Yes ____ No If yes, what language? SPANISH

STATEMENT

Provide a detailed statement showing grounds for reduction or dismissal of the fine or suspension, as applicable. Use additional sheets of paper if necessary.

1- I DENY ANY INTENTIONAL USE OF STEROIDS
2- I WAS UNDER DOCTORS CARE AND DID TAKE MEDICINE
3- I HAVE STATEMENTS FROM Doctor
4- I HAVE LIST OF MEDICATIONS
5- I INFORMED FIGHT DOCTOR
6- I forgot To Declare on DOCUMENT

Appellant Signature

5/5/2015
Date of Request

STATE OF CALIFORNIA
dca
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.
CALIFORNIA STATE ATHLETIC COMMISSION
2005 Evergreen Street, Suite 2010 | Sacramento, CA 95815
P (916) 263-2195 F (916) 263-2197
csac@dca.ca.gov | www.dca.ca.gov/csac

April 8, 2015

Pablo Cesar Cano-Garcia
[redacted]

RE: VIOLATION OF CALIFORNIA RULE 303. ADMINISTRATION OR USE OF DRUGS.

Dear Mr. Cano-Garcia:

On February 27, 2015, you competed in the Golden Boy Promotions event at Fantasy Springs Resort Casino. At this event, you were required to provide a urine specimen to test for drugs of abuse and steroids. The California State Athletic Commission (CSAC) has received confirmed laboratory results indicating that your urine specimen has a T/E ratio of 6.3. The threshold T/E ratio is 4.0.

Based on these findings, your Professional Boxing license is hereby **suspended for nine (9) months, beginning February 27, 2015. Additionally, CSAC is issuing you a fine of two-thousand five-hundred dollars ($2,500.00).**

The California Code of Regulations, Title 4, Article 6 Section 303 states:

The administration or use of any drugs, alcohol or stimulants, or injections in any part of the body, either before or during a match, to or by any boxer is prohibited.

Per Business and Professions Code 18842, you have a right to appeal this suspension before the Athletic Commission. You must submit your appeal request, in writing, within **30 days** of the date of this letter. Upon receipt of your request, your appeal will be included on the agenda for the next available Commission meeting.

Please contact the CSAC office at (916) 263-2195 or csac@dca.ca.gov, if you have any questions regarding this matter.

Sincerely,

Andy Foster
Executive Officer
California State Athletic Commission

Enclosure(s): Appeal Request Form
March 24, 2015 - Drug Testing Report CSAC174 (8LP04)
April 2, 2015 - Carbon Isotope Ratio Report CSAC174

STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.
CALIFORNIA STATE ATHLETIC COMMISSION
2005 Evergreen Street, Suite 2010 | Sacramento, CA 95815
P (916) 263-2195 F (916) 263-2197
csac@dca.ca.gov | www.dca.ca.gov/csac

May 5, 2015

Pablo Ceasar Cano
[redacted]

RE: NOTICE OF HEARING

Dear Mr. Cano:

The California State Athletic Commission (Commission) has received your request for appeal. The Commission will hear this item at its next scheduled meeting. The meeting details are as follows:

Meeting Date & Time: June 23, 2015 at 10:00 a.m.

Meeting Location: Los Angeles State Building - Auditorium
300 South Spring Street
Los Angeles, CA 90013

Please contact the Commission via e-mail at csac@dca.ca.gov or by telephone at (916) 263-2195 to confirm your attendance at this Commission meeting.

Sincerely,

Sophia Cornejo

Sophia Cornejo
Assistant Executive Officer
California State Athletic Commission

AGENDA ITEM

8b

ATHLETIC COMMISSION FY 2014-15 EXPENDITURE PLANNING VS ACTUAL SPENDING

Updated with FM11 Calstars

	14-15 Budget Act	ACTUAL July	ACTUAL August	ACTUAL September	ACTUAL October	ACTUAL November	ACTUAL December	ACTUAL January	ACTUAL February	ACTUAL March	ACTUAL April	ACTUAL May	PROJECTED June	Proposed Expenditure	ACTUAL Expenditure
PERSONAL SERVICES:															
Civil Service-Perm	305,090	$ 16,954	$ 17,435	$ 15,139	$ 18,353	$ 19,809	$ 21,591	$ 18,597	$ 18,564	$ 18,572	$ 18,564	$ 23,369	$ 33,053	$ 240,000	$ 206,947
Statutory-Exempt (EO)	89,460	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,781	$ 9,679	$ 5,352	$ 91,248	$ 85,896
Athletic Inspectors	237,680	$ -	$ 18,459	$ 26,580	$ 12,686	$ 18,800	$ 19,426	$ 13,227	$ 13,145	$ 13,361	$ 12,206	$ 36,126	$ 15,984	$ 200,000	$ 184,016
Board/Commission	4,500	$ -		$ 600	$ -	$ 500	$ -	$ -	$ -	$ 1,100	$ -	$ 600	$ 485	$ 3,285	$ 2,800
Temporary Help	-	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 3,567	$ 2,088	$ 4,708	$ 28,255	$ 23,547
Overtime		$ -	$ 398	$ 87	$ -	$ -	$ 315	$ -	$ -	$ 470	$ -	$ -	$ 255	$ 1,525	$ 1,270
Staff Benefits	246,877	$ 13,575	$ 16,168	$ 14,575	$ 17,979	$ 18,561	$ 22,439	$ 18,623	$ 18,886	$ 19,045	$ 19,291	$ 22,108	$ 25,240	$ 226,490	$ 201,250
TOTAL, PERSONAL SERVICES	**883,607**	$ 40,121	$ 62,052	$ 66,573	$ 58,610	$ 67,262	$ 73,363	$ 60,039	$ 60,187	$ 62,140	$ 61,409	$ 93,970	$ 85,077	$ 790,803	$ 705,726
OPERATING EXPENSE AND EQUIPMENT															
Fingerprints	-	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 49	$ -	$ -	$ 49	$ 49
General Expense	36,562	$ -	$ 1,707	$ 1,604	$ 1,700	$ 3,512	$ 3,589	$ 3,391	$ 2,545	$ 1,616	$ 3,720	$ 1,185	$ 5,431	$ 30,000	$ 27,368
Printing	11,000	$ -	$ -	$ -	$ 483	$ 417	$ 11	$ 1,371	$ 417	$ 95	$ -	$ 542	$ 956	$ 4,292	$ 3,789
Communication	11,000	$ 4	$ 41	$ 34	$ 83	$ 59	$ 59	$ 102	$ 30	$ 73	$ 30	$ 35	$ 593	$ 1,143	$ 550
Postage	8,635	$ -	$ 416	$ 168	$ 170	$ 184	$ 84	$ 77	$ 55	$ 108	$ -	$ 314	$ 316	$ 1,892	$ 1,576
Travel In State	129,600	$ -	$ 13,745	$ 11,438	$ 11,737	$ 1,729	$ 15,564	$ 8,811	$ 1,660	$ 9,233	$ 7,888	$ 17,156	$ 16,039	$ 115,000	$ 98,961
Travel Out of State							$ 390	$ -	$ -	$ -	$ -	$ -	$ 35	$ 425	$ 390
Training	6,000	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,000	$ 1,000	$ -
Facilities Operations	62,640	$ 5,243	$ 5,573	$ 5,243	$ 5,568	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,009	$ 64,331	$ 64,331
C/P Services - Internal	25,000	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 5,000	$ 5,000	$ -
C/P Services - External	31,860	$ -	$ 10,280	$ 16,073	$ 9,629	$ 2,100	$ 7,576	$ 4,725	$ -	$ -	$ 17,653	$ 17,351	$ 7,761	$ 93,148	$ 85,387
DCA Pro Rata	170,836	$ -	$ 41,506	$ -	$ 41,508	$ -	$ -	$ 41,507	$ -	$ -	$ 38,188	$ -	$ 8,127	$ 170,836	$ 162,709
DEPARTMENTAL SERVICES														$ -	$ -
DP Maintenance & Supplies	1,000	$ -	$ 2,800	$ -	$ -	$ -	$ -	$ 500	$ -	$ 1,400	$ -	$ -	$ -	$ 4,700	$ 4,700
Central (State) Adm Pro Rata	3,576	$ -	$ 894	$ -	$ -	$ 894	$ -	$ -	$ 894	$ -	$ -	$ 894	$ -	$ 3,576	$ 3,576
ENFORCEMENT														$ -	$ -
Attorney General	48,000	$ -	$ 7,968	$ 17,586	$ 7,019	$ 13,283	$ 9,203	$ 12,773	$ 1,563	$ 7,800	$ 1,812	$ 5,825	$ 15,168	$ 100,000	$ 84,832
Major Equipment	-	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Minor Equipment	-	$ -	$ -	$ 1,226		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,226	$ 1,226
TOTALS, OE&E	**545,709**	$ 5,247	$ 84,930	$ 53,372	$ 77,897	$ 27,563	$ 41,861	$ 78,642	$ 12,549	$ 25,710	$ 74,725	$ 48,687	$ 65,435	$ 596,618	$ 539,444
TOTAL EXPENSE	**1,429,316**	$ 45,368	$ 146,982	$ 119,945	$ 136,507	$ 94,825	$ 115,224	$ 138,681	$ 72,736	$ 87,850	$ 136,134	$ 142,657	$ 150,512	$ 1,387,421	$ 1,245,170

AG average monthly exp:	$7,712
average tot monthly exp:	$112,446
projected over/under:	2.9%
projected over/under:	$41,895

