

EXTENDED TO NOVEMBER 15, 2019

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**2018**Open to Public
Inspection**A** For the 2018 calendar year, or tax year beginning

and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
7807 SOQUEL DRIVECity or town, state or province, country, and ZIP or foreign postal code
APTOS, CA 95003**F** Name and address of principal officer: SUSAN FARRAR
SAME AS C ABOVE**D** Employer identification number

94-2808039

E Telephone number

831-662-2000

G Gross receipts \$

24,813,057.

H(a) Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.CFSCC.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1982 **M** State of legal domicile: CA**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: FOUNDED IN 1982, COMMUNITY FOUNDATION SANTA CRUZ COUNTY IS A PUBLIC, NONPROFIT ORGANIZATION		
	2	Check this box <input type="checkbox"/> 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	19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	25
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 15,902,905.	Current Year 18,883,395.
	9	Program service revenue (Part VIII, line 2g)	10,324.	75,173.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,746,195.	4,131,485.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	536,185.	-119,804.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,195,609.	22,970,249.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,255,473.	12,266,331.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,937,017.	2,039,238.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 468,612.		
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,156,420.	1,008,489.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,348,910.	15,314,058.
	19	Revenue less expenses. Subtract line 18 from line 12	11,846,699.	7,656,191.
	20	Total assets (Part X, line 16)	Beginning of Current Year 130,903,854.	End of Year 126,718,872.
	21	Total liabilities (Part X, line 26)	4,061,146.	5,817,538.
22	Net assets or fund balances. Subtract line 21 from line 20	126,842,708.	120,901,334.	

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			
	SUSAN FARRAR, CHIEF OPERATING & FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name KEVIN T. WILSON	Preparer's signature	Date	Check <input type="checkbox"/> self-employed	PTIN P01313212
	Firm's name ▶ NOVOGRADAC & COMPANY LLP	Firm's EIN ▶ 94-3108253			
	Firm's address ▶ 2033 N. MAIN STREET, SUITE 400 WALNUT CREEK, CA 94596	Phone no. (925) 949-4252			

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

- **File a separate application for each return.**
► **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. COMMUNITY FOUNDATION SANTA CRUZ COUNTY	Employer identification number (EIN) or 94-2808039
	Number, street, and room or suite no. If a P.O. box, see instructions. 7807 SOQUEL DRIVE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. APTOS, CA 95003	

Enter the Return Code for the return that this application is for (file a separate application for each return) **0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
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 (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

- The books are in the care of ► **7807 SOQUEL DRIVE - APTOS, CA 95003**
Telephone No. ► **831-662-2000** Fax No. ► ☐
- 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.

- 1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2018** or
► ☐ tax year beginning _____, and ending _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a 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.	3a	\$	0.
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.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EQ and Form 8879-EQ for payment instructions.

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO PROMOTE PHILANTHROPY TO MAKE SANTA CRUZ COUNTY A BETTER PLACE TO
LIVE, NOW AND IN THE FUTURE.

2 Did the organization undertake any significant program services during the year which were not listed on the
prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 14,260,450. Including grants of \$ 12,266,331.) (Revenue \$ 894,211.)

DONOR-ADVISED AND DISCRETIONARY FUNDS HELD AT THE FOUNDATION PROVIDED
GRANTS TO TAX-EXEMPT 501(C)(3) NONPROFIT ORGANIZATIONS, CHARITABLE
ORGANIZATIONS AND PUBLIC SECTOR SERVICE AGENCIES IN SANTA CRUZ COUNTY
AND BEYOND IN SIX BROAD FIELDS OF INTEREST DESIGNATED BY OUR BOARD OF
DIRECTORS AS CORE TO OUR MISSION. THESE ARE: ARTS, HISTORY AND CULTURE;
COMMUNITY DEVELOPMENT; EDUCATION/YOUTH SERVICES; ENVIRONMENT; HEALTH,
AND; HUMAN SERVICES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ Including grants of \$) (Revenue \$)

4e Total program service expenses ► 14,260,450.

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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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(iii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	X	
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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	25	
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
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	25		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		X
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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
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		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
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? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.	13a		
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		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒ X

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	19			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent		19		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CA**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records **COMMUNITY FOUNDATION SANTA CRUZ COUNTY - 831-662-2000**
7807 SOQUEL DRIVE, APTOS, CA 95003

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Form 990 (2018)

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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

1a 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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARILYN CALCIANO PRESIDENT	1.00	X		X				0.	0.	0.
(2) PRENY COOPER VICE PRESIDENT	1.00	X		X				0.	0.	0.
(3) JULIE HAPP SECRETARY	1.00	X		X				0.	0.	0.
(4) DAVID DOOLIN TREASURER	1.00	X		X				0.	0.	0.
(5) EMILY BUCHBINDER DIRECTOR	1.00	X						0.	0.	0.
(6) LILIANA DIAZ DIRECTOR	1.00	X						0.	0.	0.
(7) LARRY DONATONI DIRECTOR	1.00	X						0.	0.	0.
(8) CYNTHIA DRULEY DIRECTOR	1.00	X						0.	0.	0.
(9) JUDY FRANICH DIRECTOR	1.00	X						0.	0.	0.
(10) JANET HEIEN DIRECTOR	1.00	X						0.	0.	0.
(11) FRED KEELEY DIRECTOR	1.00	X						0.	0.	0.
(12) CARLOS J. PALACIOS DIRECTOR	1.00	X						0.	0.	0.
(13) TONEE PICARD DIRECTOR	1.00	X						0.	0.	0.
(14) ROGELIO PONCE JR. DIRECTOR	1.00	X						0.	0.	0.
(15) KIRK SCHMIDT DIRECTOR	1.00	X						0.	0.	0.
(16) TREVOR STRUDLEY DIRECTOR	1.00	X						0.	0.	0.
(17) JIM WEISENSTEIN DIRECTOR	1.00	X						0.	0.	0.

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUSAN FARRAR CHIEF FINANCIAL OFFICER	40.00			X				146,667.	0.	26,876.
(19) SUSAN TRUE CHIEF EXECUTIVE OFFICER	40.00			X				210,000.	0.	23,214.
(20) CHRISTINA CUEVAS PROGRAM DIRECTOR	40.00					X		135,000.	0.	25,799.
(21) TIM CARSON RWMP PROGRAM DIRECTOR	40.00					X		120,667.	0.	15,876.
(22) SAM LEASK PHILANTHROPIC SERVICES DIR	40.00					X		123,800.	0.	25,127.
1b Sub-total								736,134.	0.	116,892.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								736,134.	0.	116,892.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Form 990 (2018)

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

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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	1 a 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	18,883,395.				
	g Noncash contributions included in lines 1a-1f: \$		4,286,653.				
	h Total. Add lines 1a-1f			18,883,395.			
Program Service Revenue	2 a FOUNDATION SERVICES FEES	Business Code	900099	75,173.	75,173.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			75,173.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,337,002.			3,337,002.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		2,637,291.					
	b Less: cost or other basis and sales expenses			1,842,808.			
	c Gain or (loss)			794,483.			
	d Net gain or (loss)			794,483.	794,483.		
	8 a 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						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
c Net income or (loss) from gaming activities							
10 a 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				
11 a OTHER INCOME		900099	24,555.	24,555.			
b CHANGE IN SPLIT INTEREST AGREEMEN		900099	-144,359.			-144,359.	
c							
d All other revenue							
e Total. Add lines 11a-11d			-119,804.				
12 Total revenue. See instructions			22,970,249.	894,211.	0.	3,192,643.	

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 8b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	12,266,331.	12,266,331.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	406,756.	266,139.	78,075.	62,542.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,219,674.	798,029.	234,111.	187,534.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	293,350.	191,938.	56,307.	45,105.
10 Payroll taxes	119,458.	78,161.	22,929.	18,368.
11 Fees for services (non-employees):				
a Management				
b Legal	25,162.	16,463.	4,830.	3,869.
c Accounting	36,803.	24,080.	7,064.	5,659.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	150,530.	98,491.	28,894.	23,145.
12 Advertising and promotion	23,752.	15,541.	4,559.	3,652.
13 Office expenses	30,170.	19,740.	5,791.	4,639.
14 Information technology	151,085.	98,855.	29,000.	23,230.
15 Royalties				
16 Occupancy	92,664.	60,630.	17,786.	14,248.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,770.	16,862.	4,946.	3,962.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	310,768.	203,335.	59,650.	47,783.
23 Insurance	38,052.	24,897.	7,304.	5,851.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GENERAL AND ADMINISTRATIVE	79,021.	51,703.	15,168.	12,150.
b REPAIRS AND MAINTENANCE	44,712.	29,255.	8,582.	6,875.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	15,314,058.	14,260,450.	584,996.	468,612.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ If following SOP 98-2 (ASC 958-720)

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Form 990 (2018)

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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		1	
	2 Savings and temporary cash investments	942,974.	2	2,054,108.
	3 Pledges and grants receivable, net	374,393.	3	319,725.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	1,466,874.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	37,774.	9	75,229.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 9,781,308.		
	b Less: accumulated depreciation	10b 2,296,776.		
		7,713,828.	10c	7,484,532.
	11 Investments - publicly traded securities	119,410,971.	11	113,106,519.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	2,423,914.	15	2,211,885.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	130,903,854.	16	126,718,872.	
Liabilities	17 Accounts payable and accrued expenses	127,079.	17	163,976.
	18 Grants payable	877,022.	18	2,880,857.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	939,378.	20	952,553.
	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	165,000.	23	128,137.
	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	1,952,667.	25	1,692,015.
	26 Total liabilities. Add lines 17 through 25	4,061,146.	26	5,817,538.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	7,554,456.	27	7,403,865.
	28 Temporarily restricted net assets	59,817,511.	28	51,572,608.
	29 Permanently restricted net assets	59,470,741.	29	61,924,861.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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		32	
	33 Total net assets or fund balances	126,842,708.	33	120,901,334.
	34 Total liabilities and net assets/fund balances	130,903,854.	34	126,718,872.

