Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

and ending

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning

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

B (Check if applicable Address change	COMMUNITY FOUNDATION SANTA CRUZ		D Employer identific	cation number					
	Name change			94-28080	39					
H	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe						
	Final return/	7807 SOQUEL DRIVE		831-662-						
	termin ated			G Gross receipts \$	50,381,031.					
	Amend			H(a) Is this a group re	eturn					
	Applic tion	F Name and address of principal officer: SABINE DUKES		for subordinates? Yes X No						
	pending SAME AS C ABOVE H(b) Are all subordinates included? Yes									
<u> 1]</u>	Гах-ехе	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) $4947(a)(1)$	or 527	If "No," attach a	list. See instructions					
	Nebsit			H(c) Group exemptio						
		organization: X Corporation Trust Association Other	L Year	of formation: 1982 N	State of legal domicile: CA					
Pa	art I	Summary								
Governance	1	Briefly describe the organization's mission or most significant activities: ${ m TO}$ ${ m P}$ ${ m SANTA}$ CRUZ COUNTY A BETTER PLACE TO LIVE,								
rna	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	sets.					
Se.	3	Number of voting members of the governing body (Part VI, line 1a)		3	16					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			16					
es &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			24					
Ϋ́Ε̈́		Total number of volunteers (estimate if necessary)			0					
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.					
				Prior Year	Current Year					
Revenue	l	Contributions and grants (Part VIII, line 1h)		37,442,344.	45,052,678.					
	1	Program service revenue (Part VIII, line 2g)		293,585.	290,996.					
Вè.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,531,136. 125,923.	5,363,749. -326,392.					
	I	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		40,392,988.	50,381,031.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		33,082,165.	24,869,923.					
	I			0.	0.					
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,560,368.	2,748,534.						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
ben	b	Total fundraising expenses (Part IX, column (D), line 25) 318, 9	56.	•						
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		973,945.	1,015,331.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		36,616,478.	28,633,788.					
	19	Revenue less expenses. Subtract line 18 from line 12		3,776,510.	21,747,243.					
Jo s			Ве	ginning of Current Year	End of Year					
Net Assets or	20	Total assets (Part X, line 16)	1	.85,548,177.	223,502,260.					
t Ass	21	Total liabilities (Part X, line 26)		23,820,837.	25,714,972.					
홢	22	Net assets or fund balances. Subtract line 21 from line 20	1	61,727,340.	197,787,288.					
	art II	Signature Block								
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules		· · ·	knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nicn preparer	Nov 12,	2024					
O:	_	Signature of officer		Date	2024					
Sig		SABINE DUKES, CHIEF FINANCE & OPERATING C	\₽₽T^₽₽							
Her	е	Type or print name and title	/I I I CEI	`						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN					
Paic	ı	KEVIN T. WILSON	v 12 2024 if L	if P01313212						
	oarer	Firm's name NOVOGRADAC & COMPANY LLP	1	, John omploy	4-3108253					
	Only	Firm's address 2033 N. MAIN STREET, SUITE 400								
•	•	WALNUT CREEK, CA 94596		Phone no. 92	5-949-4300					
Ma\	/ the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No					
	_				- 000					

Pai	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission:	T O
	TO PROMOTE PHILANTHROPY TO MAKE SANTA CRUZ COUNTY A BETTER PLACE	TO
	LIVE, NOW AND IN THE FUTURE.	
	WE BRING TOGETHER PEOPLE, IDEAS, AND RESOURCES TO INSPIRE PHILAN	THROPY
	AND ACCOMPLISH GREAT THINGS.	
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 X 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 X 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 ex	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organizations are required to report the amount of grants and allocations to other section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organization 501(c)(4	enses, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$27,683,000 . including grants of \$24,869,923 .) (Revenue \$\$	385,440.)
4a	(Code:)(Expenses \$27,683,000. including grants of \$24,869,923.) (Revenue \$	
	GRANTS TO TAX-EXEMPT 501(C)(3) NONPROFIT ORGANIZATIONS, CHARITAB	
	ORGANIZATIONS AND PUBLIC SECTOR SERVICE AGENCIES IN SANTA CRUZ C	
	AND BEYOND IN SIX BROAD FIELDS OF INTEREST DESIGNATED BY OUR BOA	
	DIRECTORS AS CORE TO OUR MISSION. THESE ARE: ARTS, HISTORY AND C	
	COMMUNITY DEVELOPMENT; EDUCATION/YOUTH SERVICES; ENVIRONMENT; HE	
	AND; HUMAN SERVICES.	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$)
	-	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 27,683,000.	
		Form 990 (2023)