ATHLETIC COMMISSION FY 2014-15 EXPENDITURE PLANNING VS ACTUAL SPENDING

Updated with FM11 Calstars

	14-15 Budget Act	ACTUAL July	ACTUAL August	ACTUAL September	ACTUAL October	ACTUAL November	ACTUAL December	ACTUAL January	ACTUAL February	ACTUAL March	ACTUAL April	ACTUAL May	PROJECTED June	Proposed Expenditure	ACTUAL Expenditure
PERSONAL SERVICES:															
Civil Service-Perm	305,090	$ 16,954	$ 17,435	$ 15,139	$ 18,353	$ 19,809	$ 21,591	$ 18,597	$ 18,564	$ 18,572	$ 18,564	$ 23,369	$ 33,053	$ 240,000	$ 206,947
Statutory-Exempt (EO)	89,460	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,604	$ 7,781	$ 9,679	$ 5,352	$ 91,248	$ 85,896
Athletic Inspectors	237,680	$ -	$ 18,459	$ 26,580	$ 12,686	$ 18,800	$ 19,426	$ 13,227	$ 13,145	$ 13,361	$ 12,206	$ 36,126	$ 15,984	$ 200,000	$ 184,016
Board/Commission	4,500	$ -		$ 600	$ -	$ 500	$ -	$ -	$ -	$ 1,100	$ -	$ 600	$ (219)	$ 2,581	$ 2,800
Temporary Help	-	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 1,988	$ 3,567	$ 2,088	$ 5,065	$ 28,612	$ 23,547
Overtime		$ -	$ 398	$ 87	$ -	$ -	$ 315	$ -	$ -	$ 470	$ -	$ -	$ 425	$ 1,695	$ 1,270
Staff Benefits	246,877	$ 13,575	$ 16,168	$ 14,575	$ 17,979	$ 18,561	$ 22,439	$ 18,623	$ 18,886	$ 19,045	$ 19,291	$ 22,108	$ 36,546	$ 237,796	$ 201,250
TOTAL, PERSONAL SERVICES	**883,607**	$ 40,121	$ 62,052	$ 66,573	$ 58,610	$ 67,262	$ 73,363	$ 60,039	$ 60,187	$ 62,140	$ 61,409	$ 93,970	$ 96,206	$ 801,932	$ 705,726
OPERATING EXPENSE AND EQUIPMENT															
Fingerprints	-	$ -	$ -	$ -		$ -					$ 49	$ -	$ -	$ 49	$ 49
General Expense	36,562	$ -	$ 1,707	$ 1,604	$ 1,700	$ 3,512	$ 3,589	$ 3,391	$ 2,545	$ 1,616	$ 3,720	$ 1,185	$ 5,431	$ 30,000	$ 24,569
Printing	11,000	$ -	$ -	$ -	$ 483	$ 417	$ 11	$ 1,371	$ 417	$ 95	$ -	$ 542	$ 902	$ 4,238	$ 3,336
Communication	11,000	$ 4	$ 41	$ 34	$ 83	$ 59	$ 59	$ 102	$ 30	$ 73	$ 30	$ 35	$ 520	$ 1,070	$ 550
Postage	8,635	$ -	$ 416	$ 168	$ 170	$ 184	$ 84	$ 77	$ 55	$ 108	$ -	$ 314	$ (655)	$ 921	$ 1,576
Travel In State	129,600	$ -	$ 13,745	$ 11,438	$ 11,737	$ 1,729	$ 15,564	$ 8,811	$ 1,660	$ 9,233	$ 7,888	$ 17,156	$ 16,039	$ 115,000	$ 98,961
Travel Out of State							$ 390	$ -	$ -	$ -	$ -	$ -	$ 78	$ 468	$ 390
Training	6,000	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,000	$ 1,000	$ -
Facilities Operations	62,640	$ 5,243	$ 5,573	$ 5,243	$ 5,568	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 5,385	$ 4,899	$ 64,221	$ 59,322
C/P Services - Internal	25,000	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 5,000	$ 5,000	$ -
C/P Services - External	31,860	$ -	$ 10,280	$ 16,073	$ 9,629	$ 2,100	$ 7,576	$ 4,725	$ -	$ -	$ 17,653	$ 17,351	$ (3,745)	$ 81,642	$ 85,387
DCA Pro Rata	170,836	$ -	$ 41,506	$ -	$ 41,508	$ -	$ -	$ 41,507	$ -	$ -	$ 38,188	$ -	$ 8,127	$ 170,836	$ 162,709
DEPARTMENTAL SERVICES													$ -	$ -	$ -
DP Maintenance & Supplies	1,000	$ -	$ 2,800	$ -	$ -	$ -	$ -	$ 500	$ -	$ 1,400	$ -	$ -	$ -	$ 4,700	$ 4,700
Central (State) Adm Pro Rata	3,576	$ -	$ 894	$ -	$ -	$ 894	$ -	$ -	$ 894	$ -	$ -	$ 894	$ -	$ 3,576	$ 3,576
ENFORCEMENT													$ -	$ -	$ -
Attorney General	48,000	$ -	$ 7,968	$ 17,586	$ 7,019	$ 13,283	$ 9,203	$ 12,773	$ 1,563	$ 7,800	$ 1,812	$ 5,825	$ 15,168	$ 100,000	$ 84,832
Major Equipment	-	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Minor Equipment	-	$ -	$ -	$ 1,226		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,226	$ 1,226
TOTALS, OE&E	**545,709**	$ 5,247	$ 84,930	$ 53,372	$ 77,897	$ 27,563	$ 41,861	$ 78,642	$ 12,549	$ 25,710	$ 74,725	$ 48,687	$ 52,764	$ 583,947	$ 531,183
TOTAL EXPENSE	**1,429,316**	$ 45,368	$ 146,982	$ 119,945	$ 136,507	$ 94,825	$ 115,224	$ 138,681	$ 72,736	$ 87,850	$ 136,134	$ 142,657	$ 148,970	$ 1,385,879	$ 1,236,909

AG average monthly exp:	$7,712
average tot monthly exp:	$112,446
projected over/under:	3.0%
projected over/under:	$43,437

Athletic Commission Fund Revenue

Fund 0326

Updated with Revenue Info from Calstars

	Projected Revenue	Actual Revenue*	YTD Difference
FY 2014-15			
July	$ 141,471	$ 103,479	$ -37,991
August	$ 141,471	$ 180,950	$ 1,488
September	$ 141,471	$ 209,030	$ 69,048
October	$ 141,471	$ 128,525	$ 56,102
November	$ 141,471	$ 86,235	$ 867
December	$ 141,471	$ 39,596	$ -101,008
January	$ 141,471	$ 108,838	$ -133,641
February	$ 141,471	$ 56,895	$ -218,216
March	$ 141,471	$ 232,034	$ -127,653
April	$ 141,471	$ 197,634	$ -71,489
May	$ 141,471	$ 261,190	$ 48,230
June	$ 141,471		
FM 13			
FY 2014-15 Total	$ 1,697,647	$ 1,604,406	$ 48,230

* Actual Revenue based on monthly Calstars reports and includes processing lags

Athletic Commission Expenditures

Fund 0326

Updated with Expenditure Info from Calstars

	Projected Expenditures	Actual Expenditures	YTD Difference
FY 2014-15 Total			
July	$ 104,415	$ 45,368	$ -59,047
August	$ 147,599	$ 146,982	$ -59,664
September	$ 103,990	$ 119,945	$ -43,708
October	$ 114,331	$ 136,504	$ -21,535
November	$ 121,064	$ 94,825	$ -47,774
December	$ 74,608	$ 115,224	$ -7,158
January	$ 121,157	$ 138,681	$ 10,366
February	$ 118,730	$ 72,736	$ -35,628
March	$ 130,614	$ 87,850	$ -78,391
April	$ 117,882	$ 136,133	$ -60,140
May	$ 117,882	$ 142,657	$ -35,366
June	$ 117,882		
FM 13			
FY 2014-15 Total	$ 1,390,153	$ 1,236,905	$ -35,366

FY 14-15 Actual Cashflow of Athletic Commission Fund

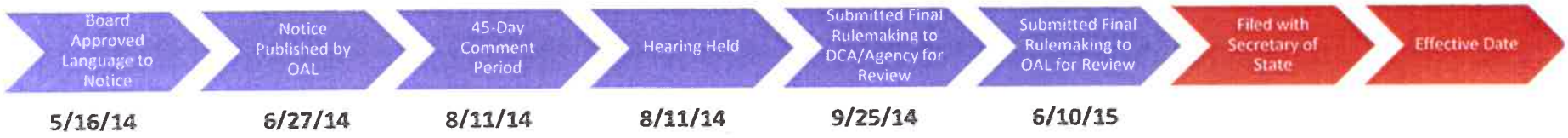
Fund 0326

Based on Monthly Calstars Reports

	Revenue	Expenditures	Balance	Comments
CY 2014-15				
Beginning balance:			$ 501,000	FY 2013-14 Closing Balance
July	$ 103,479	$ 45,368	$ 559,111	Actual Revenue and Expenditures based on FM01 Calstars
August	$ 180,950	$ 146,982	$ 593,079	Actual Revenue and Expenditures based on FM02 Calstars
September	$ 209,030	$ 119,945	$ 682,164	Actual Revenue and Expenditures based on FM03 Calstars
October	$ 128,525	$ 136,504	$ 674,185	Actual Revenue and Expenditures based on FM04 Calstars
November	$ 86,235	$ 94,825	$ 665,595	Actual Revenue and Expenditures based on FM05 Calstars
December	$ 39,596	$ 115,224	$ 589,967	Actual Revenue and Expenditures based on FM06 Calstars
January	$ 108,838	$ 138,681	$ 560,124	Actual Revenue and Expenditures based on FM07 Calstars
February	$ 56,895	$ 72,736	$ 544,283	Actual Revenue and Expenditures based on FM08 Calstars
March	$ 232,034	$ 87,850	$ 688,467	Actual Revenue and Expenditures based on FM09 Calstars
April	$ 197,634	$ 136,133	$ 749,968	Actual Revenue and Expenditures based on FM10 Calstars
May	$ 261,190	$ 142,657	$ 868,501	Actual Revenue and Expenditures based on FM11 Calstars
June	$ -	$ -	$ -	Actual Revenue and Expenditures based on FM12 Calstars
FM 13	$ -	$ -	$ -	Actual Revenue and Expenditures based on FM13 Calstars
FY 2013-14 Total	$ 1,604,406	$ 1,236,905		

Boxer Pension Plan

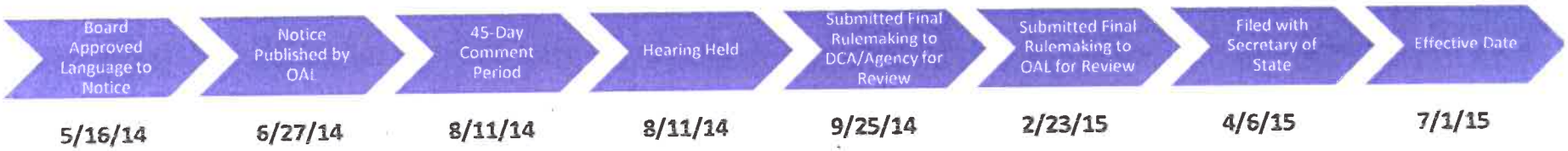
OAL File Number: Z-2014-0616-04



STATUS: Pending at OAL for approval.

Television Broadcast Fee

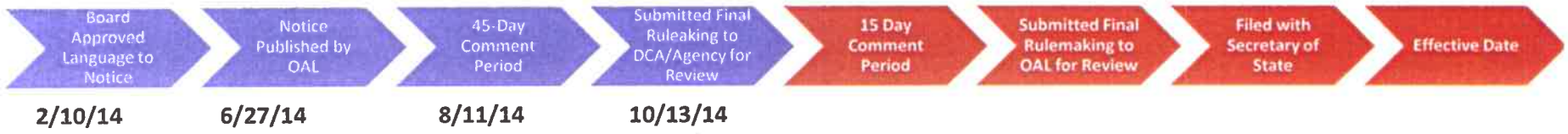
OAL File Number: Z-2014-0616-01



STATUS: **COMPLETE!**

Transgender Athletes

OAL File Number: Z-2014-0616-03



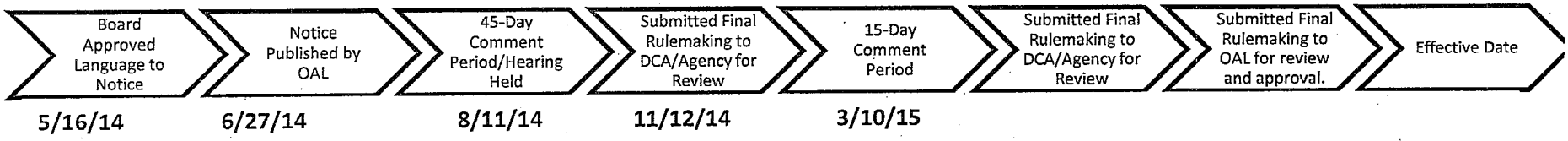
STATUS: This package will die - we are combining this proposal with the Therapeutic Use Exemption proposed language.

Therapeutic Use Exemption

STATUS: TUE/Transgender workgroup made modifications to the proposed language. The proposal is up for vote at the 6/23/15 CSAC Meeting.

Neurological Assessment

OAL File Number: Z-2014-0616-03



STATUS: This regulation package will expire 6/26/15. This doesn't give staff enough time to complete the package due to many amendments that had to be made. We will re-publish this package in July 2015.

AGENDA ITEM

8d

STATE OF CALIFORNIA
dca
DEPARTMENT OF CONSUMER AFFAIRS

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR EDMUND G. BROWN JR.
CALIFORNIA STATE ATHLETIC COMMISSION
2005 Evergreen Street, Suite 2010 | Sacramento, CA 95815
P (916) 263-2195 F (916) 263-2197
csac@dca.ca.gov | www.dca.ca.gov/csac

CSAC Catastrophic Incident/Injury Plan

Definition of a Catastrophic Incident/Injury

For the purposes of the California State Athletic Commission (Commission), the term *catastrophic injury* is defined as any severe injury incurred during participation in a Commission regulated combat sports event. An evacuation plan shall be initiated by the Ringside Physician and carried out by the on-site paramedics.

Catastrophic injuries are categorized as follows:

- **Fatal**
- **Nonfatal**: permanent, severe functional disability
- **Serious**: no permanent functional disability but severe injury; for example, a fractured cervical vertebra without paralysis

Sport-related injuries are also considered direct or indirect.

- **Direct**: injuries resulting directly from participation in the skills of the sport
- **Indirect**: injuries caused by systemic failure as a result of exertion while participating in a sport activity or by a complication secondary to a nonfatal injury

I. Incident Management Team

The Commission Management and Response Team shall consist of: the Lead Athletic Inspector, the Executive Officer (EO) or Assistant Executive Officer (AEO), the Chair of the Commission (Chair), the Senior Deputy Attorney General (DAG), and the Department of Consumer Affairs (DCA) Press Secretary.

II. Evidence Retention

The Lead Inspector shall impound the gloves and the wraps of the fighter not catastrophically injured and any other key evidence. The Commission may impound the gloves and wraps of the catastrophically injured athlete and any other key evidence, when practical.