Form 990 (2018)

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Form 990 (2018)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,970,249.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,314,058.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,656,191.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	126,842,708.
5	Net unrealized gains (losses) on investments	5	-13,597,564.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	120,901,335.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2018)

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.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 COUNTY

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,092,957.	11,556,876.	12,999,130.	15,902,905.	18,883,395.	68,435,263.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9,092,957.	11,556,876.	12,999,130.	15,902,905.	18,883,395.	68,435,263.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,995,107.
6 Public support. Subtract line 5 from line 4.						58,440,156.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	9,092,957.	11,556,876.	12,999,130.	15,902,905.	18,883,395.	68,435,263.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,158,418.	2,457,159.	2,592,469.	2,900,947.	3,337,002.	13,445,995.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	359,071.	-104,644.	44,945.	538,224.	50,752.	888,348.
11 Total support. Add lines 7 through 10						82,769,606.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	70.61 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	67.31 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2018

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 COUNTY

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 ☐

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 **COUNTY**

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 **COUNTY**

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.	
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.	
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).	
2 Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	
2a	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	
2b	Yes	No
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	
3a	Yes	No
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	
3b	Yes	No

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 **COUNTY**

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

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

Schedule A (Form 990 or 990-EZ) 2018

COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990 or 990-EZ) 2018 **COUNTY**

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Name of organization COMMUNITY FOUNDATION SANTA CRUZ COUNTY	Employer identification number 94-2808039
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018Open to Public
InspectionName of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**Employer identification number
94-2808039**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the
organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	133	303
2 Aggregate value of contributions to (during year)	8,525,441.	10,357,954.
3 Aggregate value of grants from (during year)	9,049,705.	3,216,626.
4 Aggregate value at end of year	41,455,992.	79,445,342.
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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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 7/25/06, 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, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Schedule D (Form 990) 2018

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a ☐ Public exhibition d ☐ Loan or exchange programs
- b ☐ Scholarly research e ☐ Other _____
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	67,015,357.	61,005,398.	55,797,613.	57,636,373.	35,696,777.
b Contributions	2,866,575.	1,055,542.	3,115,151.	1,664,789.	21,518,116.
c Net investment earnings, gains, and losses	-5,482,350.	7,730,225.	4,155,663.	-1,352,399.	2,157,415.
d Grants or scholarships	2,202,004.	1,791,284.	1,168,961.	1,275,198.	982,240.
e Other expenditures for facilities and programs					
f Administrative expenses	998,309.	984,524.	894,068.	875,952.	753,695.
g End of year balance	61,199,269.	67,015,357.	61,005,398.	55,797,613.	57,636,373.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,083,604.		1,083,604.
b Buildings		7,343,077.	1,498,760.	5,844,317.
c Leasehold improvements				
d Equipment		1,037,129.	668,410.	368,719.
e Other		317,498.	129,606.	187,892.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,484,532.

Schedule D (Form 990) 2018

COMMUNITY FOUNDATION SANTA CRUZ

Schedule D (Form 990) 2018

COUNTY

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

Complete if the organization answered "Yes" on 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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY LIABILITY	698,429.
(3) CHARITABLE TRUST LIABILITIES	993,586.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,692,015.

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 D (Form 990) 2018

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Schedule D (Form 990) 2018

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	11,240,114.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-13,597,564.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,521,117.
e	Add lines 2a through 2d	2e	-12,076,447.
3	Subtract line 2e from line 1	3	23,316,561.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-346,312.
c	Add lines 4a and 4b	4c	-346,312.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	22,970,249.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	16,356,437.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,601,892.
e	Add lines 2a through 2d	2e	1,601,892.
3	Subtract line 2e from line 1	3	14,754,545.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	559,513.
c	Add lines 4a and 4b	4c	559,513.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	15,314,058.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE PREPARATION OF FINANCIAL STATEMENTS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRES THE FOUNDATION TO REPORT INFORMATION REGARDING ITS EXPOSURE TO VARIOUS TAX POSITIONS TAKEN BY THE FOUNDATION. MANAGEMENT HAS DETERMINED WHETHER ANY TAX POSITIONS HAVE MET THE RECOGNITION THRESHOLD AND HAS MEASURED THE FOUNDATION'S EXPOSURE TO THOSE TAX POSITIONS. MANAGEMENT BELIEVES THAT THE FOUNDATION HAS ADEQUATELY ADDRESSED ALL RELEVANT TAX POSITIONS AND THAT THERE ARE NO UNRECORDED TAX LIABILITIES. FEDERAL TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS THREE YEARS OF TAX RETURNS FILED. CALIFORNIA TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS FOUR YEARS OF TAX RETURNS FILED. ANY

Part XIII Supplemental Information (continued)

INTEREST OR PENALTIES ASSESSED TO THE FOUNDATION ARE RECORDED IN OPERATING EXPENSES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REGIONAL WATER MANAGEMENT FOUNDATION ACTIVITY	1,943,634.
INTER-ENTITY ACTIVITY	-422,517.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,521,117.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUND ACTIVITY	-346,312.
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PART XII, LINE 2D - OTHER ADJUSTMENTS:

REGIONAL WATER MANAGEMENT FOUNDATION ACTIVITY	2,024,409.
INTER-ENTITY ACTIVITY	-422,517.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,601,892.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUNDS ACTIVITY	559,513.
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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number
94-2808039

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY - SILICON VALLEY/CENTRAL COAST REGION - 747 CAMDEN AVE STE B - CAMPBELL, CA 95008	13-1788491	501(C)(3)	5,837.	0.			GENERAL OPERATING SUPPORT
AGRICULTURAL HISTORY PROJECT PO BOX 1181 WATSONVILLE, CA 95077	77-0165945	501(C)(3)	8,189.	0.			GENERAL OPERATING SUPPORT
AMERICAN RED CROSS OF THE CENTRAL COAST - PO BOX AR - CARMEL, CA 93921	53-0196605	501(C)(3)	9,320.	0.			GENERAL OPERATING SUPPORT
COAL CREEK HEALS ON WHEELS 455 N BURLINGTON AVE LAFAYETTE, CO 80026	84-0634856	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	23-7432162	501(C)(3)	10,000.	0.			SUPPORT VOLUNTEERS IN THEIR SERVICE TO THE VICTIMS OF HURRICANE HARVEY IN TEXAS
ENCOMPASS COMMUNITY SERVICES 380 ENCINAL ST STE 200 SANTA CRUZ, CA 95060	23-7275290	501(C)(3)	1,133,630.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

225.

3 Enter total number of other organizations listed in the line 1 table

17.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2018)

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION FOUNDATION - 125 BROAD ST 18TH FL - NEW YORK, NY 10004	13-6213516	501(C)(3)	6,777.	0.			GENERAL OPERATING SUPPORT
FRIENDS OF SANTA CRUZ STATE PARKS 1543 PACIFIC AVE #206 SANTA CRUZ, CA 95060	51-0183410	501(C)(3)	66,301.	0.			GENERAL OPERATING SUPPORT
GIRLS INC. OF THE CENTRAL COAST 318 CAYUGA ST STE 101A SALINAS, CA 93901	20-5040398	501(C)(3)	26,470.	0.			GENERAL OPERATING SUPPORT AND FOR SMART CHOICES SUMMER PROGRAM
ARTS COUNCIL SANTA CRUZ COUNTY 1070 RIVER ST SANTA CRUZ, CA 95060	94-2500140	501(C)(3)	42,000.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
CELEBRITY FIGHT NIGHT FOUNDATION 2111 E HIGHLAND AVENUE ST 135 PHOENIX, AZ 85016	86-0903119	501(C)(3)	82,000.	0.			GENERAL OPERATING SUPPORT
BELLARINE COLLEGE PREPARATORY 960 WEST HEDDING STREET SAN JOSE, CA 95126	94-1160938	501(C)(3)	15,000.	0.			THE WADE FAMILY FINANCIAL AID EDNOWNMENT FUND & J2
BEND SCIENCE STATION 1027 NW TRENTON AVE BEND, OR 97707	14-1846714	501(C)(3)	25,000.	0.			THE BUILDING FUND AND FOR GENERAL OPERATING SUPPORT
ASPIRE PUBLIC SCHOOLS 1001 22ND AVE SUITE 100 OAKLAND, CA 94606	94-3311088	501(C)(3)	30,000.	0.			ASPIRE FORWARD CAMPAIGN AND FINANCIAL ASSISTANCE SCHOLARSHIP
WATSONVILLE WETLANDS WATCH 500 HARKINS SLOUGH RD WATSONVILLE, CA 95019	77-0519882	501(C)(3)	71,418.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT

Schedule I (Form 990)

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

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Schedule I (Form 990) **Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AWAKEN PO BOX 40635 RENO, NV 89504	38-3843380	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CABRILLO COLLEGE FOUNDATION 6500 SOQUEL DR APTOS, CA 95003	94-6121953	501(C)(3)	117,896.	0.			WOMEN'S EDUCATION SUCCESS, STROKE CENTER, CAP, GUIDED PATHWAYS PROJECT & PRESIDENT'S
CABRILLO FESTIVAL OF CONTEMPORARY MUSIC - 147 SOUTH RIVER ST STE 232 - SANTA CRUZ, CA 95060	94-6123298	501(C)(3)	22,500.	0.			GENERAL OPERATING SUPPORT, ENHANCE CORE PROGRAMS
CENTRAL COAST YMCA 500 LINCOLN AVE SALINAS, CA 93901	77-0202335	501(C)(3)	20,000.	0.			REDUCE OBESITY AND RELATED CHRONIC DISEASE IN LATINO CHILDREN
CHARITY-WATER 40 WORTH STREET STE 330 NEW YORK, NY 10013	22-3936753	501(C)(3)	10,000.	0.			FIELD OPERATIONS
COMMUNITY BRIDGES 236 SANTA CRUZ AVE APTOS, CA 95003	94-2460211	501(C)(3)	70,976.	0.			GENERAL OPERATING SUPPORT, MEALS ON WHEELS AND NUEVA VISTA FAMILY RESOURCE CENTER
COMMUNITY FOUNDATION FOR MONTEREY COUNTY - 2354 GARDEN RD - MONTEREY, CA 93940	94-1615897	501(C)(3)	34,500.	0.			GENERAL OPERATING SUPPORT AND MCGIVES
COURT APPOINTED SPECIAL ADVOCATES OF SANTA CRUZ COUNTY - CASA - 813 FREEDOM BLVD - WATSONVILLE, CA 95076	77-0305354	501(C)(3)	57,590.	0.			GENERAL OPERATING SUPPORT, BIRTH TO 5 PROGRAM AND IMAGINE FUNDRAISER
CURIODYSSEY AT COYOTE POINT 1651 COYOTE POINT DR SAN MATEO, CA 94401	94-1262434	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

COMMUNITY FOUNDATION SANTA CRUZ

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIENTES COMMUNITY DENTAL CARE 1830 COMMERCIAL WAY SANTA CRUZ, CA 95065	77-0311752	501(C)(3)	40,000.	0.			GENERAL OPERATING SUPPORT AND DIENTES CARES PROGRAM
DIGITAL NEST 1961 MAIN ST # 221 WATSONVILLE, CA 95076	46-5757256	501(C)(3)	81,050.	0.			GENERAL OPERATING SUPPORT AND CAPITAL CAMPAIGN SUPPORT
DIVERSITY CENTER PO BOX 8280 SANTA CRUZ, CA 95061	77-0212967	501(C)(3)	92,400.	0.			GENERAL OPERATING SUPPORT
DOMINICAN HOSPITAL FOUNDATION 1555 SOQUEL DR EDUCATION CTR 2ND FL SANTA CRUZ, CA 95065	94-2450442	501(C)(3)	28,500.	0.			3 TILES, HEALING GARDEN & MATCH, AND PTERON SOCIETY
ELKHORN SLOUGH FOUNDATION PO BOX 267 MOSS LANDING, CA 95039	94-2823247	501(C)(3)	79,363.	0.			GENERAL OPERATING SUPPORT
FAMILY SERVICE AGENCY OF THE CENTRAL COAST - 104 WALNUT AVE STE 208 - SANTA CRUZ, CA 95060	94-1716354	501(C)(3)	38,625.	0.			GENERAL OPERATING SUPPORT, WOMENCARE, SURVIVORS HEALING CENTER PROGRAM
FAMILY SUPPORTIVE HOUSING 692 N KING RD SAN JOSE, CA 95133	77-0106237	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
FRIENDS OF HOPKINS MARINE STATION 120 OCEANVIEW BLVD PACIFIC GROVE, CA 93950	94-1156365	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
FRIENDS OF LONG MARINE LAB - SEYMOUR CENTER - 100 SHAFER RD - SANTA CRUZ, CA 95060	23-7394590	501(C)(3)	35,400.	0.			GENERAL OPERATING SUPPORT