Form 990 (2023) COUNTY Part IV Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		37	
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		_V
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
^	Schedule D, Part III	8		
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?	9	х	
10	If "Yes," complete Schedule D, Part IV	-	25	
10		10	х	
11	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	-
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , , , , , , , , , , , , , , , , ,	14a		-
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Too, complete conceases	20a		X
b	, , , , , , , , , , , , , , , , , , , ,	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		٦,	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	X	

Form 990 (2023) COUNTY
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? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete		77	
	Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	Zoa		12
b	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? If "Yes," complete			
	, , ,	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		-	
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	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)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		_₩
27	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
38	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		
55	Note: All Farms 000 files are required to consolide Colored to O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	- 55		
	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			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
		Га	aan	(2022)

O23) COUNTY
Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2023) **Part V** Sta

			Yes	No					
2 a	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 24		77						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	37					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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			x					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a							
D	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).								
50		Eo.		Х					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30							
ua		6a		х					
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa							
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	OD.							
	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		Х					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
Ī	to file Form 8282?	7с		x					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	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	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
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		Х					
9	Sponsoring organizations maintaining donor advised funds.								
a Did the sponsoring organization make any taxable distributions under section 4966?									
b	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?								
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the								
b	organization is licensed to issue qualified health plans								
_	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.	.5							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

Page 6

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 on Schedule O. See instructions.

X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 16 **1a** Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. 16 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed CA 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. X Own website X Upon request Another's website ___ Other (explain on Schedule O) Describe on 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. State the name, address, and telephone number of the person who possesses the organization's books and records SABINE DUKES - 831-662-2020 7807 SOQUEL DRIVE, APTOS, CA 95003

Form 990 (2023) 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do		Pos		l than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week	-	cer an	la a a	Irecto	r/trus	tee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)	1000 NEO)	and related
	below	idual	ution	<u>~</u>	Key employee	st co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Key 6	High empl	Former			
(1) SUSAN TRUE	40.00									
CEO				Х				271,176.	0.	28,635.
(2) SABINE DUKES	40.00									
CHIEF OPERATING & FINANCIAL OFFICER/	1.00			Х				214,366.	0.	31,840.
(3) TIM CARSON	1.00								_	
PROGRAM DIRECTOR - RWMF	1.00					X		156,464.	0.	25,535.
(4) ROBERT SWARTZ	1.00							455 466		
EMPLOYEE	1 00					Х		157,166.	0.	7,530.
(5) ALEXANDRA URBICK	1.00	-				l		1.45 505		10 004
CONTROLLER	1 00					Х		145,787.	0.	12,234.
(6) JULIE HAFF	1.00								•	•
PRESIDENT	1 00	Х		Х				0.	0.	0.
(7) TREVOR STRUDLEY	1.00	3,7		,,					0	0
VICE PRESIDENT	1 00	Х		Х				0.	0.	0.
(8) JIM WEISENSTEIN	1.00	. ,		7,7					0	0
TREASURER	1 00	Х		Х				0.	0.	0.
(9) CHRIS MURPHY SECRETARY	1.00	Х						0.	0.	0
(10) GINA CASTANEDA	1.00	Δ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(11) DAVID DOOLIN	1.00	Δ						0.	0.	<u> </u>
BOARD MEMBER	1.00	Х						0.	0.	0.
(12) MARIA ELENA DE LA GARZA	1.00	72						0.	0.	<u></u>
BOARD MEMBER	1.00	х						0.	0.	0.
(13) LILIANA 'LILI' DIAZ	1.00							•	•	
BOARD MEMBER	1.00	х						0.	0.	0.
(14) LAWRENCE 'LARRY' DONATONI	1.00	T-								
BOARD MEMBER		х						0.	0.	0.
(15) DOUG FISCHER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) ROGELIO PONCE	1.00								-	
BOARD MEMBER		Х						0.	0.	0.
(17) KIRK SCHMIDT	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
										Form 990 (2022)