III. Notification Protocol

The Lead Inspector shall notify the EO of the incident with as many facts that are available as soon as possible. The EO shall notify the Chair, the DCA Press Secretary and the DAG as soon as possible. The DCA Press Secretary, working with the EO and the Chair, shall then promptly draft a statement for the press.

IV. Transfer of Medical Care

Once the Paramedics are engaged and the evacuation plan has begun, the Ringside Physician relinquishes all responsibility and liability for providing care. After this transfer of care, the Ringside Physician should make no comment, suggestion or further inquiry concerning the injury or incident.

V. Press Response

The EO will promptly appoint one person to respond to the press. All other Commission staff and officials shall not speak to the press regarding this matter without the EO or the Chair's request/approval. Any approved response to the press must be brief, and not speculative. (i.e., "The Commission will be starting an investigation into the circumstances."; "The Commission will be reviewing available video and debriefing the officials that were on-site."; etc.) Any and all opinions/judgments of the situation are to ONLY be made by the Chair and the EO of the Commission.

VI. Investigation

The EO shall promptly request and manage an investigation on the catastrophic injury. All material evidence and written statements shall be sent to the Commission office by the Lead Inspector immediately following the event.

AGENDA ITEM

8f - CAMO

May 28, 2015

To: California State Athletic Commission

From: California Amateur Mixed Martial Arts Organization, Inc. ("CAMO")

Re: CAMO UPDATE / DOCUMENT REQUEST

Below and attached please find a CAMO report and list of documents and information you requested pursuant to CAMO's delegation issued December 16, 2013 ri Sacramento, CA

1. **CAMO BY-LAWS:**

No change. Latest revised: CAMO By-Laws 6.16.2009

2. **REGULATIONS, GUIDELINES AND SAFETY PROCEDURES FOR COMPETITORS:**

No Change. Latest revised: CAMO Amateur Mixed Martial Arts Rules and Regulations ("AMMA Rules and Regulations") version 9.18.2013. The AMMA Rules and Regulations are available to all stakeholders via the CAMO website: www.camomma.org under he "Rules" tab.

In onjunction with the CSAC and Executive Officer Andy Foster, CAMO will be developing the first MMA regulations to address the issue of weight cutting and dehydration. CAMO will adopt regulations and procedures that will expand the CAMO Athlete Physical Examination to include a test to determine lean body mass and a corresponding *minimum competition weight.* Itis anticipated that these regulations will maximize fighter safety by educating fighters about the limits of their bodies and competing at healthy bodyweight. There will be much discussion and exploration of this topic in months to come.

CAMO will also be implementing random drug-testing this year making it the first amateur program in the country to administer a drug-testing program. CAMO inspectors are currently training with CSAC inspectors in order that our procedures and protocol are substantially similar and sound. We appreciate the support of the CSAC and Andy Foster in this measure and look forward to a full-scale implementation soon.

3. **REGULATIONS, GUIDELINES AND SAFETY PROCEDURES FOR INSPECTORS:**

No Change. Latest revised: AMMA Rules and Regulations version 9.18.2013. The AMMA Rules and Regulations are available to all stakeholders via the CAMO website: www.camomma.org under he "Rules" tab.

No Change. Latest revised: CAMO Inspector Manual 7.24.2010

10. PLAN FOR REGULATING PRO-AM EVENTS AND ASSOCIATED FEES:

No change. Latest revised: CAMO Pro-Am Update memo 7.30.2013

The plan for regulating pro-am events has served us well over the past year and CSAC and CAMO seem to be working well together. CAMO is always happy to provide a supportive role for these types of events and wherever possible.

11. SCHEDULE OF NON-EVENT FEES:

Insurance: No change. Latest revised: Event Insurance Form version 10.7.2013

Equipment: Effective October 1, 2013 CAMO discontinued the automatic distribution of competition gloves/rashguards to athletes. CAMO has liquidated all equipment inventories and made all approved gloves commercially available to stakeholders through independent retailers.

In 2014we have seen some unintended consequences from the removal of the CAMO gloves from the program. Fighters struggle to source approved gloves from onlne retailers in a timely fashion prior to their bout and, in result, teams are sharing more gloves and those in circulation have deteriorated a bit due to overuse. We believe we can curb this trend by proving a low-cost glove to be made available for purchase at events, should there be a need. We are exploring some new offshore manufacturing opportunities to produce a high quality but low cost alternative glove for the fighters.

National MMA ID Cards: No Change. Latest revised: CAMO Official Event Fee Schedule version 12.3.2013.

12. SCHEDULE/CALENDAR OF EVENTS:

The CAMO Event Calendar is available to all stakeholders via the CAMO website: www.camomma.org under he "Events" tab and continuously updated to reflect all approved events, in real time. A current copy of the event schedule is attached hereto as Exhibit #1.

13. CURRENT FILINGS WITH THE IRS AND STATE FRANCHISE TAX BOARD:

Tax filings for fiscal year 2012-2013 are now complete, filed, and also attached hereto as Exhibit #5. CAMO's current fiscal year 2014 ends May 31, 2015 and those filings are currently being professionally prepared. Please be reminded that fiscal year 2013 was the transition year when CEO, Jeremy Lappen, resigned ("Transition"). Therefore, Lappen's wages for a partial year of employment are demonstrated in this return. Hease also be aware that the salary for JT Steele is reported at $85,000 which is $5,000 more than the approved salary. The difference is due to a delayed payment period at the time of Transition. The AMMA Sub Committee was made aware that this difference would appear on the 2013 return and this provision is for reminder purposes only. The salary of JT Steele remains at $80,000 per year and there has been no increase, performance bonus or otherwise since 2013.

14. INDEX OF ALL PENDING LITIGATION:

CAMO is not a party to any current litigation and has not been party to any past litigation. CAMO, to the best of its knowledge, is also not a party to any pending litigation.

15. REPORT DETAILING ALL CAMO REVENUE STREAMS FOR LAST YEAR AND YEAR TO DATE:

All CAMO revenue streams are reported through a standard profit and loss statement. A current (October) and year to date copy of CAMO's profit and loss statement is attached hereto as Exhibit #2.

16. PLAN FOR FEDERAL IDENTIFICATION CARDS:

EXHIBIT #1

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Upcoming Events in All regions **region** [create]

Event Name	Date	Region	Location	Actions
Dragon House	08/22/2015		Kezar Pavillion	view fights edit officials needs delete
559 Fights 38	08/28/2015		Visalia's Rawhide Stadium	view fights edit officials needs delete
Titans Cage	09/12/2015		Red Lion Woodlake Hotel	view fights edit officials needs delete
Roy Englebrecht Promotions	09/18/2015		Pacific Views Event Center	view fights edit officials needs delete
Spar Star	10/03/2015		Hollywood Park Casino	view fights edit officials needs delete
Roy Englebrecht Promotions	10/03/2015		LA Sports Arena	view fights edit officials needs delete
California Fight League	10/03/2015		Mavericks Stadium	view fights edit officials needs delete
559 Fights 39	10/11/2015		Fresno Fair	view fights edit officials needs delete
559 Fights 40	11/06/2015		Visalia's Holiday Inn	view fights edit officials needs delete
No Limit Fighting	11/21/2015		Madera Fair Grounds	view fights edit officials needs delete
Spar Star	11/28/2015		Hollywood Park Casino	view fights edit officials needs delete
Roy Englebrecht Promotions	12/05/2015		LA Sports Arena	view fights edit officials needs delete
559 Fights 41	12/11/2015		Fresno's Valdez Hall	view fights edit officials needs delete

<< < 1 2 > >> Show all

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PO Box 4641
Riverside CA 92514
PH: 213-908-2185
FAX: 213-908-2186 or 888-663-9915

California Amateur Mixed Martial Arts Organization, Inc.
Profit and Loss Standard
December 2014

	Dec '14
Ordinary Income/Expense	
Income	
Gloves - Income	80
License Fees	
Event Fees	7100
Insurance Fees	8660
License Fees	
Corner Licenses	1120
Inspector Licenses	25
Judge Licenses	0
MMA Licenses	2400
National ID Licenses	660
Promoter Licenses	1000
Referee Licenses	0
Timekeeper Licenses	0
Total License Fees	5205
License Fees - Other	0
Total License Fees	20965
Total Income	21045
Cost of Goods Sold	
Event Expense	
Insurance - Event	7590
Total Event Expense	7590
Total COGS	7590
Gross Profit	13455
Expense	
Business Expenses	
Meals and Entertainment	250.38
Miscellaneous	129.57
Total Business Expenses	379.95
Contract Services	
Legal Fees	36
Outside Contract Services	300
Total Contract Services	336
Event Expenses	
Judge Fees	350
Total Event Expenses	350
Facilities, Computers and Equip	
Depreciation and Amortization	73.88
Total Facilities, Computers and Equip	73.88
Operations	
Insurance - Health	229.54
Office Exp - Printing/Postage	213.33
Supplies	518.92
Telephone/Cell Phones/Internet	719.19
Transportation	312.79
Total Operations	1993.77
Other Types of Expenses	

California Amateur Mixed Martial Arts Organization, Inc.
Profit and Loss Standard
January 2015

	Jan '15
Ordinary Income/Expense	
Income	
Gloves - Income	160
License Fees	
Event Fees	4975
Insurance Fees	5925
License Fees	
Corner Licenses	940
Inspector Licenses	225
Judge Licenses	0
MMA Licenses	4650
National ID Licenses	740
Promoter Licenses	1500
Referee Licenses	240
Timekeeper Licenses	25
License Fees - Other	-565
Total License Fees	7755
License Fees - Other	-565
Total License Fees	18090
Total Income	18250
Cost of Goods Sold	
Event Expense	
Insurance - Event	5250
Total Event Expense	5250
Total COGS	5250
Gross Profit	13000
Expense	
Contract Services	
Legal Fees	18
Web Design	1126
Total Contract Services	1144
Facilities, Computers and Equip	
Depreciation and Amortization	73.88
Total Facilities, Computers and Equip	73.88
Operations	
Insurance - Health	1153.31
Office Exp - Printing/Postage	614.92
Supplies	479.13
Telephone/Cell Phones/Internet	467.66
Transportation	312.79
Total Operations	3027.81
Payroll Expenses	
Non-Officer Salaries	3250
Officer Salaries	
JT Steele	6666.66
Total Officer Salaries	6666.66
Payroll Expenses - Other	760.56
Total Payroll Expenses	10677.22

California Amateur Mixed Martial Arts Organization, Inc.
Profit and Loss Standard
February 2015

	Feb '15
Ordinary Income/Expense	
Income	
Gloves - Income	40
License Fees	
Event Fees	5828
Insurance Fees	7542.2
License Fees	
Corner Licenses	1240
Inspector Licenses	175
Judge Licenses	120
MMA Licenses	4500
National ID Licenses	960
Promoter Licenses	3000
Referee Licenses	240
Timekeeper Licenses	25
Total License Fees	10260
License Fees - Other	0
Total License Fees	23630.2
Total Income	23670.2
Cost of Goods Sold	
Event Expense	
Insurance - Event	6825
Total Event Expense	6825
Total COGS	6825
Gross Profit	16845.2
Expense	
Business Expenses	
Meals and Entertainment	98.58
Total Business Expenses	98.58
Contract Services	
Accounting Fees	600
Legal Fees	108
Outside Contract Services	300
Total Contract Services	1008
Facilities, Computers and Equip	
Depreciation and Amortization	73.88
Total Facilities, Computers and Equip	73.88
Operations	

California Amateur Mixed Martial Arts Organization, Inc.
Balance Sheet Standard
As of December 31, 2014

	Dec 31, '14
ASSETS	
Current Assets	
Checking/Savings	
Business Advantage Checking	-175.71
Interest Maximizer	25
Merchant Checking	57066
Total Checking/Savings	56915
Other Current Assets	
Undeposited funds	5939.3
Total Other Current Assets	5939.3
Total Current Assets	62854
Fixed Assets	
Accum Amort - Website	-7312.5
Accum Dep - Computers & Equp	-3954
Computers and Equipment	6311.4
Website	7312.5
Total Fixed Assets	2357.4
TOTAL ASSETS	65212
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	16851
Total Accounts Payable	16851
Other Current Liabilities	
Accrued Event Insurance Expense	5950
Payroll Liabilities	1277.2
Total Other Current Liabilities	7227.2
Total Current Liabilities	24078
Total Liabilities	24078
Equity	
Unrestricted Net Assets	-1957.1
Net Income	43091
Total Equity	41134
TOTAL LIABILITIES & EQUITY	65212