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Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF FAITH COMMUNITIES OF SNATA CRUZ COUNTY - 532 CENTER STREET - SANTA CRUZ, CA 95060	81-3652622	501(C)(3)	5,000.	0.			THE FIATH COMMUNITY SHELTER PROGRAM
FRIENDS OF THE SANTA CRUZ PUBLIC LIBRARIES - PO BOX 8472 - SANTA CRUZ, CA 95061	94-2612557	501(C)(3)	232,754.	0.			GENERAL OPERATING SUPPORT
GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST - 1500 PALMA DR STE 110 - VENTURA, CA 93003	94-1567162	501(C)(3)	13,981.	0.			GENERAL OPERATING SUPPORT
GREY BEARS 2710 CHANTICLEER AVE SANTA CRUZ, CA 95065	94-2298681	501(C)(3)	5,500.	0.			GENERAL OPERATING SUPPORT GENERAL OPERATING SUPPORT, BUILDING CAMPAIGN, HOLIDAY DINNERS AND SENIOR PROGRAMS
HABITAT FOR HUMANITY MONTEREY BAY 1007 CEDAR ST SANTA CRUZ, CA 95060	77-0206356	501(C)(3)	5,840.	0.			GENERAL OPERATING SUPPORT
HAPPY VALLEY ELEMENTARY SCHOOL 3125 BRANCIFORTE DR SANTA CRUZ, CA 95065	94-6002633	501(C)(3)	26,803.	0.			GENERAL OPERATING SUPPORT OPERATING SUPPORT, 180/220 INITIATIVE, SOUPLINE SUPPER, AND GIVING TUESDAY
HOMELESS SERVICES CENTER 115-B CORAL ST SANTA CRUZ, CA 95060	77-0126783	501(C)(3)	41,250.	0.			GENERAL OPERATING SUPPORT GENERAL OPERATING SUPPORT AND CENTENNIAL INITIATIVE
HOOVER INSTITUTION - STANFORD UNIVERSITY - 434 GALVEZ MALL STANFORD UNIVERSITY - STANFORD, CA 94305	94-1156365	501(C)(3)	150,000.	0.			GENERAL OPERATING SUPPORT GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
HOSPICE OF SANTA CRUZ COUNTY 940 DISC DR SCOTTS VALLEY, CA 95066	94-2497618	501(C)(3)	190,344.	0.			GENERAL OPERATING SUPPORT GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT

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COMMUNITY FOUNDATION SANTA CRUZ

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDEPENDENT WORLD TELEVISION INC. 231 N. HOLLIDAY ST BALTIMORE, MD 21202	01-0808098	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT OF THE REAL NEWS NETWORK
JACOB'S HEART CHILDREN'S CANCER SUPPORT SERVICES - 680 W BEACH ST - WATSONVILLE, CA 95076	68-0413822	501(C)(3)	8,800.	0.			GENERAL OPERATING SUPPORT
AMERICAN ONLINE GIVING FOUNDATION INC - 200 MAIN STREET - SAFETY HARBOR, FL 34695	81-0739440	501(C)(3)	130,934.	0.			OPERATING SUPPORT
KUUMBA JAZZ CENTER 320-2 CEDAR ST SANTA CRUZ, CA 95060	51-0159252	501(C)(3)	22,549.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
LAND TRUST OF SANTA CRUZ COUNTY 617 WATER ST SANTA CRUZ, CA 95060	94-2431856	501(C)(3)	100,369.	0.			OPERATING SUPPORT, WILDLIFE AND WILDLAND CAMPAIGN, SAVE FARMLAND PROJECT & PROGRAM SUPPORT
LANDWATCH MONTEREY COUNTY PO BOX 1876 SALINAS, CA 93502	91-1862145	501(C)(3)	5,500.	0.			GENERAL OPERATING SUPPORT
LIFE LAB SCIENCE PROGRAM 1156 HIGH STREET SANTA CRUZ, CA 95064	94-2778848	501(C)(3)	23,250.	0.			GENERAL OPERATING SUPPORT, GARDEN-BASED EDUCATION PROGRAMS
LIVE OAK SCHOOL DISTRICT 984-1BOSTWICK LANE SANTA CRUZ, CA 95062			109,700.	0.			SUPPORT THE SPRING BREAK TRIP TO WASHINGTON DC
LOS ANGELES LGBT CENTER 1625 N. SCHRADER BOULEVARD LOS ANGELES, CA 90028	95-3567895	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624	81-0369262	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
MORELAND NOTRE DAME SCHOOL 133 BRENNAN ST WATSONVILLE, CA 95076	94-1347045	501(C)(3)	8,878.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
MUSEUM OF ART AND HISTORY AT THE MCPHERSON CENTER - 705 FRONT ST - SANTA CRUZ, CA 95060	94-2718861	501(C)(3)	106,244.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
MUSIC ACADEMY OF THE WEST 1070 FAIRWAY RD SANTA BARBARA, CA 93108	95-1525814	501(C)(3)	20,000.	0.			SUPPORT THE SUMMER JAZZ PROGRAM
NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW STE 200 WASHINGTON, DC 20005	52-1086761	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NATURE CONSERVANCY 4245 N FAIRFAX DR STE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	35,250.	0.			SUPPORT THE CAMPAIGN FOR CARPENTER VALLEY, PROGRAM SUPPORT FOR HAWAII AND CALIFORNIA
O'NEILL SEA ODYSSEY 2222 E CLIFF DR STE 222 SANTA CRUZ, CA 95062	77-0464784	501(C)(3)	58,870.	0.			GENERAL OPERATING SUPPORT, OPERATING SUPPORT, TRANSLATIONS FUN DELEGATE SUPPORT FUND AND PROFESSIONAL EXHIBITS
OVEREATERS ANONYMOUS PO BOX 44020 RIO RANCHO, NM 87174	23-7016806	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
PAJARO VALLEY COMMUNITY HEALTH TRUST - 85 NIELSON ST WATSONVILLE, CA 95076	94-1149702	501(C)(3)	18,050.	0.			GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAJARO VALLEY HISTORICAL ASSOCIATION - PO BOX 623 - WATSONVILLE, CA 95077	94-1663161	501(C)(3)	26,809.	0.			GENERAL OPERATING SUPPORT, PROGRAM SUPPORT, AND MAINTENANCE SUPPORT
PAJARO VALLEY LOAVES AND FISHES 150 SECOND ST WATSONVILLE, CA 95076	77-0319247	501(C)(3)	35,465.	0.			GENERAL OPERATING SUPPORT, FARM TO PANTRY PROGRAM, AND EMPTY BOWLS
PAJARO VALLEY SHELTER SERVICES 115 BRENNAN ST WATSONVILLE, CA 95076	94-1393418	501(C)(3)	67,980.	0.			GENERAL OPERATING SUPPORT, MOTHER'S DAY FUN RUN, AND PROGRAM SUPPORT
PLANNED PARENTHOOD MAR MONTE 1691 THE ALAMEDA SAN JOSE, CA 95126	94-1583439	501(C)(3)	36,500.	0.			GENERAL OPERATING SUPPORT AND OUTREACH SUPPORT
RICE UNIVERSITY 6100 MAIN ST HOUSTON, TX 77005	74-1109620	501(C)(3)	150,000.	0.			GENERAL OPERATING SUPPORT
SALUD PARA LA GENTE 195 AVIATION WAY STE 200 WATSONVILLE, CA 95076	94-2705747	501(C)(3)	43,000.	0.			OPERATING SUPPORT AND CAPITAL CAMPAIGN FOR A NEW CLINIC
SALVATION ARMY SANTA CRUZ 721 LAUREL ST SANTA CRUZ, CA 95060	94-1156347	501(C)(3)	5,837.	0.			GENERAL OPERATING SUPPORT
SALVATION ARMY WATSONVILLE 214 UNION ST WATSONVILLE, CA 95076	95-3082788	501(C)(3)	26,816.	0.			GENERAL OPERATION SUPPORT OPERATING SUPPORT, CRADLE TO CAREER PROGRAM AND PEDIATRIC BEHAVIORAL HEALTH SERVICES
SANTA CRUZ COMMUNITY HEALTH CENTERS - 250 LOCUST ST - SANTA CRUZ, CA 95060	23-7428303	501(C)(3)	135,900.	0.			

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SANTA CRUZ COUNTY SYMPHONY 307 CHURCH ST SANTA CRUZ, CA 95060	94-2373284	501(C)(3)	16,171.	0.			GENERAL OPERATING SUPPORT, TUBA SPONSORSHIP AND CONCERT SUPPORT
SANTA CRUZ MONTESSORI SCHOOL 6230 SOQUEL DRIVE APTOS, CA 95003	94-1573507	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
SANTA CRUZ MUSEUM OF NATURAL HISTORY - 1305 E CLIFF DR - SANTA CRUZ, CA 95062	94-2427733	501(C)(3)	37,750.	0.			GENERAL OPERATING SUPPORT, ART OF NATURE EXHIBIT SUPPORT
SANTA CRUZ SHAKESPEARE 500 CHESTNUT ST STE 250 SANTA CRUZ, CA 95060	46-4635444	501(C)(3)	22,151.	0.			GENERAL OPERATING SUPPORT, SUMMER FESTIVAL SUPPORT, CAPITAL CAMPAIGN SUPPORT
SAVE OUR SHORES 345 LAKE AVE STE A SANTA CRUZ, CA 95062	94-2745941	501(C)(3)	65,942.	0.			GENERAL OPERATING SUPPORT AND EDUCATIONAL OUTREACH
SAVE THE REDWOODS LEAGUE 111 SUTTER ST 11TH FL SAN FRANCISCO, CA 94104	94-0843915	501(C)(3)	6,500.	0.			GENERAL OPERATING SUPPORT
SECOND HARVEST FOOD BANK 800 OHLONE PKWY WATSONVILLE, CA 95076	77-0326685	501(C)(3)	91,639.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
STUDENT CONSERVATION ASSOCIATION PO BOX 550 CHARLESTOWN, NH 03603	91-0880684	501(C)(3)	6,250.	0.			GENERAL OPERATING SUPPORT
TEMPLE BETH EL JEWISH COMMUNITY CENTER - 3055 PORTER GULCH RD - APTOS, CA 95003	94-6139655	501(C)(3)	53,690.	0.			GENERAL OPERATING SUPPORT, SUPPORT FOR FESTIVALS AND ROSE LEVINE YOUTH CAMPSHIP RESERVED