Form 990 (2023) COUNTY									94-2	8080	039	Pa	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) (E) Reportable Reportable compensation from from related			(F) Estimated amount of other		of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	SC/	fr org an	pensa rom the anizati d relate anizatio	e ion ed
(18) SANDY SKEES	1.00												
BOARD MEMBER	0.00	Х				_		0.		0.			0.
(19) SIERRA RYAN	0.00							_		0.			0
BOARD MEMBER (20) LISA LURIE	1.00	Х						0.		<u> </u>			0.
SECRETARY	1.00	Х						0.		0.			0.
(21) JAMES C. THOMPSON	0.00												
BOARD MEMBER	1.00	Х						0.		0.			0.
(22) KEVIN HEUER	0.00												_
BOARD MEMBER	1.00	Х						0.		0.			0.
(23) HEIDI LUCKENBACH BOARD MEMBER	1.00	х						0.		0.			0
(24) ROB ALLEN	1.00	Λ						0.		- ' 			0.
BOARD MEMBER	1.00	Х						0.		0.			0.
(25) AUDRIES BLAKE	1.00												
BOARD MEMBER		х						0.		0.			0.
(26) LISA FRASER	1.00												
BOARD MEMBER		Х						0.		0.			0.
1b Subtotal								944,959.		0.	10	5,7	
c Total from continuation sheets to Part VI								0.		0.	1.0		<u>0.</u>
d Total (add lines 1b and 1c)								944,959.		0.	10	5,7	/4.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	€			5
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	еу е	empl	oye	e, or	hig	hest compensated emp	loyee on	ſ			
line 1a? If "Yes," complete Schedule J for s										[3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	dule	J f	for such individual			4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ıch ı	oers	on .					5		X
Section B. Independent Contractors	mnonootod inc	lono	- d o :	ot o.	+			and reasily and make then	100,000 of com		ion fr		
1 Complete this table for your five highest co the organization. Report compensation for	•	-								Jensat	IOH TY	וווע	
(A)	ano odioridai ye	Jai C	. IGII	. <u>g w</u>		, VVI		(B)	Jan .		((C)	
Name and business	address	NC	ONE	3_				Description of s	ervices	C	-	nsatior	n

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

\$100,000 of compensation from the organization

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COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Form 990 (2023)
Part VIII

Statement of Revenue

		Check if Schedule O	contain	s a response	e or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	1	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
(0, (0	1.0	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts				···					
ij g									
fts,		Fundraising events		1					
ij gi		-	:14:						
ns, Sim		Government grants (contr							
atio er 9	Ť	All other contributions, gifts,	-		45 050 670				
듗뙲		similar amounts not included			45,052,678.				
ont od (_	Noncash contributions included in	lines 1a-1	ıf 1g \$	10,969,823.	45 050 650			
<u>0</u> <u>6</u>	h	Total. Add lines 1a-1f			T	45,052,678.			
					Business Code				
Se	2 a				541900	236,085.	· · · · · · · · · · · · · · · · · · ·		
ē Ķ	b	INTEREST INCOME - PI	RI		900099	54,911.	54,911.		
Se	С								
eve	d								
Program Service Revenue	е								
4	f	All other program service	revenu	e					
	g	Total. Add lines 2a-2f				290,996.			
	3	Investment income (include	ding div	vidends, inte	rest, and				
		other similar amounts)				5,363,749.			5363749.
	4	Income from investment of							
	5	Royalties							
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
		Rental income or (loss)	6c						
		Net rental income or (loss)			•				
		Gross amount from sales of		(i) Securities	(ii) Other				
		assets other than inventory	7a						
	h	Less: cost or other basis	<u> </u>						
<u>o</u>	-	and sales expenses	7b						
Revenue	c	Gain or (loss)	7c						
ě		Net gain or (loss)							
౼		Gross income from fundraisi							
Other	οu	including \$	-						
١		contributions reported on							
		Part IV, line 18		′ I	a				
	h			8					
		Net income or (loss) from			<u> </u>				
		Gross income from gamin		_					
	Ju	Part IV, line 19		I	9				
	h								
		Net income or (loss) from			Б [
	IU a	Gross sales of inventory, less returns							
		and allowances		I .					
		Less: cost of goods sold)D				
\longrightarrow	С	Net income or (loss) from	sales 0	inventory	Business Code				
ရှ	4.4	OTHER INCOME			900099	01 111	04 444		
ieo ne					900099	94,444.	94,444.		
Miscellaneous Revenue	b	•			300033	-420,836.	-420,836.		
Sce	C								
Ĕ		All other revenue				326 202			
		Total. Add lines 11a-11d				-326,392. 50,381,031.	-35,396.	0.	5363749.
	12	Total revenue. See instruction	IIIS			70,301,U31.	-33,336.	Ι .	JJ0J/49.