California Amateur Mixed Martial Arts Organization, Inc.
Balance Sheet Standard
As of February 28, 2015

	Feb 28, '15
ASSETS	
Current Assets	
Checking/Savings	
Business Advantage Checking	2452.03
Interest Maximizer	25
Merchant Checking	44994.94
Total Checking/Savings	47471.97
Other Current Assets	
Undeposited funds	8785.44
Total Other Current Assets	8785.44
Total Current Assets	56257.41
Fixed Assets	
Accum Amort - Website	-7312.5
Accum Dep - Computers & Equp	-4101.8
Computers and Equipment	6311.41
Website	7312.5
Total Fixed Assets	2209.61
TOTAL ASSETS	58467.02
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	9025.58
Total Accounts Payable	9025.58
Other Current Liabilities	
Accrued Event Insurance Expens	6405
Payroll Liabilities	1277.18
Total Other Current Liabilities	7682.18
Total Current Liabilities	16707.76
Total Liabilities	16707.76
Equity	
Unrestricted Net Assets	41133.93
Net Income	625.33
Total Equity	41759.26
TOTAL LIABILITIES & EQUITY	58467.02

EVENT FEES

DATE	EVENT	PROMOTER	TYPE	EVENT NUMBER	CREDIT USED	PAID	EVENT FEE	Refunded (dropped bouts)	TOTAL
1/16/15	559 Fights 32	Joey Perez	AA	AA2015.003		$1,000.00	$1,000	$75	
1/17/15	Spar Star	Tony Padilla	AA	AA2015.004		$1,500.00	$1,500	$0	
1/23/15	WCS	Gabe Scarpelli	AA	AA2015.005		$1,300.00	$1,300	$150	
1/24/15	Archangel Worldwide	Terril Johnson	AA	AA2015.002		$1,500.00	$1,500	$100	
TOTAL	**Jan-15**				**$0.00**	**$5,300.00**	**$5,300.00**	**$325.00**	**$4,975.00**
2/7/15	California Fight League	Geoff Hinds	AA	AA2015.001		$1,500.00	$1,500	$0	
2/21/15	Central Coast Throwdown	Michael MacNeill	AA	AA2015.006	$105.00	$1,395.00	$1,500	$0	
2/21/15	Get Down	Juliano Prado	AA	AA2015.007		$1,150.00	$1,150	$73	
2/27/15	559 Fights 33	Joey Perez	AA	AA2015.008	$315.00	$985.00	$1,300	$0	
2/28/15	West Coast Fighting	Branden Ware	PA	PA2015.001		$500.00	$500	$49	
TOTAL	**Feb-15**				**$420.00**	**$5,530.00**	**$5,950.00**	**$122.00**	**$5,828.00**
3/8/15	U of MMA	Turi Altavilla	AA	AA2015.009		$1,800.00	$1,800	$0	
3/14/15	Capital Combat	Justin McClain	AA	AA2015.010		$1,450.00	$1,450	$146	
3/14/15	Knockout Promotions	(Tracy Hess)	AA	AA2015.012		$1,150.00	$1,150	$0	
3/21/15	Fight Factory	Sayed Qubadi	AA	AA2015.014		$1,150.00	$1,150	$75	
3/21/15	Archangel Worldwide	Terril Johnson	AA	AA2015.015		$1,300.00	$1,300	$0	
3/23/15	Fluxx Fight Night	Joey Perez	AA	AA2015.016		$1,500.00	$1,500	$0	
3/28/15	CA Fight Syndicate	Shawn Morey	AA	AA2015.011		$1,450.00	$1,450	$0	
3/28/15	Spar Star	Tony Padilla	AA	AA2015.017		$1,500.00	$1,500	$0	
3/28/15	Hoplite Fight Prod.	Theofanopoulos	AA	AA2015.013		$1,500.00	$1,500	$0	
TOTAL	**Mar-15**				**$0.00**	**$12,800.00**	**$12,800.00**	**$221.00**	**$12,579.00**
4/10/15	559 Fights 34	Joey Perez	AA	AA2015.021		$1,300.00	$1,300	$0	
4/17/15	No Limit FC	Phillip Flathers	AA	AA2015.018	$250.00	$1,250.00	$1,500	$0	
4/17/15	Spar Star	Tony Padilla	PA	PA2015.004		$450.00	$450	$0	
4/18/15	King of the Cage	Terry Trebilcock	AA	AA2015.020		$1,500.00	$1,500	$0	
4/19/15	Gallus FC	(MM Travis	AA	AA2015.019	$75.00	$925.00	$1,000	$0	
4/25/15	WCS	Gabe Scarpelli (MM	AA	AA2015.024		$1,300.00	$1,300	$75	
4/25/15	~~Knockout~~	(Dan Chavez)	AA	AA2015.022		$1,000.00	$1,000	$970	CANCELED
TOTAL	**Apr-15**				**$325.00**	**$7,725.00**	**$8,050.00**	**$1,045.00**	**$7,005.00**

Fighter	Date Issued	Days	Expires	Injury Type	Status	Notes
Private Medical Record	5/28/15	IND		Not fit for Competit	suspended	positive Hep C . Need confirmatory test
Erik Echiverri	5/23/15	45	7/7/15	Hard Bout	suspended	
Ricardo Lopez	5/23/15	45	7/7/15	TKO	suspended	
mark castillo	5/23/15	45	7/7/15	Hard Bout	suspended	
Alberto Romo	5/23/15	60	7/22/15	Cut	suspended	60/60: laceration on R cheek Or cleared by DR
Dennis Fisher	5/23/15	IND		Possible Fracture	suspended	Injury to R ribs. Can be cleared by DR
mark castillo	5/23/15	180	11/19/15	Hyperextension	suspended	180/180: Injury to L elbow OR cleared by Dr
Jose Cortez	5/16/15	45	6/30/15	TKO	suspended	
Brandin Oberlies	5/16/15	45	6/30/15	TKO	suspended	
leandro Canas	5/16/15	180	11/12/15	Hyperextension	suspended	180/180: Injury to R elbow OR cleared by DR
michael thomas sr.	5/16/15	45	6/30/15	TKO	suspended	
Jeremy Malvo	5/16/15	45	6/30/15	KO	suspended	
Frank Farmer	5/16/15	45	6/30/15	TKO	suspended	
Ronnie Mugica	5/14/15	60	7/13/15	Cut	suspended	60/60: Cut over R eye OR cleared by DR
Richard carsten	5/10/15	IND		Discipline	suspended	Forged Physical exam. Okay to appeal after 90 days (8/8/15).
Andre Camarena	5/10/15	IND		Not fit for Competit	suspended	Traumatic Brain Injury from motorcycle accident.
Anthony Macias	5/9/15	45	6/23/15	KO	suspended	
Daveyon Sanders	5/9/15	45	6/23/15	TKO	suspended	
Albert Lee	5/3/15	45	6/17/15	Hard Bout	suspended	
Mike Martinez	5/3/15	45	6/17/15	TKO	suspended	
Joseph Santos	5/3/15	IND		Not fit for Competit	suspended	Backed out just prior to fighting. Mentioned he did not want to do this anymore and as well as other questionable remarks to Lead Denkin. Needs eval prior to return.
Stephen Dermishyan	5/2/15	45	6/16/15	TKO	suspended	
Esley Colson	5/2/15	180	10/29/15	KO	suspended	180/180: experienced loss of hearing in R ear and possible perforation. OR cleared by DR
Kacey Sanders	5/2/15	180	10/29/15	Sprain	suspended	180/180: possible R knee injury OR cleared by DR

robert garcia	3/28/15	45	5/12/15	TKO	expired	
Jose Cortez	3/28/15	45	5/12/15	TKO	expired	
carlos ojeda	3/28/15	45	5/12/15	TKO	expired	
Victor Pages	3/28/15	45	5/12/15	KO	expired	
Victor Pages	3/28/15	60	5/27/15	Cut	expired	60/60: Cut OR cleared byDR
Farren Romero	3/28/15	45	5/12/15	TKO	expired	
Mark Perez	3/28/15	45	5/12/15	TKO	expired	
James Pace	3/28/15	60	5/27/15	Cut	expired	60/60: cut on L eyebrow OR cleared by DR
Kavi Mcaleavy	3/23/15	45	5/7/15	TKO	expired	
Gerardo Aragon	3/23/15	60	5/22/15	Discipline	expired	2 hours late at Flux Night Club
Parker Reid	3/23/15	60	5/22/15	Discipline	expired	2 hours late at Flux
Dennis Fisher	3/23/15	45	5/7/15	KO	expired	
Miguel Lugo	3/23/15	IND		Hard Bout	suspended	Indef. Suspension from dizziness and nausea. Transported to Hospital.
Addie Sann	3/21/15	45	5/5/15	Hard Bout	expired	
Addie Sann	3/21/15	IND		Hard Bout	suspended	Indef: Needs to have near check before return. Did not recover well. Exhausted.
Marcus Walston	3/21/15	45	5/5/15	TKO	expired	
Marcus Walston	3/21/15	IND		TKO	suspended	Must be cleared by DR. Extreme exhaustion following the bout.
Joseph Williams	3/21/15	45	5/5/15	TKO	expired	
Joseph Williams	3/21/15	IND		Hard Bout	suspended	must be cleared by Dr before return.
johnny rivas	3/21/15	45	5/5/15	KO	expired	
Clint Nicholson	3/21/15	45	5/5/15	TKO	expired	
Clint Nicholson	3/21/15	60	5/20/15	Cut	expired	60/60: Cut under L eye OR cleared by DR
alejandro valencia	3/14/15	45	4/28/15	KO	expired	
jamel williams	3/14/15	45	4/28/15	TKO	expired	
Alex Smith	3/14/15	45	4/28/15	TKO	expired	
Daniel Llamas	3/8/15	45	4/22/15	TKO	expired	
Pious Enilolobo Jr	3/8/15	45	4/22/15	TKO	expired	
Jarett Conner	3/8/15	180	9/4/15	Possible Fracture	suspended	180/180: possible FX of L elbow OR cleared by DR
Ryan Lilley	3/8/15	60	5/7/15	Cut	expired	60/60: CUT over R eyebrow OR cleared by DR
AJ Lavarias	3/8/15	45	4/22/15	KO	expired	
Sergio Perez	3/8/15	45	4/22/15	TKO	expired	
Vlad Kochiev	3/8/15	60	5/7/15	Discipline	expired	no show at U of MMA

armik craft	1/17/15	45	3/3/15	TKO	expired	
Chris Mauldin	1/17/15	60	3/18/15	Cut	expired	60/60: Cut under R eye OR cleared by DR
Rudy Soto III	1/16/15	45	3/2/15	Hard Bout	expired	Choke out

Zigmond, Snow & Lang
16255 Ventura Blvd, Suite 212
Encino, CA 91436-2300

CALIFORNIA AMATEUR MIXED MARTIAL
ARTS ORGANIZATION, INC
PO BOX 4641
RIVERSIDE, CA 92514

CLIENT CAMO

ZIGMOND, SNOW & LANG
16255 VENTURA BLVD, SUITE 212
ENCINO, CA 91436-2300
(818) 789-7850

February 5, 2015

CALIFORNIA AMATEUR MIXED MARTIAL
ARTS ORGANIZATION, INC
PO BOX 4641
RIVERSIDE, CA 92514

Dear JT:

Your 2013 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Your 2013 California Exempt Organization Annual Information Return will be electronically filed with the State of California upon receipt of a signed Form 8453-EO. There is a balance due of $10 payable by May 15, 2015. Mail your California payment voucher, Form 3586, on or before May 15, 2015 to:

Franchise Tax Board
P.O. Box 942857
Sacramento, CA 94257-0531

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 April 15, 2015. Make the check or money order payable to "Attorney General's Registry of Charitable Trusts" and mail your California report on or before April 15, 2015 to:

REGISTRY OF CHARITABLE TRUSTS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

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

Sincerely,

Sheldon M. Snow, CPA

Form **990**

Department of the Treasury
Internal Revenue Service

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.
► Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 6/01 , 2013, and ending 5/31 , 2014

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C
CALIFORNIA AMATEUR MIXED MARTIAL
ARTS ORGANIZATION, INC
PO BOX 4641
RIVERSIDE, CA 92514

D Employer Identification Number
27-0384320

E Telephone number
(562) 882-0523

G Gross receipts $ 419,171.