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TOWER FOUNDATION - SAN JOSE STATE UNIVERSITY, SJSU - UNIVERSITY ADVANCEMENT 1 WASHINGTON SQUARE - SAN JOSE, CA 95192	83-0403915	501(C)(3)	52,000.	0.			MOSS LANDING MARINE LABORATORIES, MEN'S WATER POLO TEAM
TRUST FOR PUBLIC LAND 101 MONTGOMERY ST STE 900 SAN FRANCISCO, CA 94104	23-7222333	501(C)(3)	16,000.	0.			SUPPORT THE NORTHERN ROCKIES PROGRAM AND WILL ROGER ENDOWMENT
UC SAN FRANCISCO FOUNDATION UCSF BOX 0248 SAN FRANCISCO, CA 94143	94-2829914	501(C)(3)	10,250.	0.			SUPPORT BENIOFF CHILDREN'S HOSPITAL & SCHOOL OF DENTISTRY ANNUAL FUND
UC SANTA CRUZ FOUNDATION 1156 HIGH STREET SANTA CRUZ, CA 95064	23-7394590	501(C)(3)	32,000.	0.			PROGRAM SUPPORT, SUPPORT FOR DEPARTMENTS, DREAMERS FUND AND NATURAL HISTORY MUSEUM
VALLEY WOMEN'S CLUB PO BOX 574 BEN LOMOND, CA 95005	77-0163322	501(C)(3)	7,000.	0.			LEGACY OF TREES CAMPAIGN, NATIVE HABITAT RESTORATION WORK AND AMERICORPS VOLUNTEERS
VANGUARD CHARITABLE ENDOWMENT PROGRAM - PO BOX 9509 - WARWICK, RI 02889	23-2888152	501(C)(3)	106,427.	0.			BURKE BORINA VANGUARD CHARITABLE
VENTANA WILDLIFE SOCIETY 19045 PORTOLA DR STE F1 SALINAS, CA 93908	94-2795935	501(C)(3)	21,000.	0.			GENERAL OPERATING SUPPORT
VISITING NURSE ASSOCIATION OF SANTA CRUZ COUNTY - 2880 SOQUEL AVE STE 10 - SANTA CRUZ, CA 95062	94-1622036	501(C)(3)	13,980.	0.			GENERAL OPERATING SUPPORT
VOLUNTEER CENTER OF SANTA CRUZ COUNTY - 1740 17TH AVE STE 2 - SANTA CRUZ, CA 95062	94-1702678	501(C)(3)	111,320.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT

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WATSONVILLE HIGH SCHOOL FOUNDATION PO BOX 832 WATSONVILLE, CA 95077	77-0008389	501(C)(3)	10,325.	0.			SUPPORT THE MISSION AND ACTIVITIES OF THE WATSONVILLE HIGH SCHOOL FOUNDATION
WHARF TO WHARF RACE PO BOX 307 CAPITOLA, CA 95010	77-0061106	501(C)(3)	12,000.	0.			OTIS CHANDLER SCHOLARSHIPS
BONNY DOON COMMUNITY SCHOOL FOUNDATION - PO BOX 8089 - SANTA CRUZ, CA 95061	77-0412170	501(C)(3)	5,994.	0.			OPERATING SUPPORT
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20090	52-1693387	501(C)(3)	50,000.	0.			GENERAL OPERATING SUPPORT
YWCA OF WATSONVILLE 340 E BEACH ST WATSONVILLE, CA 95076	94-1212142	501(C)(3)	7,374.	0.			GENERAL OPERATING SUPPORT
AUDUBON CALIFORNIA SOCIETY 220 MONTGOMERY ST STE 1000 SAN FRANCISCO, CA 94104	13-1624102	501(C)(3)	18,000.	0.			GENERAL OPERATING SUPPORT
ACADEMY OF MOTION PICTURE ARTS AND SCIENCE - 8949 WILSHIRE BOULEVARD - BEVERLY HILLS, CA 90211	95-2243698	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT FARMWORKER HOUSING PROJECT, MAINTENANCE OF EQUIPMENT, AGRICULTURAL EDUCATION & OPERATING
AGRI-CULTURE 141 MONTE VISTA AVE WATSONVILLE, CA 95076	77-0212413	501(C)(3)	49,579.	0.			PROVIDE A PILOT LGBT SENSITIVITY TRAINING TO STAFF AT LONG-TERM CARE FACILITIES
ADVOCACY INC. 5274 SCOTTS VALLEY DR STE 203 SCOTTS VALLEY, CA 95066	94-2400572	501(C)(3)	11,500.	0.			

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BIG BROTHERS BIG SISTERS OF SANTA CRUZ COUNTY - 1500 41ST AVE STE 250 - CAPITOLA, CA 95010	94-2826754	501(C)(3)	26,097.	0.			GENERAL OPERATING SUPPORT, AND TO ASSIST CHILDREN AND YOUTH WITH THEIR EDUCATIONAL NEEDS
CALIFORNIA AGRICULTURAL LEADERSHIP FOUNDATION - PO BOX 479 - SALINAS, CA 93902	94-6069269	501(C)(3)	55,000.	0.			FELLOWSHIP SPONSORSHIP IN SUPPORT OF AG LEADERSHIP
BOYS AND GIRLS CLUB OF SANTA CRUZ COUNTY - 543 CENTER ST - SANTA CRUZ, CA 95060	94-6129075	501(C)(3)	39,550.	0.			GENERAL OPERATING SUPPORT AND OUT-OF-SCHOOL PROGRAMS
BOYS AND GIRLS CLUB OF COACHELLA VALLEY - 42-600 COOK ST STE 120 - PALM DESERT, CA 92211	95-6122699	501(C)(3)	15,000.	0.			SUPPORT TUTORIAL PROGRAMS
BERKELEY YOUTH ALTERNATIVES 1255 ALLSTON WAY BERKELEY, CA 94702	94-1711728	501(C)(3)	20,000.	0.			SUPPORT PROGRAMS THAT ASSIST CHILDREN AND YOUTH WITH THEIR EDUCATIONAL NEEDS
BIKE SANTA CRUZ COUNTY EDUCATION FUND - 333 SOQUEL AVE - SANTA CRUZ, CA 95062		501(C)(3)	22,000.	0.			SUPPORT THE EDUCATION FUND AND DIVERSITY SCHOLARSHIP, EARN-A-BIKE PROGRAM AND ADVOCACY
CALIFORNIA CERTIFIED ORGANIC FARMERS FOUNDATION - 2155 DELAWARE AVE STE 150 - SANTA CRUZ, CA 95060	30-0106255	501(C)(3)	10,000.	0.			THE 2017 FUTURE ORGANIC FARMER GRANT FUND
CALIFORNIA STRAWBERRY GROWERS SCHOLARSHIP FUND - PO BOX 269 - WATSONVILLE, CA 95077	77-0411386	501(C)(3)	10,000.	0.			THE CALIFORNIA STRAWBERRY COMMISSION'S SCHOLARSHIP
CANERS FOUNDATION 1521 I STREET SACRAMENTO, CA 95814	94-2819022	501(C)(3)	10,000.	0.			THE SCALING UP CLIMATE SMART AGRICULTURE SPONSORSHIP

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BIONEERS COLLECTIVE HERITAGE INSTITUTE - 1607 PASEO DE PERALTA STE 3 - SANTA FE, NM 87501	85-0432731	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CENTER FOR GROWING TALENT BY PMA INC - 1500 CASHO MILL RD - NEWARK, DE 19711	51-0565938	501(C)(3)	15,000.	0.			OPERATING SUPPORT
COACHELLA VALLEY RESCUE MISSION 47470 VAN BUREN INDIO, CA 92201	95-2684844	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
CERT AUXILIARY OF SANTA CRUZ COUNTY - 308 PARK DR - APTOS, CA 95003	47-3056484	501(C)(3)	8,000.	0.			EMERGENCY BACKPACKS FOR COMMUNITY EMERGENCY RESPONSE TEAM & HIRE A FEMA-CERTIFIED INSTRUCTOR
COASTAL COMMUNITY FOUNDATION 162 S RANCHO SANTA FE RD STE F-50 ENCINITAS, CA 92024	33-0216692	501(C)(3)	5,000.	0.			SOLANA BEACH FUND & DIGITAL MARKETING STRATEGIST
CEIBA PUBLIC SCHOOLS FOUNDATION 260 WEST RIVERSIDE DRIVE WATSONVILLE, CA 95076	20-5155858		92,650.	0.			GENERAL OPERATING SUPPORT
COASTAL WATERSHED COUNCIL 107 DAKOTA AVE STE 4 SANTA CRUZ, CA 95060	68-0368798	501(C)(3)	55,000.	0.			GENERAL OPERATING SUPPORT
COLLEGE OF THE DESERT FOUNDATION 43-500 MONTEREY AVE PALM DESERT, CA 92260	95-3829219	501(C)(3)	25,000.	0.			SUPPORT THE PLEDGE PROGRAM FOR THE 2017 YEAR
COLLEGE TRACK 112 LINDEN ST OAKLAND, CA 94607	94-3279613	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

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CITY OF CAPITOLA LIBRARY FUND 420 CAPITOLA AVE CAPITOLA, CA 95010		501(C)(3)	9,317.	0.			SUPPORT CONSULTING FEES
COMMUNITY ACTION BOARD OF SANTA CRUZ COUNTY - 406 MAIN ST STE 207 - WATSONVILLE, CA 95076	94-2523780	501(C)(3)	9,250.	0.			GENERAL OPERATING SUPPORT AND SANTA CRUZ COUNTY IMMIGRATION PROJECT
CITY OF WATSONVILLE ENVIRONMENTAL SCIENCE WORKSHOP - 120 2ND ST - WATSONVILLE, CA 95076			70,000.	0.			SUPPORT ITS SATELLITE WORKSHOP SITES
COMMUNITIES ORGANIZED FOR RELATIONAL POWER IN ACTION - 95 ALTA VISTA AVE - WATSONVILLE, CA 95076	77-0557460	501(C)(3)	20,000.	0.			EXPANDED ACCESS & EQUITY IN MENTAL HEALTH/SUBSTANCE USE
DESERT BEST FRIEND'S CLOSET 74-040 HIGHWAY 111 STE F PALM DESERT, CA 92360	26-2388221	501(C)(3)	5,000.	0.			OPERATING SUPPORT
EL SISTEMA SANTA CRUZ 235 SOUTH BRANCIFORTE AVE SANTA CRUZ, CA 95062		501(C)(3)	9,500.	0.			GENERAL OPERATING SUPPORT AND MUSIC PROGRAMS SUPPORT
ENVIRONMENTAL DEFENSE FUND 1875 CONNECTICUT AVE NW STE 600 WASHINGTON, DC 20009	11-6107128	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
FIRST CHRISTIAN CHURCH - WATSONVILLE - 15 MADISON STREET WATSONVILLE - WATSONVILLE, CA 95076	94-6001793	501(C)(3)	6,100.	0.			LGBTQ YOUTH PROGRAM
COMMUNITY ALLIANCE WITH FAMILY FARMERS - PO BOX 363 - DAVIS, CA 95617	94-2914745	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