Form 990 (2023)

Part IX | Statement of Functional Expenses

94-2808039 Page 10

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 (**D**)
Fundraising (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 24,869,923. 24,869,923. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 944,959. 944,959. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 1,272,896. 714,336. 366,049. 192,511. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 530,679. 394,941. 95,310. 40,428. Other employee benefits 9 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal 217,227. 162,352. 36,472. 18,403. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 1,437.16,958. 12,674. 2,847. Advertising and promotion 12 232,206. 173,547. 38,987. 19,672 Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 23,664. 5,316. 31,662. 2,682. Conferences, conventions, and meetings 19 2,810. 33,168. 24,789. 5,569. 20 Payments to affiliates 21 284,673. 212,760. 47,796. 24,117. Depreciation, depletion, and amortization 22 27,339. 36,580. 6,142. 3,099. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 162,857. 121,716. 27,344. 13,797. REPAIRS & MAINTENANCE All other expenses 28,633,788. 27,683,000. 631,832. 318,956. Total functional expenses. Add lines 1 through 24e 25 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)

Form 990 (2023)
Part X Balance Sheet

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or note to	o any	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			4,622,165.	1	3,362,912.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			601,359.	3	941,928.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substant	tial c	ontributor, or 35%			
		controlled entity or family member of any of these p	perso	ons		5	
	6	Loans and other receivables from other disqualified	d per	sons (as defined			
		under section 4958(f)(1)), and persons described in		6			
<u>s</u>	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
Ä	9	B			64,075.	9	85,853.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D1	10a	12,952,818.			
	b		10b		9,404,949.	10c	9,193,160.
	11	Investments - publicly traded securities	160,815,738.	11	202,251,567.		
	12	Investments - other securities. See Part IV, line 11	2,605,696.	12	109,643.		
	13	Investments - program-related. See Part IV, line 11	3,455,937.	13	3,296,863.		
	14	Intangible assets			14	0.	
	15	Other assets. See Part IV, line 11			3,978,258.	15	4,260,334.
	16	Total assets. Add lines 1 through 15 (must equal li			185,548,177.	16	223,502,260.
	17	Accounts payable and accrued expenses			677,982.	17	1,671,585.
	18	Grants payable	1,607,443.	18	457,500.		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			17 740 400	20	10 000 011
	21	Escrow or custodial account liability. Complete Par			17,740,498.	21	19,862,811.
es	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substant					
iak		controlled entity or family member of any of these p			002 620	22	050 102
_	23	Secured mortgages and notes payable to unrelated			883,638.	23	859,103.
	24	Unsecured notes and loans payable to unrelated th				24	
	25	Other liabilities (including federal income tax, payab					
		parties, and other liabilities not included on lines 17	7-24).	. Complete Part X	2,911,276.	25	2,863,973.
	06				23,820,837.	26	25,714,972.
	26	Organizations that follow FASB ASC 958, check		• X	23,020,037*	20	23,114,312
S		and complete lines 27, 28, 32, and 33.	Here	- 21			
nce	27				161,727,340.	27	197,787,288.
3ala	28	Net assets with donor restrictions			101/12//5104	28	137770772001
J E	20	Organizations that do not follow FASB ASC 958,				20	
Fur		and complete lines 29 through 33.	, 0				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equip				30	
Ass	31	Retained earnings, endowment, accumulated incor				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			161,727,340.	32	197,787,288.
~	33	Total liabilities and net assets/fund balances			185,548,177.	33	223,502,260.
		. 3.5 Dalatico di la riot abboto/ laria balarioto			,,		