F Name and address of principal officer:
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No
H(b) Are all subordinates included? [ ] Yes [ ] No
If 'No,' attach a list. (see instructions)

I Tax-exempt status [X] 501(c)(3) [ ] 501(c) ( )◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.CAMO-MMA.ORG

H(c) Group exemption number ►

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other►

L Year of formation: 2010

M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: DEDICATED TO HELP FOSTER THE GROWTH OF AMATEUR MIXED MARTIAL ARTS AND TO OVERSEE THE HEALTH, SAFETY, AND WELFARE OF THE ATHLETES.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	4
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		
	9	Program service revenue (Part VIII, line 2g)	495,155.	419,171.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	495,155.	419,171.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	239,068.	156,658.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ►		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	259,416.	231,960.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	498,484.	388,618.
	19	Revenue less expenses. Subtract line 18 from line 12	-3,329.	30,553.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	41,663.	49,742.
	21	Total liabilities (Part X, line 26)	49,344.	26,870.
	22	Net assets or fund balances. Subtract line 21 from line 20	-7,681.	22,872.

Part II Signature Block

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

► JT STEELE — PRESIDENT
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
SHELDON M. SNOW, CPA	SHELDON M. SNOW, CPA	2/05/15		P00130337

Firm's name ► ZIGMOND, SNOW & LANG
Firm's address ► 16255 VENTURA BLVD, SUITE 212
ENCINO, CA 91436-2300
Firm's EIN ► 95-4298574
Phone no. (818) 789-7850

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** 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*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20 a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*			3b		
4a 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)?			4a		X
b If 'Yes,' enter the name of the foreign country: ►					
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9 Sponsoring organizations maintaining donor advised funds.					
a Did the organization make any taxable distributions under section 4966?			9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10 Section 501(c)(7) organizations. Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	10a				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders	11a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state?			13a		
Note. See the instructions for additional information the organization must report on Schedule O.					
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c Enter the amount of reserves on hand	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*			14b		

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JT STEELE	45									
PRESIDENT	0	X		X				85,000.	0.	0.
(2) ERIC FICKSMAN	0.5									
DIRECTOR	0	X						0.	0.	0.
(3) ROBERT RUELAZ	0.5									
DIRECTOR	0	X						0.	0.	0.
(4) JOSH SWARTZ	0.5									
DIRECTOR	0	X						0.	0.	0.
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f				
	g Noncash contributions included in lines 1a-1f: $				
	h **Total.** Add lines 1a-1f ►				
PROGRAM SERVICE REVENUE	Business Code				
	2a LICENSE & EVENT FEES 713990	419,171.	419,171.		
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g **Total.** Add lines 2a-2f ►	419,171.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts) ►				
	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties ►				
	(i) Real / (ii) Personal				
	6a Gross rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ►				
	(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ►				
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events ►				
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ►				
	10a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory ►				
	Miscellaneous Revenue / Business Code				
	11a				
	b				
	c				
	d All other revenue				
	e **Total.** Add lines 11a-11d ►				
	12 **Total revenue.** See instructions ►	419,171.	419,171.	0.	0.

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

				(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing		38,588.	1	46,867.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,312.			
	b	Less: accumulated depreciation	10b 3,437.	748.	10c	2,875.
	11	Investments – publicly traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		2,327.	15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		41,663.	16	49,742.
LIABILITIES	17	Accounts payable and accrued expenses		45,505.	17	25,593.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		3,839.	25	1,277.
	26	**Total liabilities.** Add lines 17 through 25		49,344.	26	26,870.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds		-7,681.	32	22,872.
	33	Total net assets or fund balances		-7,681.	33	22,872.
	34	Total liabilities and net assets/fund balances		41,663.	34	49,742.

SCHEDULE A
(Form 990 or 990-EZ)

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.**

► **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number 27-0384320

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 11, 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.)

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 [X] 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.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I **b** [ ] Type II **c** [ ] Type III – Functionally integrated **d** [ ] Type III – Non-functionally integrated

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ..... [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11 g (i)**		
(ii) A family member of a person described in (i) above?	**11 g (ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11 g (iii)**		

h Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document? Yes	No	(v) Did you notify the organization in column (i) of your support? Yes	No	(vi) Is the organization in column (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

TEEA0401L 06/28/13

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

(Complete only if you checked the box on line 9 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 yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						0.
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			447,828.	495,155.	419,171.	1,362,154.
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.	447,828.	495,155.	419,171.	1,362,154.
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.)						1,362,154.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	0.	0.	447,828.	495,155.	419,171.	1,362,154.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11 Net income from unrelated business activities not included in 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 IV.)						0.
13 **Total Support.** (Add lns 9,10c, 11 and 12.)	0.	0.	447,828.	495,155.	419,171.	1,362,154.

14 **First five 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** ► [X]

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests – 2013.** 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 – 2012.** 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 ► [ ]

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number: 27-0384320

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ►$

(ii) Assets included in Form 990, Part X ►$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ►$

b Assets included in Form 990, Part X ►$

Part VII Investments – Other Securities. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 12.)* ►		

Part VIII Investments – Program Related. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13.)* ►		

Part IX Other Assets. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B), line 15.)* ►	

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL TAXES PAYABLE	1,277.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25.)* ►	1,277.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number: 27-0384320

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

DRAFT COPY OF THE RETURN IS MADE AVAILABLE TO THE DIRECTORS FOR REVIEW, DISCUSSION AND APPROVAL.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS ARE MADE AVAILABLE FOLLOWING RECEIPT OF WRITTEN REQUEST.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ► [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC	Employer identification number (EIN) or 27-0384320
File by the extended due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. ZIGMOND, SNOW & LANG 16255 VENTURA BLVD, SUITE 212	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENCINO, CA 91436-2300	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of ► JT STEELE
  Telephone No. ► (562) 882-0523 Fax No. ► (213) 908-2186
- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ... _____ . If this is for the whole group, check this box ... ► [ ] . If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 4/15, 20 15.

5 For calendar year ____ , or other tax year beginning 6/01, 20 13, and ending 5/31, 20 14.

6 If the tax year entered in line 5 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension .. INFORMATION REQUESTED FROM A THIRD PARTY, HAS NOT YET BEEN RECEIVED. ADDITIONAL TIME IS NEEDED TO SECURE THAT INFORMATION, COMPLETE RETURNS, AND PROVIDE ADEQUATE TIME FOR REVIEW.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	$
c **Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► Title ► PRESIDENT Date ►

TAXABLE YEAR **2013**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2013 or fiscal year beginning (mm/dd/yyyy) 6/01/2013 , and ending (mm/dd/yyyy) 5/31/2014 .

Corporation/Organization Name: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

California corporation number: 3213907

Address (suite, room, or PMB no.): PO BOX 4641

FEIN: 27-0384320

City: RIVERSIDE | State: CA | ZIP Code: 92514

A First Return ..... [ ] Yes [X] No

B Amended Information Return ..... ● [ ] Yes [X] No

C IRC Section 4947(a)(1) trust ..... [ ] Yes [X] No

D Final Information Return? ● [ ] Dissolved ● [ ] Surrendered (Withdrawn) ● [ ] Merged/Reorganized

Enter date (mm/dd/yyyy): ● _____

E Check accounting method: 1 [ ] Cash 2 [X] Accrual 3 [ ] Other

F Federal return filed? 1 ● [ ] 990T 2 ● [ ] 990 PF 3 ● [ ] Sch H (990)

G Is this a group filing for the subordinates/affiliates? ..... ● [ ] Yes [X] No

If 'Yes,' attach a roster. See instructions

H Is this organization in a group exemption? ..... [ ] Yes [X] No

If 'Yes,' What's the parent's name?

I Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? ..... ● [ ] Yes [X] No

If 'Yes,' explain, and attach copies of revised documents.

J If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? ..... ● [ ] Yes [X] No

If 'Yes,' complete and attach form FTB 3509.

K Is the organization exempt under R&TC Section 23701g? ... ● [ ] Yes [X] No

If 'Yes,' enter gross receipts from nonmember sources ..... $ _____

L If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. No filing fee is required. ..... ● [ ]

M Is the organization a Limited Liability Company? ..... ● [ ] Yes [X] No

N Did the organization file Form 100 or Form 109 to report taxable income? ..... ● [ ] Yes [X] No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? ..... ● [ ] Yes [X] No

CACA1112L 11/20/13

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

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 ..... ●	1	419,171.
	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 Instruction B ... ●	4	419,171.
	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	419,171.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 ..... ●	9	388,618.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 ..... ●	10	30,553.
Filing Fee	11	Filing fee $10 or $25. See General Instruction F	11	10.
	12	Total payments	12	
	13	Penalties and Interest. See General Instruction J	13	
	14	Use tax. See General Instruction K ..... ●	14	
	15	**Balance due.** Add line 11, line 13, and line 14. Then subtract line 12 from the result ..... ●	15	10.

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: PRESIDENT | Date: | ● Telephone: (562) 882-0523

Paid Preparer's Use Only

Preparer's signature ▶ SHELDON M. SNOW, CPA | Date: 2/05/15 | Check if self-employed ▶ [ ] | ● PTIN: P00130337

Firm's name (or yours, if self-employed) and address ▶ ZIGMOND, SNOW & LANG, 16255 VENTURA BLVD, SUITE 212, ENCINO, CA 91436-2300 | ● FEIN: 95-4298574 | ● Telephone: (818) 789-7850

May the FTB discuss this return with the preparer shown above? See instructions ..... ● [X] Yes [ ] No

TAXABLE YEAR **2013** | **Corporation Depreciation and Amortization** | CALIFORNIA FORM **3885**

Attach to Form 100 or Form 100W. FORM 199

Corporation name: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

California corporation number: 3213907

Part I Election to Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
COMPUTER EQUIPM	5/24/2010	3,652.	2,904.	200DB	5	400.	
APPLE COMPUTER	5/24/2014	2,660.		200DB	5	133.	

15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15	533.

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
WEBSITE	10/28/2009	7,313.	7,313.		3	

20	Total. Add the amounts in column (g)	20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12	22	

STATEMENT 3 (CONTINUED)
FORM 199, PART II, LINE 17
OTHER EXPENSES

WEBSITE SERVICES	$ 2,790.
TOTAL	$ 231,341.

STATEMENT 4
FORM 199, SCHEDULE L, LINE 18
OTHER LIABILITIES

TOTAL	$ 0.

Form **990**

Department of the Treasury
Internal Revenue Service

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.
► Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 6/01 , 2013, and ending 5/31 , 2014

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C
CALIFORNIA AMATEUR MIXED MARTIAL
ARTS ORGANIZATION, INC
PO BOX 4641
RIVERSIDE, CA 92514

D Employer Identification Number: 27-0384320

E Telephone number: (562) 882-0523

G Gross receipts $ 419,171.

F Name and address of principal officer:
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If 'No,' attach a list. (see instructions)

I Tax-exempt status [X] 501(c)(3) [ ] 501(c) ( )◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.CAMO-MMA.ORG

H(c) Group exemption number ►

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ►

L Year of formation: 2010

M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: DEDICATED TO HELP FOSTER THE GROWTH OF AMATEUR MIXED MARTIAL ARTS AND TO OVERSEE THE HEALTH, SAFETY, AND WELFARE OF THE ATHLETES.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	4
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		
	9	Program service revenue (Part VIII, line 2g)	495,155.	419,171.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	495,155.	419,171.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	239,068.	156,658.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ►		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	259,416.	231,960.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	498,484.	388,618.
	19	Revenue less expenses. Subtract line 18 from line 12	-3,329.	30,553.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	41,663.	49,742.
	21	Total liabilities (Part X, line 26)	49,344.	26,870.
	22	Net assets or fund balances. Subtract line 21 from line 20	-7,681.	22,872.