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FRIENDS OF THE WATSONVILLE PUBLIC LIBRARIES - 275 MAIN ST STE 100 - WATSONVILLE, CA 95076	23-7066840	501(C)(3)	15,157.	0.			GENERAL OPERATING SUPPORT
FOODWHAT 1156 HIGH STREET SANTA CRUZ, CA 95064	81-2590280	501(C)(3)	6,850.	0.			GENERAL OPERATING SUPPORT
GEORGIANA BRUCE KIRBY PREPARATORY SCHOOL - 425 ENCINAL ST - SANTA CRUZ, CA 95060		501(C)(3)	31,000.	0.			GENERAL OPERATING SUPPORT
GROWING UP WILD 2015 EUREKA CANYON RD. WATSONVILLE, CA 95076	85-0409005	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
CONFLICT RESOLUTION CENTER 1414 SOQUEL AVE STE 218 SANTA CRUZ, CA 95062	77-0557460	501(C)(3)	7,000.	0.			GENERAL OPERATING SUPPORT
HEALTH IMPROVEMENT PARTNERSHIP OF SANTA CRUZ COUNTY - 1800 GREEN HILLS RD STE 100 - SCOTTS VALLEY, CA 95066	01-0826156	501(C)(3)	25,000.	0.			INCREASE INFORMATIONAL SHARING AMONG COMMUNITY BASED CLINICS USING A WEB-BASED PLATFORM
GROUNDSWELL COASTAL ECOLOGY PO BOX 566 DAVENPORT, CA 95017	95-4116679	501(C)(3)	11,000.	0.			GENERAL OPERATING SUPPORT
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036	52-1481896	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
JUNIOR ACHIEVEMENT WORLDWIDE 745 ATLANTIC AVE BOSTON, MA 02111	27-3666259	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

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GATHERING PLACE 23300 COMMERCE PARK BEACHWOOD, OH 44122	34-1879035	501(C)(3)	5,000.	0.			THE ELLEN HEYMAN LEGACY FUND
KIDPOWER TEENPOWER FULLPOWER PO BOX 1212 SANTA CRUZ, CA 95061	77-0226712	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT AND MIGRANT EDUCATION TEACHERS TRAINING PROGRAM
MONARCH SERVICES 233 E LAKE AVE WATSONVILLE, CA 95076	94-2462783	501(C)(3)	11,515.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
LOS ANGELES COUNTY MUSEUM OF ART (LACMA) - 5908 WILSHIRE BLVD - LOS ANGELES, CA 90036	95-2264067	501(C)(3)	14,000.	0.			THE COLLECTORS COMMITTEE
MEDIATORS FOUNDATION 2525 ARAPAHOE AVENUE STE E-4 #509 BOULDER, CO 80302			10,000.	0.			SUPPORT ALL SIDES FOR SCHOOL
NUCLEAR THREAT INITIATIVE 1747 PENNSYLVANIA AVE 7TH FLOOR WASHINGTON, DC 20006	52-2289435	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT AND PERRY PROJECT
IMMIGRANT LEGAL SERVICES OF THE CENTRAL COAST - 15 E BEACH ST STE 202 - WATSONVILLE, CA 95076	61-1807874	501(C)(3)	8,500.	0.			OPERATING SUPPORT & CENTRAL COAST IMMIGRATION PROJECT
INSTITUTE FOR JUSTICE 901 N GLEBE RD #900 ARLINGTON, VA 22203	52-1744337	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
PAJARO VALLEY HIGH SCHOOL 500 HARKINS ST WATSONVILLE, CA 95076	77-0319247	501(C)(3)	8,000.	0.			HIGH SCHOOL BASKETBALL TEAM & GSA CLUB

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KALAMAZOO COLLEGE 1200 ACADEMY KALAMAZOO, MI 49006	38-1358014	501(C)(3)	35,000.	0.			OPERATING SUPPORT & THE ANNUAL K'83 FOREIGN STUDY FUND
SANTA CRUZ HILHEL 222 CARDIFF PLACE SANTA CRUZ, CA 95060		501(C)(3)	8,000.	0.			GENERAL OPERATING SUPPORT
SANTA CRUZ BREAKERS ACADEMY 1855 PLEASANT VALLEY RD APTOS, CA 95003	27-2050160	501(C)(3)	5,000.	0.			PROGRAM SUPPORT GENERAL OPERATING SUPPORT, NEW BUILDING FUND, BLACKIE'S SENIOR PROGRAM
SANTA CRUZ SPCA 2685 CHANTICLEER AVE SANTA CRUZ, CA 95065	94-6171565	501(C)(3)	7,276.	0.			GENERAL OPERATING SUPPORT AND SUPPORT SANTA CRUZ WORLD SURFING RESERVE
SAVE THE WAVES COALITION PO BOX 183 DAVENPORT, CA 95017	36-4515216	501(C)(3)	13,000.	0.			OPERATING SUPPORT
SEMPERVIRENS FUND 419 S SAN ANTONIO RD STE 211 LOS ALTOS HILLS, CA 94022	94-2155097	501(C)(3)	5,250.	0.			THE IMSS MOBILE CLINIC & FOR DRISCOLL'S GLOBAL CHARITABLE FUND
SILICON VALLEY COMMUNITY FOUNDATION - 2440 W EL CAMINO REAL STE 300 - MOUNTAIN VIEW, CA 94040	20-5205488	501(C)(3)	2,086,500.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
SPECIAL PARENTS INFORMATION NETWORK (SPIN) - PO BOX 183 - DAVENPORT, CA 95063	77-0508686	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
SENIOR NETWORK SERVICES 1777-A CAPITOLA RD SANTA CRUZ, CA 95062	94-2259716	501(C)(3)	45,000.	0.			GENERAL OPERATING SUPPORT

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ST. FRANCIS SOUP KITCHEN 205 MORA STREET SANTA CRUZ, CA 95060	94-2880883	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT AND ROOF REPLACEMENT
SUSTAINABLE CONSERVATION 98 BATTERY ST STE 302 SAN FRANCISCO, CA 94111	94-3232437	501(C)(3)	12,000.	0.			OPERATING SUPPORT
ST. ANTHONY FOUNDATION 150 GOLDEN GATE AVE SAN FRANCISCO, CA 94102-3899	94-1513140	501(C)(3)	26,661.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
TAHOE EXPEDITION ACADEMY INC 8651 SPECKLED AVENUE BOX 1272 KINGS BEACH, CA 96143	27-5379571	501(C)(3)	1,017,900.	0.			THE NEW MODULAR UNITS & SCHOLARSHIP SUPPORT
THE SAFINA CENTER AT STONY BROOK UNIVERSITY - 80 NORTH COUNTRY RD - SETAUKET, NY 11733	61-1406022	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETY 3055 PORTER GULCH ROAD APTOS, CA 95003	13-5644916	501(C)(3)	16,051.	0.			OPERATING SUPPORT
THE UC HASTINGS FOUNDATION UC HASTINGS FOUNDATION 200 MCALLISTER ST. - SAN FRANCISCO, CA 94102	23-7135898	501(C)(3)	31,994.	0.			JUDGE ROBERT H. SCHNACKE AWARD
THE VAIL JAZZ FOUNDATION PO BOX 3035 VAIL, CO 81658	84-1305072	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
UNCHAINED INC. PO BOX 441 SOQUEL, CA 95073	27-5502745	501(C)(3)	10,500.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF SAN BENITO COUNTY 829 SAN BENITO STREET SUITE 200 HOLLISTER, CA 95023	94-1422471		5,000.	0.			OPERATING SUPPORT
UPWELL TURTLES 99 PACIFIC STREET SUITE 375-E MONTEREY, CA 93940	82-1309235	501(C)(3)	40,000.	0.			OPERATING SUPPORT
VILLAGE SANTA CRUZ 1740 17TH AVE SANTA CRUZ, CA 95062	94-1702678	501(C)(3)	7,000.	0.			SUPPORT VILLAGE SANTA CRUZ'S MEMBERSHIP AND VOLUNTEER BASE
VISTA CENTER FOR THE BLIND AND VISUALLY IMPAIRED - 3315 MISION DR STE B - SANTA CRUZ, CA 95065	94-2694801	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT FOR THE SANTA CRUZ LOCATION
WALLIS ANNENBERG CENTER FOR THE PERFORMING ARTS - 9390 SANTA MONICA BLVD - BEVERLY HILLS, CA 90210	95-4467830	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT
WALNUT AVENUE FAMILY & WOMEN'S CENTER - 303 WALNUT AVE - SANTA CRUZ, CA 95060	94-1186197	501(C)(3)	29,750.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
JEWISH THEATRE COMPANY PO BOX 1080 SANTA CRUZ, CA 95061	22-3916870	501(C)(3)	9,000.	0.			OPERATING SUPPORT
LOS ANGELES BALLET 11755 EXPOSITION BLVD LOS ANGELES, CA 90064	20-1819852	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT
LOTUSLAND 695 ASHLEY RD SANTA BARBARA, CA 93108	23-7082550	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

COMMUNITY FOUNDATION SANTA CRUZ

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Schedule I (Form 990) **COUNTY** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MENTORS: DRIVING CHANGE FOR BOYS PO BOX 1585 FREEDOM, CA 95019	82-2506284	501(C)(3)	28,500.	0.			GENERAL OPERATING SUPPORT
MISSION HILL MIDDLE SCHOOL PTA 425 KING STREET SANTA CRUZ, CA 95060			22,000.	0.			SUPPORT THE PURCHASE OF COMPUTERS
MONTEREY BAY ECONOMIC PARTNERSHIP 3180 IMJIN ROAD SUITE 104B MARINA BAY, CA 93933	47-1379810	501(C)(3)	9,500.	0.			THE MONTEREY BAY INTERNSHIP PROGRAM
MCCALLUM THEATRE FOUNDATION 73000 FRED WARING DR PALM DESERT, CA 92260	33-0334165	501(C)(3)	15,000.	0.			SUPPORT EDUCATION AND OUTREACH PROGRAMS
MONTEREY BAY FISHERIES TRUST 256 FIGUEROA ST #1 MONTEREY, CA 93940	47-1978379	501(C)(3)	45,000.	0.			OPERATING SUPPORT
SANTA CRUZ COMMUNITY VENTURES 324 FRONT STREET SANTA CRUZ, CA 95060	77-0247648	501(C)(3)	135,500.	0.			GENERAL OPERATING SUPPORT
NATIVE ANIMAL RESCUE 1855 17TH AVE SANTA CRUZ, CA 95062		501(C)(3)	20,500.	0.			GENERAL OPERATING SUPPORT
NATIONAL CONFLICT RESOLUTION CENTER - 530 B STREET STE 1700 - SAN DIEGO, CA 92101	33-0433314	501(C)(3)	5,000.	0.			SOCIAL MEDIA CAMPAIGN & PEACEMAKER AWARDS
NEPONSET RIVER WATERSHED ASSOCIATION - 2173 WASHINGTON STREET - CANTON, MA 02021	23-7135204	501(C)(3)	5,000.	0.			GENERAL OPERATING SUPPORT