Form **990** (2023)

Pa	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	50	38,	1,0	31.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	28	3,63	3,7	88.			
3	Revenue less expenses. Subtract line 2 from line 1	3	21	.,74	7,2	43.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
5									
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 on Schedule O)	9				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	197	7,78	7.2	88.			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII					X			
					Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.							
2a				2a		х			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed								
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate								
	consolidated basis, or both:	,							
	Separate basis X Consolidated basis Both consolidated and separate basis								
С	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?			2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche								
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the									
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?								
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir		lit	3a		X			
_	are suitied and the organization and the organization of the organization of the organization and the organization of the orga			26					

SCHEDULE A

(Form 990)

Total

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

Open to Public Inspection

COMMUNITY FOUNDATION SANTA CRUZ **Employer identification number** Name of the organization COUNTY 94-2808039 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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.)

Sec	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	19201613.	34426217.	43844243.	38299935.	45052678.	180824686					
2	Tax revenues levied for the organ-											
	ization'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	19201613.	34426217.	43844243.	38299935.	45052678.	180824686					
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)						25457997.					
6	Public support. Subtract line 5 from line 4.						155366689					
	Section B. Total Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
7	Amounts from line 4	19201613.	34426217.	43844243.	38299935.	45052678.	180824686					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	2979407.	2651914.	3222860.	2753366.	3960423.	15567970.					
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.)	16,463.	239,992.	1189437.	125,923.	94,444.	1666259.					
11	Total support. Add lines 7 through 10						198058915					
	Gross receipts from related activities,	etc. (see instruction	ons)			12						
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)	_					
	organization, check this box and stop	here										
Sec	tion C. Computation of Publi	c Support Per	centage									
14	Public support percentage for 2023 (ine 6, column (f), d	ivided by line 11, o	column (f))		14	78.44 %					
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	70.31 %					
16a	33 1/3% support test - 2023. If the											
	stop here. The organization qualifies											
b	33 1/3% support test - 2022. If the											
	and stop here. The organization qual											
17a	10% -facts-and-circumstances test	-										
	and if the organization meets the fact			=	="	VI how the organiz	ation					
	meets the facts-and-circumstances to	· ·	•									
b	10% -facts-and-circumstances test	-					10% or					
	more, and if the organization meets the				-							
	organization meets the facts-and-circ				•							
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>					

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.)

Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and						
, , , , , , , , , , , , , , , , , , , ,	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	(a) 2019	(b) 2020	(0) 2021	(u) 2022	(6) 2023	(i) iotai
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 on line 10b, whether or not the business is requirely certified on.						
11 Net income from unrelated business activities not included on line 10b,						
 11 Net income from unrelated business activities not included on 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 						
 11 Net income from unrelated business activities not included on 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.) 		rst, second, third,	fourth, or fifth tax y	year as a section s	501(c)(3) organizatio	on,
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here 	the organization's fi	· · · · · · · · · · · · · · · · · · ·	<i>'</i>	•	(/ (/)	<i>'</i> —
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here 	the organization's fi	· · · · · · · · · · · · · · · · · · ·	<i>'</i>	•	(/ (/)	<i>'</i>
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 	the organization's file Support Per	centage livided by line 13, o	(0)	•	15	%
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 	the organization's file Support Per (line 8, column (f), column (f	rcentage ivided by line 13, o	(0)			%
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investigation 	lic Support Per (line 8, column (f), co 2 Schedule A, Part stment Income	rcentage livided by line 13, of lll, line 15 e Percentage	column (f))		15 16	%
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investment income percentage for 202 	the organization's fine Support Per (line 8, column (f), column (f), column the state of the sta	rcentage livided by line 13, of lill, line 15 Percentage mn (f), divided by li	column (f)) ne 13, column (f))		15 16	% %
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 	the organization's fine Support Per (line 8, column (f), column (f	rcentage livided by line 13, of lll, line 15 Percentage mn (f), divided by li Part III, line 17	column (f)) ne 13, column (f))		15 16 17 18	% % %
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the 	the organization's file Support Per (line 8, column (f), column (f	rcentage livided by line 13, of the line 15 Percentage mn (f), divided by li Part III, line 17 not check the box of	ne 13, column (f))	e 15 is more than 3	15 16 17 18 33 1/3%, and line 17	% % %
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the more than 33 1/3%, check this box and 1/3%. 	lic Support Per (line 8, column (f), colum	rcentage livided by line 13, of the line 15 Percentage mn (f), divided by line 17 not check the box organization quali	ne 13, column (f)) on line 14, and line fies as a publicly s	e 15 is more than 3	15 16 17 18 33 1/3%, and line 17	% % % % % % % % % % % % % % % % % % %
 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the 	lic Support Per (line 8, column (f), colum	rcentage livided by line 13, or lill, line 15 Percentage mn (f), divided by line 17 not check the box or organization qualitation check a box or	ne 13, column (f)) on line 14, and line fies as a publicly s	e 15 is more than 3 upported organiza	15 16 17 18 33 1/3%, and line 17 ation 20 21 21 23, and 24 25 26 26 26 26 26 26 26 26 26 26 26 26 26	% % % % % % % not

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **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.)

		Yes	No
	1		
	2		
	20		
	3a		
	3b		
	2-		
	3c		
	4a		
	AL		
	4b		
	4c		
	-10		
	5a		
	- Ou		
	5b		
	5c		
	6		
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	_		
	8		
	9a		
	-		
	OL-		
	9b		
	9с		
	100		
	10a		
	10b		
ule	A (Forn	n 990)	2023

Pa	t IV Supporting Organizations (continued)			-J
	th capporaing organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	140
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
u	11c below, the governing body of a supported organization?	11a		
h	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	1115		
ŭ	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in.	struction	l' I	NI.
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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	200		
h	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
3	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
	of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard	3b		

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Schedule A (Form 990) 2023 COUN

94-2808039 Page 6

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organia	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 9 Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by line 9 amount 10 10 (i) (ii) Distributable Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3i and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021

Schedule A (Form 990) 2023

d Excess from 2022 e Excess from 2023

COMMUNITY FOUNDATION SANTA CRUZ

94-280<u>8039 Page 8</u> COUNTY Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

0000

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

COMMUNITY FOUNDATION SANTA CRUZ

2023

OMB No. 1545-0047

COUNTY 94-2808039 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$_ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must

answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

Name of organization

COMMUNITY FOUNDATION SANTA CRUZ

COUNTY

Employer identification number

94-2808039

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	SILICON VALLEY COMMUNITY FOUNDATION 2440 W EL CAMINO REAL, SUITE 300 MOUNTAIN VIEW, CA 94040	\$5,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	ANONYMOUS ANONYMOUS, CA 00000	\$5,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	THE JAMES DOANE 2015 TRUST 7807 SOQUEL DRIVE APTOS, CA 95003	\$1,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	VARIOUS VARIOUS, CA 00000	\$_2,236,266.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No5_	Name, address, and ZIP + 4 DRISCOLL'S INC PO BOX 50045 WATSONVILLE, CA 95077	\$ 7,822,776.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 6	Name, address, and ZIP + 4 BRODEA 363 7TH AVENUE 13TH FLOOR	*5 , 000 , 000 .	Person X Payroll Noncash (Complete Part II for
	NEW YORK, NY 10001		noncash contributions.)