Part II Signature Block

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

► JT STEELE — PRESIDENT
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
SHELDON M. SNOW, CPA	SHELDON M. SNOW, CPA	2/05/15		P00130337

Firm's name ► ZIGMOND, SNOW & LANG
Firm's address ► 16255 VENTURA BLVD, SUITE 212
ENCINO, CA 91436-2300
Firm's EIN ► 95-4298574
Phone no. (818) 789-7850

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** 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*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20 a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

			Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*		3b		
4a 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)?		4a		X
b If 'Yes,' enter the name of the foreign country: ►				
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 **Organizations that may receive deductible contributions under section 170(c).**				
a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9 **Sponsoring organizations maintaining donor advised funds.**				
a Did the organization make any taxable distributions under section 4966?		9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10 **Section 501(c)(7) organizations.** Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 **Section 501(c)(12) organizations.** Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13 **Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a Is the organization licensed to issue qualified health plans in more than one state?		13a		
Note. See the instructions for additional information the organization must report on Schedule O.				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*		14b		

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JT STEELE	45									
PRESIDENT	0	X		X				85,000.	0.	0.
(2) ERIC FICKSMAN	0.5									
DIRECTOR	0	X						0.	0.	0.
(3) ROBERT RUELAZ	0.5									
DIRECTOR	0	X						0.	0.	0.
(4) JOSH SWARTZ	0.5									
DIRECTOR	0	X						0.	0.	0.
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f				
	g Noncash contributions included in lines 1a-1f: $				
	h Total. Add lines 1a-1f ►				
PROGRAM SERVICE REVENUE	Business Code				
	2a LICENSE & EVENT FEES 713990	419,171.	419,171.		
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f ►	419,171.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts) ►				
	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties ►				
	(i) Real / (ii) Personal				
	6a Gross rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ►				
	(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ►				
	8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18 a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events ►				
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ►				
	10a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory ►				
	Miscellaneous Revenue / Business Code				
	11a				
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d ►				
	12 Total revenue. See instructions ►	419,171.	419,171.	0.	0.

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

				(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing		38,588.	1	46,867.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,312.			
	b	Less: accumulated depreciation	10b 3,437.	748.	10c	2,875.
	11	Investments – publicly traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		2,327.	15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		41,663.	16	49,742.
LIABILITIES	17	Accounts payable and accrued expenses		45,505.	17	25,593.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		3,839.	25	1,277.
	26	**Total liabilities.** Add lines 17 through 25		49,344.	26	26,870.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds		-7,681.	32	22,872.
	33	Total net assets or fund balances		-7,681.	33	22,872.
	34	Total liabilities and net assets/fund balances		41,663.	34	49,742.

SCHEDULE A
(Form 990 or 990-EZ)

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.**

► **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number 27-0384320

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 11, 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.)

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 [X] 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.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I b [ ] Type II c [ ] Type III – Functionally integrated d [ ] Type III – Non-functionally integrated

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ..... [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)		
(ii) A family member of a person described in (i) above?	11 g (ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)		

h Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document? Yes	No	(v) Did you notify the organization in column (i) of your support? Yes	No	(vi) Is the organization in column (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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

(Complete only if you checked the box on line 9 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 yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						0.
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			447,828.	495,155.	419,171.	1,362,154.
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.	447,828.	495,155.	419,171.	1,362,154.
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.)						1,362,154.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	0.	0.	447,828.	495,155.	419,171.	1,362,154.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11 Net income from unrelated business activities not included in 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 IV.)						0.
13 **Total Support.** (Add lns 9,10c, 11 and 12.)	0.	0.	447,828.	495,155.	419,171.	1,362,154.

14 **First five 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** ► [X]

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests – 2013.** 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 – 2012.** 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 ► [ ]

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number: 27-0384320

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ►$

(ii) Assets included in Form 990, Part X ►$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ►$

b Assets included in Form 990, Part X ►$

Part VII Investments – Other Securities. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 12.)* ►		

Part VIII Investments – Program Related. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13.)* ►		

Part IX Other Assets. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B), line 15.)* ►	

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL TAXES PAYABLE	1,277.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25.)* ►	1,277.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC

Employer identification number: 27-0384320

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

DRAFT COPY OF THE RETURN IS MADE AVAILABLE TO THE DIRECTORS FOR REVIEW, DISCUSSION AND APPROVAL.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS ARE MADE AVAILABLE FOLLOWING RECEIPT OF WRITTEN REQUEST.

AGENDA ITEM

8f - IKF

As of today, Monday, June 15th, 2015, Since the last CSAC meeting on April 28th, 2015, the IKF has regulated 9 Amateur Kickboxing / Muay Thai Events in the State of California. They include the following.

MAY 2015

1. **May 9th, 2015 - Pasadena, California, USA**
   Walter Michalowski Presents "Warrior Pride Promotions - *IKF In Gym Training Event*"
   MEDICAL SUSPENSIONS
   - No Injuries and No Medical Suspensions given.

2. **May 8th, 2015 - San Diego, California, USA**
   Glory World Series' "*Glory 21*"
   MEDICAL SUSPENSIONS
   - Alex Trinidad lost by TKO at 144 of round 2 and was issued a 30 day NO TRAINING AND 45 day NO COMPETITION Medical suspension until June 23rd, 2015.
   - Justin Rote lost by KO at 1:50 of round 2 and was issued a 30 day NO TRAINING AND 45 day NO COMPETITION Medical suspension until June 23rd, 2015.
   - Omari Boyd won by majority decision but was issued a 180 day NO TRAINING AND NO COMPETITION Medical suspension until Cleared by Orthopedic Doctor. Possible fracture in Left ankle. IKF has had no reply from him or his camp since the event.

3. **May 9th, 2015 - Santa Clara, California, USA**
   Arise FC's "*Arise Fighting Championships 3*"
   MEDICAL SUSPENSIONS
   - Justin Tran LOST by TKO, 1:32 of round 2 and was issued a 30 days no training & 45 no competition Medical Suspension due to TKO until 6-24-15.
   - Paul Frausto lost by TKO, 2:00 of the 1st Round and was issued a 30 days no training & 45 no competition Medical Suspension due to TKO until 6-24-15.
   - Manuel Keo lost by TKO at 1:59 of round 3 and was issued a 30 days no training & 45 no competition Medical Suspension due to TKO until 6-24-15.
   - Lawrence Ward lost by TKO at 1:59 of round 3 and was issued a 30 days no training & 45 no competition Medical Suspension due to TKO until 6-24-15.

4. **May 16th, 2015 - Imperial Beach, California, USA**
   Victor Beltran's Battle of Champions' "*BATTLE AT THE PARK*".
   MEDICAL SUSPENSIONS
   - No Injuries and No Medical Suspensions given.

5. **May 16th, 2015 - Inglewood, California, USA**
   Dennis Warner & In Sync Productions' "*CALI 8 - ALL GIRL SHOW*"
   MEDICAL SUSPENSIONS
   - No Injuries and No Medical Suspensions given.

6. **May 23rd, 2015 - San Bernardino, California, USA**
   All American Fight League's "*AAFL Muay Thai Show*"
   MEDICAL SUSPENSIONS
   - Andrew Cisneros lost by TKO at 1:30 of round 3 and was issued a 30 day no training and 45 no competition Medical Suspension until July 8th, 2015.
   - Miranda Castaneda lost by TKO at 1:17 of round 3 and was issued a 30 day no training and 45 no competition Medical Suspension until July 8th, 2015.
   - Ernest Medrano lost by Unanimous Decision and was issued a 180 day no training and 180 no competition Medical Suspension until November 23rd, 2015. Left knee injury - CAN BE Cleared by Medical Doctor Prior to Suspension Term.

CONTINUED

7. **May 30th, 2015 - Tustin, California, USA**
   Faith Venus Amsterdam Promotion "*MUAY THAI ULTIMATE*"
   MEDICAL SUSPENSIONS
   - Julian Wallace lost by TKO at 1:56 of round 2 and was issued a minimum 30 day No Training and 45 day No Competition Medical Suspension until July 15th, 2015. An ADDITIONAL 180 day medical suspension was added until cleared by MD for Jaw. Full results still pending as of today, Monday, June 15th, 2015.
   - Nain Baylon lostby TKO at :48 seconds of round 1 and was issued a minimum 30 day No Training and 45 day No Competition Medical Suspension until July 15th, 2015.
   - Alfredo Perez lost by TKO at 1:48 of round 2 and was issued a 30 day No Training and 45 day No Competition Medical Suspension until July 15th, 2015.
   - Rene Hernandez lost by TKO at 1:14 of round 4 and was issued a minimum 30 day No Training and 45 day No Competition Medical Suspension until July 15th, 2015.

JUNE 2015

8. **June 5th, 2015 - Studio City, California, USA**
   Defiant Promotions' "*MUAY THAI FIGHTING*"
   MEDICAL SUSPENSIONS
   - John Garcialost by TKO at 1:23 of round 1 and was issued a 30 day no training & 45 day no competition Medical Suspension until July 21st, 2015.
   - Bryan Mears lost by TKO at 1:05 of round 1 and was issued a 30 day no training & 45 day no competition Medical Suspension until July 21st, 2015.
   - Antonio Lavadenz lost by TKO at 1:53 of round 2 and was issued a 30 day no training & 45 day no competition Medical Suspension until July 21st, 2015.
   - Dorian Taylor lost by TKO at 1:04 of round 1 and was issued a 30 day no training & 45 day no competition Medical Suspension until July 21st, 2015.

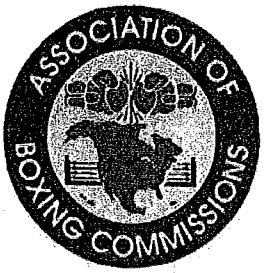
9. **June 6th, 2015 - Elk Grove, California, USA**
   Elk Grove Muay Thai Academy - "*IKF In Gym Training Event*"
   MEDICAL SUSPENSIONS
   - No Injuries and No Medical Suspensions given.

END OF REPORT

AGENDA ITEM

8h

4/25/2015 8:51 AM



ASSOCIATION OF BOXING COMMISSIONS
ANNUAL CONFERENCE
July 25 – 29, 2015
Wyndham San Diego Bayside
1355 NORTH HARBOR DRIVE
SAN DIEGO, CA 92101
(619) 358-6014

AGENDA

Saturday July 25, 2015

9:00 AM – 4:00 PM - Board of Directors Round Table
9:00 AM – 5:00 PM - Officials Training Seminars – Boxing Judges, MMA Referees

Sunday, July 26, 2015

9:00 AM – 3:00 PM - Board of Directors Round Table
9:00 AM – 5:00 PM – Officials Training Seminars – Boxing Referees, MMA Judges

1:00 PM – 3:00 PM – Conference Registration (Pacific Foyer)

Monday, July 27, 2015 (Pacific ABC)

7:30 AM – 8:30 AM
- Registration

8:30 AM – 9:00 AM
- Welcome

9:00 AM – Noon
- Introduction of Members
- Voter Authority Forms
- Approval of Meeting Minutes from 2014 Annual Meeting
- Treasurer Report
- President's Report

NOON – 1:30 PM **LUNCH ON YOUR OWN**

1:30 PM – 3:00 PM
- Compliance Committee Report
- Fight Fax Record Keeper Report - Miramontes
- MMA, LLC Record Keeper Report – Kirik Jenness and Chris Palmquist
- Boxing Training Committee, Erickson, TX, Mason, CO, Pannella, MD, Lueckenhoff, MO
- Legal Committee, Lembo
- Open Discussion
- Introduction of the 2016 Convention Site
- Discussion of 2017 Site

3:00 PM – 5:00 PM New Commissioner Orientation, - Erickson

6:00 PM Reception, Harbor Side

(Dinner on your own)

Tuesday, July 28, 2015 – (Pacific ABC)

9:00 AM – NOON General Session - Boxing
- John Sheppard, www.boxrec.com
- Boxing Database Selection Committee, Colard, WA
- Instant Replay Committee, Jernigan, Miller
- Pod Index, Matt Podgorski
- Open Discussion on Boxing
  - Bare Knuckle Boxing. Cory Williams

4/25/2015 8:51 AM

NOON – 1:30 PM **LUNCH ON YOUR OWN**

1:30 PM – 3:30 PM General Session – Boxing

- Malpractice Coverage, Pat English
- Drug Testing Demonstration, Foster, CA
- Selection of Gloves and Chain of Custody, Foster CA
- Update on Scoring Program, Lydia Robertson, Trisha Blackstock
- Promoter's Round Table
    - Weighins, Officials Compensation, Draws (extra round)

3:30 PM – 4:00 PM Election of New Officers – (Legal Committee)

- President
- Vice President (2)
- Treasurer
- Secretary

(Dinner on your own)

Wednesday July 29, 2015 - (Pacific ABC)

8:30 AM – NOON General Session – Mixed Martial Arts

- MMA Training Committee Report, - Lembo
- MMA Rules Committee Report – Adding 115 LBS, Straweight Division – MMA, Lembo NJ.
- ABC Medical Committee Report, Chairperson, - Dr. Sheryl Wulkan, NJ, Dr. Wayne Lee, Dr. Steven Oxler
- Dr. Daniel Eichner, Dr. Amy Eichner, USADA / WADA, Performance Enhancing Drugs and Drug Testing
- James Thompson, Evoke Potential (concussions)
- Frank Babcock, UMMAF, MMA Sanctioning
- Tomas Yu, WMMAA, International Professional and Amateur MMA Sanctioning
- Jon Frank, United State Fight League, Youth Pankration
- Anthony Salcedo, Muay Thai / Boxing Liniments
- Casey Oxendine, Arena Combat, (Team MMA)
- Open Discussion on MMA