Schedule I (Form 990)

**COMMUNITY FOUNDATION SANTA CRUZ
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Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH VALLEY COMMUNITY FOUNDATION 240 MAIN STREET STE 260 CHICO, CA 95928	68-0161455	501(C)(3)	11,750.	0.			THE CAMP FIRE RECOVERY
OPERATION SAFE HOUSE 9685 HAYES ST RIVERSIDE, CA 92503	33-0326090	501(C)(3)	25,000.	0.			SUPPORT THE SAFE HOUSE OF THE DESERT
ORGANIC FARMING RESEARCH FOUNDATION - PO BOX 440 - SANTA CRUZ, CA 95061	77-0252545	501(C)(3)	11,805.	0.			THE ORGANIC FARMING RESEARCH FOUNDATION RESEARCH AND EDUCATION PROGRAM
NOURISHING GENERATIONS EDUCATIONAL PROJECT - PO BOX 95 - FELTON, CA 95018	27-5363508	501(C)(3)	11,000.	0.			PROGRAM SUPPORT
ONE STEP BEYOND 9299 W. OLIVE AVE STE 311 PEORIA, AZ 82345	86-1036448	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
PAJARO VALLEY UNIFIED SCHOOL DISTRICT - 294 GREEN VALLEY ROAD - WATSONVILLE, CA 95076		501(C)(3)	16,500.	0.			ROLLING HILLS MIDDLE, MAR VISTA ELEMENTARY & PROGRAM SUPPORT
OPPORTUNITY FUND COMMUNITY DEVELOPMENT - 111 W ST. JOHN ST STE 800 - SAN JOSE, CA 95113	31-1719434	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT
POSITIVE DISCIPLINE COMMUNITY RESOURCES - PO BOX 5365 - SANTA CRUZ, CA 96063	27-1364795	501(C)(3)	9,250.	0.			CONDUCT TWO POSITIVE DISCIPLINE TRAININGS
PROLITERACY WORLDWIDE 104 MARCELLUS ST SYRACUSE, NY 13204	16-6076384	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

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COMMUNITY FOUNDATION SANTA CRUZ

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Schedule I (Form 990) **Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
QUEER YOUTH TASK FORCE PO BOX 8280 C/O DIVERSITY CENTER SANTA CRUZ, CA 95061	77-0212967		11,936.	0.			PROGRAM SUPPORT & QUEER YOUTH LEADERSHIP AWARDS
RANCHO CIELO YOUTH CAMPUS PO BOX 6948 SALINAS, CA 93912		501(C)(3)	5,250.	0.			GENERAL OPERATING SUPPORT
RANCHO MIRAGE PUBLIC LIBRARY FOUNDATION - 71-100 HWY 111 - RANCHO MIRAGE, CA 92271		501(C)(3)	20,000.	0.			SUMMER PROGRAM SUPPORT
READ TO ME PROJECT PO BOX 6434 SALINAS, CA 93912	47-1224251	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT SANTA CRUZ - UC SANTA CRUZ OFFICE OF SPONSORED PROJECTS 1156 HIGH STREET - SANTA	94-1539563	501(C)(3)	154,256.	0.			UCSC EDUCATIONAL PARTNERSHIP CENTER AND EVERETT PROGRAM
REGENERATION/REGENERACION - PAJARO VALLEY CLIMATE ACTION - 114 LAPIS DRIVE - WATSONVILLE, CA 95067	46-1323531	501(C)(3)	5,250.	0.			PROGRAM SUPPORT
SANTA CLARA UNIVERSITY 500 EL CAMINO REAL SANTA CLARA, CA 95053	94-1156617		50,000.	0.			PROGRAM SUPPORT
REGENTS OF THE UNIVERSITY OF CALIFORNIA - DAVIS - 202 COUSTEAU PL STE 185 - DAVIS, CA 95618	94-6036494	501(C)(3)	5,000.	0.			GIVING TUESDAY MATCHING FUND
SANTA CRUZ COUNTY PARKS - OPEN SPACES AND CULTURAL SERVICES - 979 17TH AVE - SANTA CRUZ, CA 95062	94-6000534	501(C)(3)	12,989.	0.			GENERAL OPERATING SUPPORT, LABOR DAY FREE SWIM, PROGRAM SUPPORT

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**COMMUNITY FOUNDATION SANTA CRUZ
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGGIE STEPHENS FOUNDATION 640 14TH AVENUE SANTA CRUZ, CA 95062	82-3969806			5,000.	0.		OPERATING SUPPORT
SANTA CRUZ COUNTY ANIMAL SHELTER FOUNDATION - 2200 7TH AVE - SANTA CRUZ, CA 95060	51-0439604	501(C)(3)	44,100.	0.			OPERATING SUPPORT & PROGRAM SUPPORT
SANTA CRUZ COUNTY COLLEGE COMMITMENT - 400 ENCINAL STREET - SANTA CRUZ, CA 95060			275,000.	0.			PROGRAM SUPPORT
SANTA CRUZ TODDLER CARE CENTER 1738 16TH AVENUE SANTA CRUZ, CA 95062	94-2457539	501(C)(3)	11,000.	0.			GENERAL OPERATING SUPPORT
SENIORS COUNCIL 234 SANTA CRUZ AVE APTOS, CA 95003	94-2662950	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	10,000.	0.			SUPPORT FOR HURRICANE FLORENCE PROGRAMS
PROPUBLICA 155 AVENUE OF AMERICAS 13TH FLOOR NEW YORK, NY 10013	14-2007220	501(C)(3)	10,000.	0.			OPERATING SUPPORT
SANTA BARBARA EDUCATION FOUNDATION 1330 STATE ST STE 201 SANTA BARBARA, CA 93101	77-0071544	501(C)(3)	35,000.	0.			SUPPORT OF THE SANTA BARBARA UNIFIED SCHOOL DISTRICT THOMBONE COACH
SANTA CRUZ DERBY GIRLS PO BOX 2690 SANTA CRUZ, CA 95063	26-4574917	501(C)(3)	5,000.	0.			PROGRAM SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LIVING DESERT 47900 PORTOLA AVE PALM DESERT, CA 92260		501(C)(3)	15,000.	0.			EDUCATIONAL PURPOSES AND PROGRAM SUPPORT
WATSONVILLE LAW CENTER 315 MAIN STREET SUITE 207 WATSONVILLE, CA 95076	20-8157214	501(C)(3)	5,500.	0.			OPERATING SUPPORT
WATSONVILLE ROTARY FOUNDATION PO BOX 282 WATSONVILLE, CA 95077	94-2577900	501(C)(3)	6,500.	0.			PROGRAM SUPPORT AND DISASTER RELIEF
WILDAID INC. 333 PINE ST STE 300 SAN FRANCISCO, CA 94104	20-3644441	501(C)(3)	50,000.	0.			GENERAL OPERATING SUPPORT
WESPAK 13520 VENTURA BLVD SHERMAN OAKS, CA 91423	95-4785462	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
WOMEN FOR WOMEN INTERNATIONAL 2000 M ST SUITE 200 WASHINGTON, DC 20036	52-1838756	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
WHOLE KIDS FOUNDATION 550 BOWIE ST AUSTIN, TX 78703	45-1761682	501(C)(3)	10,000.	0.			SCHOOL FOOD SUPPORT INITIATIVE
DELTA SCHOOL 6500 SOQUEL DRIVE BLDG 1190 APTOS, CA 95003	77-0384662	501(C)(3)	12,000.	0.			OPERATING SUPPORT & FOR OSA CLUB
AZTECAS YOUTH SOCCER ACADEMY PO BOX 1028 WATSONVILLE, CA 95077	77-0269322		16,600.	0.			OPERATING SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY FOUNDATION OF GREATER PHOENIX - 12701 N SCOTTSDALE RD #202 - SCOTTSDALE, AZ 85254	47-0874376	501(C)(3)	5,000.	0.			OPERATING SUPPORT
HABITAT AND WATERSHED CARETAKERS (HAWC) - 320 CAVE GULCH - SANTA CRUZ, CA 95060	52-2381905		22,000.	0.			OPERATING SUPPORT
FRIENDS OF OLYMPIA STATION PO BOX 633 SANTA CRUZ, CA 95061	51-0187576	501(C)(3)	18,000.	0.			OPERATING SUPPORT
PACHAMAMA ALLIANCE PRESIDIO BLDG #1009 PO BOX 29191 SAN FRANCISCO, CA 94129	94-3249793	501(C)(3)	5,000.	0.			2017 SCHOLARSHIP RECIPIENT
CONSERVATION RESEARCH AND EDUCATION OPPORTUNITIES - 6044 1ST AVENUE NW - SEATTLE, WA 98107	20-3574087	501(C)(3)	100,000.	0.			SUPPORT PROJECT FUNDING
CROHN'S AND COLITIS FOUNDATION 733 THIRD AVE STE 510 NEW YORK, NY 10017	13-6193105	501(C)(3)	5,000.	0.			OPERATING SUPPORT & FOR QSA CLUB
CSUMB FOUNDATION UNIVERSITY DEVELOPMENT 100 CAMPUS CENTER-AVC BLDG. 97 - SEASIDE, CA 93955	80-0494808	501(C)(3)	200,000.	0.			FUTURE TEACHER MENTORSHIP, BRUCE W. WOOLPERT ENDOWED SCHOLARSHIP & MARINE
BIG TIMBER FIRE DEPARTMENT PO BOX 264 BIG TIMBER, MT 59011	81-0450348		5,000.	0.			OPERATING SUPPORT
CALIFORNIA ALLIANCE OF CAREGIVERS INC. - PO BOX 576 - SACRAMENTO, CA 95812	81-2865148		5,000.	0.			ESTABLISH A LEARNING COMMUNITY TO RECEIVE SUPPORT AND MENTORING

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Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CUPERTINO ROTAR ENDOWMENT FOUNDATION - PO BOX 1101 - CUPERTINO, CA 95015	77-0288042	501(C)(3)	5,000.	0.			OPERATING SUPPORT
EL PAJARO COMMUNITY DEVELOPMENT CORPORATION - 23 EAST BEACH ST STE 209 - WATSONVILLE, CA 95076	94-2656048	501(C)(3)	49,000.	0.			OPERATING SUPPORT
ENLOE MEDICAL CENTER FOUNDATION 249 W 6TH AVENUE CHICO, CA 95926	94-2985552	501(C)(3)	10,000.	0.			THE CAMP FIRE RELIEF FUND
EPISCOPAL DIOCESE OF EL CAMINO REAL - PO BOX 689 - SALINAS, CA 93902	94-2673950		10,000.	0.			OPERATING SUPPORT
FRIENDS OF THE RAIL & TRAIL 877 CEDAR ST STE 240 SANTA CRUZ, CA 95060	31-1748056	501(C)(3)	16,000.	0.			OPERATING SUPPORT
JUNIOR LEAGUE OF PALO ALTO MID PENINSULA - 555 RAVENSWOOD AVE - MENLO PARK, CA 94025	94-1603047	501(C)(3)	10,000.	0.			THE ENDOWMENT FUND
PAJARO VALLEY PREVENTION AND STUDENT ASSISTANCE - 335 EAST LAKE AVENUE - WATSONVILLE, CA 95076	77-0269322	501(C)(3)	101,881.	0.			OPERATING SUPPORT
PARTNERSHIP FOR CHILDREN 342 PAJARO ST STE B SALINAS, CA 93901	02-0646450	501(C)(3)	15,300.	0.			OPERATING SUPPORT
SALUD Y CARINO 1723 GREY SEAL RD SANTA CRUZ, CA 95062	46-1924115	501(C)(3)	5,000.	0.			PROGRAM SUPPORT