NOON – 1:30 PM **LUNCH (ON YOUR OWN)**

1:30 PM – 4:30 PM General Session – Mixed Martial Arts

6:00 PM – 7:00 PM Cocktail Party (Casual Dress) (Harbor Side)

7:00 PM – 10:00 PM Annual Banquet and Dinner
Conclusion of the Silent Auction

4/25/2015 8:51 AM

ASSOCIATION OF BOXING COMMISSIONS
ANNUAL CONFERENCE
July 25 – 29, 2015
Wyndham San Diego Bayside
1355 NORTH HARBOR DRIVE
SAN DIEGO, CA 92101
(619) 358-6014

ABC OFFICIALS TRAINING SEMINARS

BOXING TRAINING

Saturday, July 25, 2015	(Pacific A)
8:30 AM – 9:00 AM	Officials' Registration
9:00 AM – 5:00 PM	Judges' Training Course
	Trainer: Duane Ford
Sunday, July 26, 2015	(Pacific A)
8:30 AM – 9:00 AM	Officials' Registration
9:00 AM – 5:00 PM	Referees' Training Course
	Trainer: Jay Nady

MIXED MARTIAL ARTS

Saturday, July 25, 2015	(Pacific B and C)
8:30 AM – 9:00 AM	Officials' Registration
9:00 AM – 5:00 PM	Referee' Training Course
	Trainer: John McCarthy
Sunday, July 26, 2015	(Pacific B and C)
8:30 AM – 9:00 AM	Officials' Registration
9:00 AM – 5:00 PM	Judges' Training Course
	Trainer: John McCarthy

4/25/2015 8:51 AM

ASSOCIATION OF BOXING COMMISSIONS
ANNUAL CONFERENCE
July 25 – 29, 2015
Wyndham San Diego Bayside
1355 NORTH HARBOR DRIVE
SAN DIEGO, CA 92101
(619) 358-6014

NOTE: Officials attending the training seminars should NOT complete this registration form for the seminars.

ANNUAL CONFERENCE REGISTRATION FORM

Check or Money Orders are to be made payable to: ABC
Please mail form and payment to:

Missouri Office of Athletics
Association of Boxing Commissions
Tim Lueckenhoff, President
1803 Cedar Valley Road
Jefferson City, MO 65109

If registered by July 15, 2015, Registration Fee
Attendee: $ 175.00
Guest/Spouse: $ 125.00

LATE REGISTRATION FEES
Attendee: $200
Guest/Spouse: $150

Attendee's Name: _____
Commission/Organization: _____
Mailing Address: _____
City: _____ **State:** _____ **Zip Code** _____
Office Phone: _____ **Fax:** _____
Email Address: _____

Will you be registering a guest? Yes _____ **No** _____
Guest's Name: _____

Contact the Wyndham San Diego Bayside (619) 358-6014 of use the passkey at this link to make reservations online - https://resweb.passkey.com/go/ABC2015 to make your hotel reservations. Rooms are $139 per night plus tax. To guarantee a room at the hotel you must make your reservation by July 16, 2015.

4/25/2015 8:51 AM

MIXED MARTIAL ARTS & BOXING
REFEREE & JUDGES OFFICIALS TRAINING REGISTRATION
FEE $100 to attend all courses

Saturday, July 25, 2015
8:30 AM – 9:00 AM Officials' Registration
9:00 AM – 4:00 PM Boxing Judges' Training Course
Trainer: Duane Ford
(Pacific A)

Sunday, July 26, 2015
8:30 AM – 9:00 AM Officials' Registration
9:00 AM – 4:00 PM Boxing Referees' Training Course
Trainer: Jay Nady
(Pacific A)

Saturday, July 25, 2015
8:30 AM – 9:00 AM Officials' Registration
9:00 AM – 4:00 PM MMA Referees' Training Course
Trainer: John McCarthy
(Pacific B and C)

Sunday, July 26, 2015
8:30 AM – 9:00 AM Officials' Registration
9:00 AM – 4:00 PM MMA Judges' Training Course
Trainer: John McCarthy
(Pacific B and C)

First Name: _____ **Last Name:** _____
Address: _____
City: _____ **State:** _____ **Zip Code** _____
Phone: ( ) _____ **Email:** _____

WHERE OFFICIAL IS LICENSED? _____

Exact Name on Certificate:
First Name: _____ **Middle:** _____ **Last Name:** _____

Please Check the Appropriate Training:
____ **Boxing Judge's Training Course**
____ **MMA Judge's Training Course**
____ **Boxing Referee's Training Course**
____ **MMA Referee's Training Course**

The $100 registration fee covers all courses.

Check or Money Orders are to be made payable to: ABC
Please mail the completed form and payment to:
Tim Lueckenhoff, President
Association of Boxing Commissions
1803 Cedar Valley Road
Jefferson City, MO 65109

All registrations must be received by July 15, 2015 to ensure adequate meeting room accommodations.

Contact the Wyndham San Diego Bayside (619) 358-6014 of use the passkey at this link to make reservations online - https://resweb.passkey.com/go/ABC2015 **to make your hotel reservations. Rooms are $139 per night plus tax. To guarantee a room at the hotel you must make your reservation by July 16, 2015.**

AGENDA ITEM
10

Duane B. Ford
President

June 12, 2015

Andy Foster
Executive Officer
California State Athletic Commission

Re: Use of Protective Headgear for Amateur Boxing

Dear Mr. Foster:

The subject of the use of headgears in boxing has always been around. I recall years ago Dr. James Marr (Texas) did studies on the subject. His findings were of such that a fighter wearing headgear will be hit in the head more because of the larger target. However, he indicated that the force of the punch would be absorbed in the padding of the gloves and headgear, thus it would result to a lesser delta force to the actual skull.

This subject has ALWAYS been a controversial subject and even today, Medical science among each other are at opposite ends. The fascinating thing that strikes me is that most knockouts that I have personally observed are to the chin area and not the actual head.

I have concern that in the amateur boxing area you have fighters who are at a lesser skill than the professional. Meaning that the professionals most likely have the skill to avoid the actual impact of punch, thus reducing the concussive type blows.

My further worries are the amateurs fighting without headgear will reduce the longevity of these young fighters and increase the risk of these young people of having medical issues earlier in life.

Lastly, I attach the statement of the Association of Ringside Physicians that is supportive in this discussion.

5255 S. Decatur Blvd., Suite 110, Las Vegas, NV 89118-4920 • Phone 702 596-7853

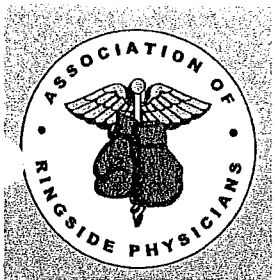
I encourage you and the California State Athletic Commission not to allow Amateurs to fight WITHOUT headgear.

Thank you for giving this your consideration.

Very truly yours,

Duane B. Ford

Duane B. Ford
President - NABF



"Protecting Fighters Around the World"

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Patricio F. Reyes, M.D.
Nicholas Rizzo, M.D.
Timothy M. Silver, M.D.
John Stiller, M.D.
Paul W. Wallace, M.D., M.P.A.

For Immediate Release January 27, 2014

Association of Ringside Physicians Releases Consensus Statement on The Use of Headgear in Amateur Boxing

The Association of Ringside Physicians (ARP), an international, non-profit organization dedicated to the health and safety of the boxer and mixed martial arts athlete, has released a consensus statement on the use of headgear in amateur boxing as follows:

> There are fewer head and facial injuries when using headgear in amateur boxing. Amateur boxing is a relatively safe sport and eliminating headgear will make amateur boxing less safe. The Association of Ringside Physicians supports the continued use of headgear in amateur boxing as well as efforts to improve the effectiveness of the headgear.

For more about the ARP, visit its website at www.associationofringsidephysicians.org.

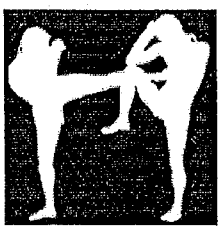
###

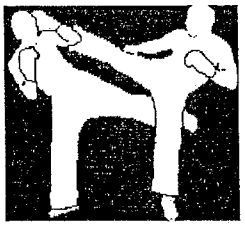
For further information, please contact:

Dr. Ray Monsell
Chairman, ARP
ray147@talktalk.net

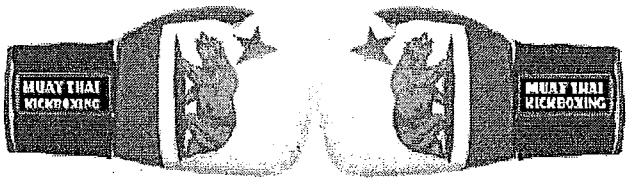
AGENDA ITEM

12





IN GYM TRAINING EVENTS



LAST REVISED / UPDATED
JUNE 1st, 2015

ALL SECONDS / CORNERMEN / TRAINERS
Working These Events Must Comply 100% with The IKF Rules And Regulations. to Review These Rules and Regulations
CLICK HERE

· IKF IN GYM TRAINING EVENTS

- These events will **NOT ALLOW** for an "*Announced*" Winner or Loser.
- Since these are "*Training Events*" and the bouts do not count as an actual fight, these match-ups will eliminate, for example, a bad judges decision, or a bad referee decision that would be final decision on a fighters record.
- These events are to help fighters gain ring experience in front of a crowd, as if a real bout. This is the stage and the arena for those beginning fighters who need that ever so valuable ring time.
- These events are to test and observe new officials without jeopardizing the Livelihood or a bad decision on a fighters record.
- There are still regulatory requirements that the CSAC insist be followed on these events. However, the costs will be far less than a regular event.
- The Rules of these Events **Are still a work in progress,** but as of now, these rules are as follows:

1. ALLOWED NUMBER OF BOUTS

- There shall be no less then 10 bouts and **NO MORE THAN 25 Bouts** on these events.

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2. EVENT VENUE / LOCATION

- **Beginning July 1st, 2015**
  - Since these are called "IN GYM" training Events, these events are required to be IN A GYM.
  - NOT an actual venue where a regular, real fight event would take place.

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3. IKF REQUIREMENTS

- These events must be hosted by a "*LEGIT*" Kickboxing, Muay Thai or Martial Arts Instruction School as verified by the IKF.
  - **"Martial Arts"**
    - Means any form of karate, kung fu, tae kwon do, kickboxing or any combination of full contact martial arts,
      including mixed martial arts, or self-defense conducted on a full contact basis where a weapon is not used.
  - **"Kickboxing"**
    - Means any form of boxing in which blows are delivered with the hand and any part of the leg below the hip, including the foot.
  - **"Full Contact"**
    - Means the use of physical force in a martial arts contest that may result or is intended to result in physical harm to the opponent,
      including any contact that does not meet the definition of light contact or noncontact.
  - **"Light Contact"**
    - Means the use of controlled martial arts techniques whereby no contact to the face is permitted and no contact is permitted
      which may result or is intended to result in physical harm to the opponent.
  - **"Non Contact"**
    - Means that no contact occurs between either contestant.

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4. IKF TRAINING EVENT FEES

- IKF EVENT SANCTIONING FEE
  - Sanctioning Fee: $100.00 which covers Up to **20 BOUTS.**
  - There is an additional bout charge of **$10 per bout above 20.**
    - Fee must be paid 30 days in advance of event.
      - Inside 30 days until event: $200.00.
      - Inside 20 days until event: $400.00.
      - No event allowed if fees have not been paid by 15 days prior to the event.

- CHIEF INSPECTOR FEE
  - $200.00 which covers Up to 20 bouts.
  - There is an additional bout charge of $10 per bout above 20.
  - Plus Travel Fees.

- ASSISTANT INSPECTOR FEE
  - $100.00 which covers Up to 20 bouts.
  - There is an additional bout charge of $5 per bout above 20.
  - Plus Travel Fees.

- CHIEF REFEREE FEE
  - **$150.00 which covers Up to 20 bouts.
  - There is an additional bout charge of $5 per bout above 20.
  - Plus Travel Fees.
    - (**) This fee is provided Promoter has a minimum of 2 Training Referees for every 10 scheduled bouts.
      - **If less, Chief Referee fee goes to a minimum $200.00 or $10 per bout, whichever is greater.**

- TIMEKEEPER & TIMEKEEPER EQUIPMENT
  - Must be supplied by Promoter.
  - CLICK HERE FOR REQUIREMENTS & EQUIPMENT

- ADDITIONAL OFFICIALS
  - All Training Officials Are Volunteers.
  - Event Promoter must schedule additional officials to be trained to assist with event.
    - These Officials Include: Timekeeper, Referees, Judges, Locker Room Inspectors and any Doctor looking to become an Official IKF Ringside Doctor.

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5. IKF FIGHTER EVENT REGISTRATION FEE & RELEASE FORM

- There is no IKF Fee for an "IKF CA LICENSED FIGHTER" to fight on an IKF CA Event.
  - ALL fighters must submit to the IKF Event Representative an IKF CA IN GYM TRAINING EVENT AMATEUR FIGHTER REGISTRATION & RELEASE FORM
    - For form click HERE.
    - IKF Fees and IKF Release Forms are not related to Event Promoter Fees or Release Forms.

- ALL "NON IKF CA LICENSED FIGHTERS" Shall pay to the IKF Event Representative their Fighter Event Registration Fee which is **$5.00.
  - For form click HERE.
    - (**) If fighter wishes to apply this to an IKF CA Fighter License they may do so **ONLY AT THE EVENT THEY PAY THIS FOR.**

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6. IKF SECONDS / CORNERMAN / TRAINERS EVENT REGISTRATION FEE & RELEASE FORM

- There is no IKF Fee for a CURRENTLY "IKF CA LICENSED CORNERMAN / SECOND / TRAINER" to work a fighters corner on an IKF CA Event.
  - ALL CORNERMAN / SECONDS / TRAINERS must submit to the IKF Event Representative an IKF CA IN GYM TRAINING EVENT CORNERMAN/SECOND/TRAINER LICENSE REGISTRATION REGISTRATION & RELEASE FORM
    - For form click HERE.
    - IKF Fees and IKF Release Forms are not related to Event Promoter Fees or Release Forms.

- ALL "NON IKF CA LICENSED CORNERMAN / SECONDS / TRAINERS" Shall pay to the IKF Event Representative their Event Registration Fee which is **$5.00.
  - For form click HERE.
    - (**) If fighter wishes to apply this to an IKF CA CORNERMAN/SECOND/TRAINER License they may do so **ONLY AT THE EVENT THEY PAY THIS FOR.**

- IKF Mandatory Cornerman/Seconds/Trainers Rules and Regulations MUST BE OBEYED at these events. To see these Click HERE.

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7. IKF MEDICAL & SAFETY

- *"These events need to have an Ambulance and Doctor."*
  Andy Foster, Executive Officer, California State Athletic Commission, April 30, 2014.

- **DOCTOR FEES**

  - **DOCTOR WEIGH-IN FEE: $250.00**
    - Pre Fight Physical Required By *Doctor / MD / DO
      - Pre Fight Physical Form - Click Here.
        - Promoter is responsible for assuring the Doctor is paid a minimum of $250.00 for doing the event Pre Fight Physicals + Travel Fees.
          - Each fighter shall pay the Doctor directly for their own Pre Fight Physical which is $5.00.
            If total paid is less than $250, promoter shall pay the difference.

  - **DOCTOR EVENT FEE: $250.00**
    - *Doctor that Performed all the fighter Pre Fight Physicals must be in attendance during entire event.
    - Doctor's Event Fee is $250.00 for Up to 20 bouts.
    - There is an additional bout charge of $5 per bout above 20 paid by the event promoter.
    - Plus Travel Fees.
    - Additional Info, CLICK HERE.

- AMBULANCE
  - Minimum 1 Paramedic & 1 EMT.
  - This Fee is Paid by the Event Promoter.
  - Additional Info, CLICK HERE.

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8. IKF RINGSIDE RULES & REGULATIONS

- RING OFFICIALS AND CROWD SEPARATION
  - FIRST CROWD ROW TO BACK OF OFFICIALS CHAIR
    There must be a MINIMUM OF "5 FEET" FROM THE EDGE OF EACH RINGSIDE TABLE TO THE EDGE OF THE FIRST SPECTATOR CHAIR AT RINGSIDE so event officials can move freely around the ring during an event.
  - It is BEST if the promoter places a restrictive barrier between the first row of ringside seats and the event officials area.
    This prevents the crowd from confronting any event official and also keeps the crowd away from the ring to avoid any incidents or safety issues with the officials as well as the fighters and trainers.

- ALLOWED AT RINGSIDE TABLES
  - Event Officials and Event Personnel ONLY are allowed to sit at the Ringside Tables.
  - **This is NOT a Spectator Area!**

- NO ALCOHOL!
  - No ALCOHOLIC Beverages of ANY kind are allowed at ANY of the Ringside Tables.

- RING ACCESS
  - Promoter must have a MINIMUM of TWO Staircases up into the ring.
  - One in the Red Corner and one in the Blue Corner.
  - A Third Staircase works best for access of ring announcer, ring girls and medical staff.

- LIGHTING
  - Ring must be well lighted with NO SHADOWS cast from any lighting.
  - IKF Representative and IKF Referee(s) shall check the ring lighting prior to the event.

- RING MAT
  - Ring mat must be TIGHT.
  - There must not be ANY holes, dips or gaps in the ring padding under the mat.

- SITTING RINGSIDE
  - Only individuals approved by the IKF Event Representative.
  - NO CHEERING From ANYONE At ringside.
    - PHOTOGRAPHERS
      - As approved by the IKF Event Representative.
      - NO Flash Photography at Ringside or within 15 feet of the edge of the fighting ring.
        - Flashes can temporarily blind a fighter which could lead to serious injury of the blinded fighter.
      - Photographers must STAY in the area of the ring as informed by the IKF Representative!
        - This is usually one of the NEUTRAL (*WHITE*) CORNERS.
      - Photographers: DO NOT Stand straight up in front of the event crowd when at Ringside. Keep down so you do not block others views.
        - Stay out of the Ring and off the ring apron while the entirety of the bout is ongoing (*Inc Round Breaks*)
        - You may enter the Ring (*With Approval of the IKF Event Representative FOR EACH BOUT*) at the end of a bout.
    - VIDEO CREW
      - Cameramen filming at ring shall have their filming location confirmed by and "MUTUALLY" agreed upon by the IKF Event Representative and the Event Promoter PRIOR to the beginning of the event.
      - ALL Video Crew used on an IKF Sanctioned event can only be approved by the IKF Event Representative.
      - During a Bout, Cameramen can ONLY shoot from the SQUARE of the Neutral Corner - Ask Event Representative of this location

OR: On a cameraman stand or platform, as long as the location has been "MUTUALLY" agreed upon by the IKF Event Representative and the Event Promoter.
- They may NOT wonder outside the SQUARE of the Corner during the fighting round, but may do so during round breaks.
- May move towards a fighters corner during round breaks but MUST abide by the timekeepers "SECONDS OUT" warning to RETURN to the Square of the Neutral corner!

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9. IKF BOUT ROUNDS & REST LENGTHS

- JUNIORS UNDER 16: 60 to 90 Seconds.
- ADULTS 16 & UP: 1:30 to 2 minute rounds.
- ALL BOUTS: 1 Minute rests between rounds.
- MINIMUM NUMBER OF ROUNDS: 2
- MAXIMUM NUMBER OF ROUNDS: 3

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10. IKF MANDATORY EVENT EQUIPMENT

- **LEGAL BOXING RING**
  - **ALL RING SAFETY RULES AND REGULATIONS APPLY.**
    - To review, Click HERE.

11. IKF MANDATORY FIGHTER EQUIPMENT

- **TRAINING HEADGEAR**
  - MANDATORY
  - Supplied by the Fighter.
  - BOTH "TRAINING" and "COMPETITION" Style Headgear Are allowed.
  - NO FOAM KARATE - LIGHT CONTACT HEADGEAR ALLOWED!
  - For styles of TRAINING Headgear & Competition Headgear Click HERE.

- **GLOVES**
  - MANDATORY
  - Supplied by the Promoter.
  - ALL ADULT DIVISION FIGHTERS: 16 & UP
    - 16 Ounce Gloves.
  - JUNIORS AGES 8-15
    - OVER 100 LBS: 16 Ounce Gloves.
    - UNDER 100 LBS: 12-14 Ounce Gloves.
  - **Velcro Closure Preferred Over Lace Up Gloves**

- **SHIN & INSTEP PADS**
  - MANDATORY
  - Supplied by the Fighter.
  - **CLOTH - SLIP ON ONLY!**
  - Example, Click HERE.

- **MEN**
  - MANDATORY
  - Groin Cup
  - Supplied by the Fighter.

- **WOMEN**
  - MANDATORY
  - Pelvic Protector.
    - Supplied by the Fighter.
  - Chest Protector
    - Sports Bra OK.
    - Supplied by the Fighter.

- **FORM FITTING MOUTHGUARD**
  - MANDATORY
  - A Mouth Piece is MANDATORY for every fighter.
  - The mouth piece must be formed well enough so that it will stay in the mouth when the mouth is opened.
  - We recommend BRAINPAD Jaw Joint Protector, (*Mouth Piece*) for the best protection.
  - Check them out at: www.brainpads.com
  - Must be supplied by each fighter.

- **HANDWRAPS**
  - MANDATORY
  - Gauze & Tape "Pro Wraps"
  - OR - "CLOTH" Handwraps are acceptable.

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12. IKF JUDGES SCORING

- Judging shall be for the TRAINING of future judges on full style events.
- A "*Modified*" 10 point must system shall be in effect.
  - Keep in mind, under these rules, Judges are not scoring power, impact force& damage.
- Judges will score on technique, speed and overall "*CONTROL*".
  - Control and Accuracy of strikes shall score higher than contact force.

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13. IKF CONTACT RULES

- **SPARRING CONTACT**
  - **HEAD CONTACT**
    - Allowed and must be Shy of their BEST EFFORT and have No intent to Knock Out or Harm their opponent.
  - Bouts shall look, appear and be conducted as a "*FIGHTER SPARRING*" in a gym practice.
  - Techniques must be executed with no ill intent and matches cannot end by knockout, brutality or with deliberate intent to cause injury.
  - Fighters must perform just shy of their **BEST EFFORT** and have **No intent to Knock Out or Harm** their opponent.
  - **KNEES**
    - ALLOWED to the BODY (*Only if doing **Muay Thai or similar Rules*)
    - NOT the head.
  - **ELBOW STRIKES**
    - ALLOWED (*Only if doing **Muay Thai or similar Rules*) to the body only (*within the contact limits of above*)
    - Athletes must wear IKF Approved Elbow Pads.

    - **ADVANCED SPARRING BOUTS**
      REQUIRES PRE-APPROVAL OF THE IKF
      - More "*Advanced" Athletes will be allowed to use elbows (*Forearms - No Pointed Elbow Strikes*) to the head (*within the contact limits of above*).
        - (*) *As confirmed by the school instructors and approved by the IKF.*

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14. IKF JUNIORS

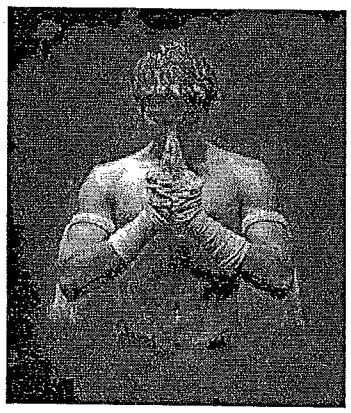
- Minimum Age: 8 to 17.
- All Above "*CONTACT*" Rules Apply.
- All above "*EQUIPMENT*" Rules Apply.

IKF CALIFORNIA RULES & STYLE RULES - CLICK HERE
-NOTE - SOME OF THE RULES ON THE FOLLOWING PAGES "DO NOT" APPLY TO THE ABOVE "TRAINING EVENTS!"

IKF CALIFORNIA - CLICK HERE

QUESTIONS?

E-MAIL THE IKF AT main@ikfkickboxing.com OR CALL US AT (916) 663-2467



IKF WORLD LINKS

5 STAR MISSION OF THE IKF

IKF HOME | IKF WORLDWIDE NEWS | IKF WORLDWIDE RANKINGS | ABOUT | LINKS | IKF WORLDWIDE EVENTS | IKF WORLDWIDE RULES

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