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA CRUZ PLAYGROUND PROJECT PO BOX 3709 SANTA CRUZ, CA 95063	95-4760497		78,600.	0.			SUPPORT LEO'S HAVEN ALL INCLUSIVE PARK
SANTA CRUZ SAILING FOUNDATION 244 4TH AVENUE SANTA CRUZ, CA 95062	77-0435662	501(C)(3)	7,490.	0.			PROGRAM SUPPORT
STANFORD UNIVERSITY SCHOOL OF ENGINEERING - DEVELOPMENT SERVICES PO BOX 20466 - STANFORD, CA 94309	94-1156365	501(C)(3)	20,000.	0.			THE DEAN OF ENGINEERING DISCRETION FUND
STANFORD UNIVERSITY SCHOOL OF MEDICINE - DEVELOPMENT SERVICES PO BOX 20466 - STANFORD, CA 94309	94-1156365	501(C)(3)	300,000.	0.			THE CROCKER STEM CELL FUND & CROCKER JOINT REPLACEMENT FUND
TRUCKEE TRAILS FOUNDATION PO BOX 1751 TRUCKEE, CA 96106	01-0601303	501(C)(3)	25,000.	0.			A CREW VEHICLE AND EQUIPMENT
UC REGENTS-UCSC ARBORETUM 1156 HIGH ST MAIL STOP - ARBORETUM SANTA CRUZ, CA 95064			56,648.	0.			OPERATING SUPPORT
VALLEY CHURCHES UNITED MISSIONS 9400 HIGHWAY 9 PO BOX 367 BEN LOMOND, CA 95005	77-0163322	501(C)(3)	15,250.	0.			OPERATING SUPPORT
VENTANA WILDERNESS ALLIANCE PO BOX 506 SANTA CRUZ, CA 95061	77-0532467	501(C)(3)	6,990.	0.			OPERATING SUPPORT & PROGRAM SUPPORT
WARMING CENTER PROGRAM PO BOX 462 SANTA CRUZ, CA 95061	82-2706806	501(C)(3)	9,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

94-2808039

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Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE FOUNDATION CONDUCTS A THOROUGH DUE DILIGENCE PROCESS IN REVIEWING AND MONITORING ALL GRANTS APPROVED AND AWARDED BY THE FOUNDATION'S BOARD OF DIRECTORS. STAFF REVIEWS ALL REQUESTS TO FIRST ENSURE THE APPLICANT ORGANIZATION IS ELIGIBLE TO RECEIVE A GRANT FROM THE FOUNDATION UNDER THE IRS GUIDELINES FOR CHARITIES AND NONPROFITS. DURING THIS INITIAL SCREENING, THE APPLICANT'S FINANCIAL INFORMATION, GOVERNANCE AND PROGRAMS ARE REVIEWED, AND A DETERMINATION IS MADE IF THE PROPOSAL IS CONSISTENT WITH THE FOUNDATION'S INTEREST AREAS AND STRATEGIC PRIORITIES. A BOARD-APPOINTED

Part IV Supplemental Information

PROGRAM COMMITTEE, COMPOSED OF BOARD MEMBERS AND OTHER COMMUNITY VOLUNTEERS, REVIEWS ELIGIBLE REQUESTS AND RECOMMENDS AWARDS BASED ON AVAILABLE FUNDS AFTER SELECTED IN-PERSON SITE VISITS AND A MORE THOROUGH REVIEW OF EACH ORGANIZATION'S ELIGIBILITY AND PROPOSED USE OF FUNDS. THESE GRANT RECOMMENDATIONS ARE THEN REVIEWED AND VOTED ON BY THE FULL BOARD. GRANTS RECOMMENDED BY DONOR-ADVISORS FROM THEIR FUNDS HELD AT THE FOUNDATION SIMILARLY RECEIVE THE SAME DUE DILIGENCE IN THE INITIAL SCREENING, BUT DO NOT GO TO THE PROGRAM COMMITTEE FOR REVIEW. THEY ARE, HOWEVER, REVIEWED AND APPROVED BY THE BOARD. IN MONITORING THE USE OF GRANT FUNDS, THE FOUNDATION REQUIRES PERIODIC WRITTEN OR ORAL REPORTS AND/OR A FINAL REPORT (INCLUDING A FINANCIAL ACCOUNTING OF HOW THE GRANT WAS SPENT) FROM ALL GRANTEES, WITH THE EXCEPTION OF DONOR ADVISED GRANTS UNLESS SPECIFICALLY REQUESTED BY THE DONOR. FOUNDATION STAFF ALSO MAINTAINS REGULAR COMMUNICATION WITH GRANT RECIPIENTS, WHO ARE ENCOURAGED TO ALERT THE FOUNDATION ABOUT ANY SIGNIFICANT CHANGES OR ISSUES DURING THE GRANT PERIOD.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

AMERICAN RED CROSS OF THE CENTRAL COAST

(H) PURPOSE OF GRANT OR ASSISTANCE: OASIS LAS AVES AFTERSCHOOL PROGRAM FOR RENOVATION OF THE AFTERSCHOOL FACILITIES IN LAS AVES

NAME OF ORGANIZATION OR GOVERNMENT: CABRILLO COLLEGE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: WOMEN'S EDUCATION SUCCESS, STROKE CENTER, CAP, GUIDED PATHWAYS PROJECT & PRESIDENT'S CIRCLE

NAME OF ORGANIZATION OR GOVERNMENT: OVEREATERS ANONYMOUS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: OPERATING SUPPORT, TRANSLATIONS FUN
DELEGATE SUPPORT FUND AND PROFESSIONAL EXHIBITS FUND

NAME OF ORGANIZATION OR GOVERNMENT:

TEMPLE BETH EL JEWISH COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL OPERATING SUPPORT, SUPPORT
FOR FESTIVALS AND ROSE LEVINE YOUTH CAMPERSHIP RESERVED FUND

NAME OF ORGANIZATION OR GOVERNMENT: AGRI-CULTURE

(H) PURPOSE OF GRANT OR ASSISTANCE: FARMWORKER HOUSING PROJECT,
MAINTENANCE OF EQUIPMENT, AGRICULTURAL EDUCATION & OPERATING SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: GROWING UP WILD

(H) PURPOSE OF GRANT OR ASSISTANCE: ORGANIZATIONAL INFRASTRUCTURE
NECESSARY TO PROVIDE YEAR-ROUND ENVIRONMENTAL EDUCATION FOR YOUTH

NAME OF ORGANIZATION OR GOVERNMENT: CSUMB FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FUTURE TEACHER MENTORSHIP, BRUCE W.
WOOLPERT ENDOWED SCHOLARSHIP & MARINE PROGRAMS

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number

94-2808039

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2018

Part II	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.
----------------	---

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number
94-2808039

Part I Bond Issues SEE PART VI FOR COLUMN (A) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Released		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
CALIFORNIA STATEWIDE A COMMUNITIES DEVELOPMENT	68-0164610	NONE	01/01/11	2,500,000.			X		X		X
B											
C											
D											

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		1,520,000.						
2 Amount of bonds legally released								
3 Total proceeds of issue		2,500,000.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion								
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2018

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Page 2

94-2808039

Schedule K (Form 990) 2018

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						

832122 11-01-18

Schedule K (Form 990) 2018

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ**
COUNTY

Employer identification number
94-2808039

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	67	2,951,029	ACTIVE MARKET PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2018

COMMUNITY FOUNDATION SANTA CRUZ

Schedule M (Form 990) 2018

COUNTY

94-2808039

Page 2

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number
94-2808039

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CREATED BY AREA RESIDENTS AS A PERMANENT, LOCAL RESOURCE FOR CHARITABLE
GIVING. THE MISSION IS TO PROMOTE PHILANTHROPY TO MAKE SANTA CRUZ
COUNTY A BETTER PLACE TO LIVE, NOW AND IN THE FUTURE.

TO FULFILL ITS MISSION, THE FOUNDATION:

*BUILDS PERMANENTLY ENDOWED FUNDS CONTRIBUTED BY MANY INDIVIDUALS AND
INSTITUTIONS;

*ENGAGES DONORS AND PROFESSIONAL ADVISORS IN CHARITABLE GIVING;

*PROVIDES GRANTS AND ASSISTANCE TO DEVELOP AND STRENGTHEN COMMUNITY
ORGANIZATIONS;

*ENCOURAGES PARTNERSHIPS WITH FOUNDATIONS, BUSINESSES, AND GOVERNMENT
TO INCREASE FUNDS DISTRIBUTED TO THE COMMUNITY; AND

*INSPIRES PHILANTHROPY AND COMMUNITY INVOLVEMENT

FORM 990, PART VI, SECTION B, LINE 11B:

STAFF IS RESPONSIBLE FOR COMPLETING AND FILING THE FORM 990, WHICH IS
REVIEWED BY MANAGEMENT STAFF AND THE CEO. PRIOR TO ITS FILING, A DRAFT IS
E-MAILED TO ALL BOARD MEMBERS. THEIR COMMENTS, QUESTIONS AND CONCERNS ARE
SOLICITED AND CONSIDERED PRIOR TO BEING COMPLETED AND SUBMITTED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION IS COMMITTED TO THE HIGHEST ETHICAL STANDARDS IN ALL
POLICIES, PROCEDURES, AND PROGRAMS. THE ABILITY OF THE FOUNDATION TO CARRY
OUT ITS MISSION IS ENHANCED BY THE INVOLVEMENT OF THE BOARD OF DIRECTORS,
VOLUNTEER COMMITTEE MEMBERS, AND STAFF IN THE PHILANTHROPIC LIFE AND

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

ECONOMIC AFFAIRS OF SANTA CRUZ COUNTY.

GIVEN THE FOUNDATION SERVES THE ENTIRE COUNTY, IT IS TO BE EXPECTED THAT FROM TIME TO TIME BOARD MEMBERS, VOLUNTEER COMMUNITY MEMBERS OR STAFF MAY ALSO HAVE RELATIONS WITH EXISTING OR PROPOSED RECIPIENTS OF GRANTS, VENDORS OR SERVICE PROVIDERS. TO FOSTER PUBLIC CONFIDENCE IN ITS INTEGRITY AND TO REFLECT THE FOUNDATION'S INTENTION TO MAINTAIN THE HIGHEST ETHICAL STANDARDS BY AVOIDING ANY REAL OR PERCEIVED CONFLICTS OF INTEREST, THE BOARD OF DIRECTORS HAS ADOPTED A CONFLICT OF INTEREST POLICY. THIS POLICY IS AVAILABLE FOR PUBLIC REVIEW UPON REQUEST. A SUMMARY OF KEY ELEMENTS INCLUDE:

ALL BOARD MEMBER, VOLUNTEER COMMITTEE MEMBERS, AND STAFF ARE ANNUALLY REQUIRED TO PROVIDE A LIST OF NONPROFIT AND PROFESSIONAL PHILANTHROPIC ORGANIZATIONS WITH WHICH THEY HAVE RELATIONSHIPS, AS WELL AS ANY RELATIONSHIPS OF IMMEDIATE FAMILY MEMBERS. THEY MUST DISCLOSE ANY MATERIAL OWNERSHIP OR INVESTMENT INTEREST WITH ANY ENTITY THAT HAS NEGOTIATED A TRANSACTION WITH THE FOUNDATION WITHIN THE PAST YEAR OR OF ANY TRANSACTIONS KNOWN TO BE CURRENTLY PENDING OR PROPOSED. THIS INFORMATION IS COLLECTED BY THE CEO AND REPORTED BACK TO THE BOARD.

IN ALL SITUATIONS IN WHICH THERE IS A REAL OR PERCEIVED CONFLICT OF INTEREST, THOSE INDIVIDUALS MUST RECUSE THEMSELVES FROM DISCUSSION AND DECISION MAKING THAT INVOLVES THE PARTIES IN QUESTION. THIS INCLUDES THE REVIEW, DISCUSSION OR DECISION OF ANY AND ALL GRANT PROPOSALS AS WELL AS THE SELECTION OR CONTRACTING OF VENDORS OR SERVICE PROVIDERS. TO MONITOR THE NEED TO DO SO, A SCHEDULE OF BOARD MEMBER CONFLICTS IS INCLUDED IN EVERY BOARD PACKET FOR REFERENCE.

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

EXAMPLES OF POTENTIAL CONFLICTS IN REGARDS TO THE FOUNDATION'S GRANTMAKING INCLUDE, BUT ARE NOT LIMITED TO, SERVING AS A BOARD MEMBER, EMPLOYEE, OR CONSULTANT TO A CURRENT OR POTENTIAL GRANTEE; DOING BUSINESS WITH A CURRENT OR POTENTIAL GRANTEE; OR HAVING IMMEDIATE FAMILY MEMBERS SERVING AS A BOARD MEMBER OF APPLICANT ORGANIZATIONS. ANYONE WITH SUCH CONFLICTS MUST RECUSE THEMSELVES FROM ANY DISCUSSION OR DECISION INVOLVING THOSE PARTIES.

IF IT IS UNCLEAR WHETHER A CONFLICT OF INTEREST EXISTS, THE CEO WILL MAKE THAT DETERMINATION IN REGARDS TO STAFF AND THE BOARD PRESIDENT IN REGARDS TO THE CEO. FOR BOARD MEMBER OR COMMITTEE MEMBER, THE BOARD PRESIDENT OR COMMITTEE CHAIR SHALL MAKE THAT DETERMINATION. WHEN A CONFLICT EXISTS THE COMMITTEE MEMBER SHALL EXCUSE THEMSELVES FROM THE MEETING WHILE THE IMPLICATIONS OF THE AFFILIATION ARE CONSIDERED.

FOR ALL MATTERS BEFORE THE BOARD WHERE A REAL OR PERCEIVED CONFLICT OF INTEREST EXISTS, THE STEPS TAKEN UNDER THE FOUNDATION'S CONFLICT OF INTEREST POLICY SHALL BE NOTED AND RECORDED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15:

THE FOUNDATION IS COMMITTED TO ATTRACTING AND RETAINING A QUALIFIED, DIVERSE WORKFORCE THROUGH A COMPETITIVE COMPENSATION PROGRAM WITHIN THE FOUNDATION'S LABOR MARKET. THE FOUNDATION PROVIDES A NON-DISCRIMINATORY MERIT-BASED COMPENSATION PROGRAM THAT IS CAREFUL TO BALANCE THESE OBJECTIVES WITH PRUDENT USE OF THE FINANCIAL RESOURCES WHICH HAVE BEEN ENTRUSTED TO THE FOUNDATION BY ITS DONORS. TO GUIDE THIS PROCESS, THE FOUNDATION HAS ADOPTED A COMPENSATION POLICY THAT ALSO ADDRESSES THE ANNUAL EVALUATION PROCESS FOR STAFF.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
NLMJ BORINA LAND LLC - 46-3734949 7807 SOQUEL DRIVE APTOS, CA 95003	HOLDING TITLE TO AGRICULTURAL LAND; LEASING AGRICULTURAL LAND	CALIFORNIA	150,600.	2,787,500.	COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
REGIONAL WATER MANAGEMENT FOUNDATION - 38-3763365, 7807 SOQUEL DRIVE, APTOS, CA 95003	MANAGE THE INTEGRATED REGIONAL WATER MGMT PROGRAM-SANTA CRUZ COUNTY	CALIFORNIA	501(C)(3)	170(B)(1)(A)	COMMUNITY FOUNDATION SANTA CRUZ COUNTY		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2018

Part III

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

Schedule R (Form 990) 2018

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

THE FOUNDATION CONSIDERS BEST PRACTICES AS WELL AS THE FOLLOWING IN SETTING COMPENSATION FOR ITS KEY EMPLOYEES: INTERNAL EQUITY, WHICH STRIVES TO PROVIDE EQUIVALENT COMPENSATION FOR POSITIONS OF COMPARABLE SCOPE AND RESPONSIBILITY WITHIN THE FOUNDATION; AND EXTERNAL EQUITY, INCLUDING AN ANNUAL MARKET ANALYSIS OF COMPARABLE POSITIONS IN THE COMMUNITY FOUNDATION INDUSTRY, MARKET TRENDS AND EVALUATION OF SALARY SURVEYS. ATTENTION IS ALSO GIVEN TO THE CONSUMER PRICE INDEX, BUDGETARY RESTRICTIONS AND FINANCIAL STATUS OF THE FOUNDATION.

EMPLOYEES RECEIVE AN ANNUAL SALARY REVIEW BY THEIR SUPERVISORS (OR BY THE BOARD IN THE CASE OF THE CEO) AS PART OF THE PERFORMANCE RECOGNITION PLAN ANNUAL ASSESSMENT. THESE REVIEWS MAY OR MAY NOT RESULT IN A SALARY INCREASE. SALARY INCREASES ARE PROVIDED ON THE BASIS OF MERIT, SUBJECT TO BUDGETARY RESTRICTIONS AND AT THE SOLE DISCRETION OF THE FOUNDATION. ALSO, AT THE FOUNDATION'S SOLE DISCRETION, A LUMP-SUM MERIT AWARD MAY BE GRANTED TO AN EMPLOYEE WHO HAS REMAINED IN THEIR POSITION FOR MANY YEARS, IN LIEU OF AN INCREASE IN SALARY.

FOR THE CEO, AN ANNUAL PERFORMANCE EVALUATION IS ONE OF THE MAJOR RESPONSIBILITIES OF THE BOARD OF DIRECTORS. THE BOARD HAS ADOPTED EVALUATION PROCEDURES ESTABLISHED BY THE COUNCIL ON FOUNDATIONS AS PART OF ITS COMMUNITY FOUNDATIONS NATIONAL STANDARDS THAT PROVIDES FOR A CONSISTENT, FAIR, SUPPORTIVE AND WELL-DOCUMENTED PROCESS. SPECIFIC STEPS IN THE CEO EVALUATION PROCESS INCLUDE A REVIEW AND DISCUSSION OF A SELF-PERFORMANCE EVALUATION AND DEVELOPMENT PLAN WITH PRIOR YEAR'S GOALS AND OBJECTIVES; AN EXECUTIVE SESSION OF THE BOARD TO DISCUSS ANY ISSUES OR CONCERNS AND TO SET NEW GOALS AND OBJECTIVES FOR THE FOLLOWING YEAR; A BOARD SESSION WITH THE CEO PRESENT FOR AN OVERALL

Name of the organization **COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

Employer identification number
94-2808039

ASSESSMENT AND GOAL SETTING, AS WELL AS DISCUSSION OF SALARY COMPENSATION
BASED ON A REVIEW OF COMPARABLE SALARIES FOR OTHER COMMUNITY FOUNDATIONS OF
OUR SIZE; AND, FINALLY, A SUMMARY OF THE ASSESSMENT, PLAN AND ANY SALARY
INCREASE TO BE SIGNED BY BOTH THE CEO AND BOARD PRESIDENT.

THE FOUNDATION USES THIS EVALUATION TOOL AS A WAY TO ENHANCE THE
COMMUNICATION BETWEEN THE BOARD AND THE CEO, MEASURES SPECIFIC, ANNUAL
OBJECTIVES, GAUGE JOB PERFORMANCE AND LEADERSHIP AND SERVES AS A BASIS FOR
SALARY COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION AS PART OF ITS DUE DILIGENCE, COMMITMENT TO TRANSPARENCY AND
IN KEEPING WITH THE COUNCIL ON FOUNDATION'S COMMUNITY FOUNDATIONS NATIONAL
STANDARDS MAKES AVAILABLE FOR PUBLIC INSPECTION AT ITS OFFICE ITS GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS. FINANCIAL
STATEMENTS ARE ALSO AVAILABLE 24/7 ON THE FOUNDATION'S WEB SITE
(WWW.CFSCC.ORG). IN ADDITION, THE FOUNDATION'S ANNUAL FINANCIAL STATEMENTS
ARE PUBLISHED IN ITS ANNUAL REPORT.

FORM 990, PART XI, LINE 2C:

THE FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNTANT AND THIS PROCESS HAS REMAINED CONSISTENT WITH
PRIOR YEAR.

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY**

94-2808039 Page 3

Schedule R (Form 990) 2018

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	REGIONAL WATER MANAGEMENT FOUNDATION	C	422,517.	AMT PAID OR REIMBURSED DIRECTLY
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII	Supplemental Information.
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Provide additional information for responses to questions on Schedule R. See instructions.

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

990

OMB No. 1545-0172

2018Attachment
Sequence No. 179Department of the Treasury
Internal Revenue Service (99)▶ Attach to your tax return.
▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**COMMUNITY FOUNDATION SANTA CRUZ
COUNTY****FORM 990 PAGE 10****94-2808039****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,000,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,500,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	262,516.

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	4,241.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	266,757.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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Part V **Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use

25

26 Property used more than 50% in a qualified business use:

		%						
		%						
		%						

27 Property used 50% or less in a qualified business use:

		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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42 Amortization of costs that begins during your 2018 tax year:

43 Amortization of costs that began before your 2018 tax year

43

13,174.

44 Total. Add amounts in column (f). See the instructions for where to report

44

13,174.