Name of organization

COMMUNITY FOUNDATION SANTA CRUZ

COUNTY

Employer identification number

94-2808039

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	LLOYD TABB AND LISA WILLIAMS 3345 LOMA ALTA LN SANTA CRUZ, CA 95065	\$ 1,111,299.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 8	Name, address, and ZIP + 4 BRODEA 363 7TH AVENUE 13TH FLOOR NEW YORK, NY 10001	* 1,050,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	VARIOUS VARIOUS VARIOUS, CA 00000	\$ 1,850,886.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions - \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Ivallie, audi ess, allu ZIF + 4	*	Person Payroll Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.

Name of organization

COMMUNITY FOUNDATION SANTA CRUZ

COUNTY

Employer identification number

94-2808039

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	STOCK - PUBLIC SECURITIES		
4		\$ 2,236,266.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	STOCK - PUBLIC SECURITIES		
		\$ <u>1,111,299</u> .	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK - PUBLIC SECURITIES		
9			
		\$1,850,886.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

Name of organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY 94-2808039 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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 Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	160	449
2	Aggregate value of contributions to (during year)	25,432,667.	
3	Aggregate value of grants from (during year)	24,827,654. 995,724.	2,590,662.
4	Aggregate value at end of year	81,217,285.	136,461,291.
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		-
	impermissible private benefit?		X Yes No
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	rganization during the tax
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic 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 conser	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on easements during the year
8	Does each conservation easement reported on line 2d above		
9	In Part XIII, describe how the organization reports conservation	·	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statemen	ts that describes the
Dai	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Oth	or Similar Assots
· u	Complete if the organization answered "Yes" on Form		er emiliar Assets.
12	If the organization elected, as permitted under FASB ASC 95		halance sheet works
Ia	of art, historical treasures, or other similar assets held for put		
	service, provide in Part XIII the text of the footnote to its finar	, ,	•
h	If the organization elected, as permitted under FASB ASC 95		
b	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items.	exhibition, education, or research in futile	rance of public service,
			Φ.
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre	asures or other similar assets for financial o	
_	the following amounts required to be reported under FASB A		iani, provide
а	Revenue included on Form 990, Part VIII, line 1	-	\$
	Assets included in Form 990, Part X		
U	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		¥

Pai	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other	Simila	r Assets	(contin	nued)
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	ollowing that	t make sig	gnificant	use of its		
	collection items (check all that apply).									
а	Public exhibition	d	ι 🔲 ι	Loan or excl	hange progra	am				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how the	ey further th	e organizatio	n's exem	pt purpo	se in Part	XIII.	
5	During the year, did the organization solicit or	r receive donations of	of art, his	storical treas	sures, or othe	er similar a	assets			
	to be sold to raise funds rather than to be ma	intained as part of the	he organ	ization's col	llection?				Yes	☐ No
Pai	t IV Escrow and Custodial Arrang	gements Comple	te if the o	organization	answered "	Yes" on F	orm 990	, Part IV, I	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodia	an, or other intermed	diary for d	contribution	s or other as	sets not i	ncluded			
	on Form 990, Part X?								Yes	X No
b	If "Yes," explain the arrangement in Part XIII a									
									Amoun	t
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year									
f	Ending balance						1f			
2a	Did the organization include an amount on Fo						y?	X	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation	n has been j	provided in F	Part XIII				X
Pai	T V Endowment Funds Complete if	the organization ans	swered "	Yes" on For	m 990, Part	IV, line 10).			
		(a) Current year	(b) P	rior year	(c) Two yea	rs back ((d) Three	years back	(e) Four	r years back
1a	Beginning of year balance	69,181,840.	80,	531,080.	69,330	0,387.	67,4	08,446.	60	250,553.
b	Contributions	998,636.	1,	,668,264.	6,19	3,315.	8	36,636.		326,998.
С	Net investment earnings, gains, and losses	9,724,945.	-8,	966,414.	9,96	9,586.	3,9	34,605.	10,	321,770.
d	Grants or scholarships	3,519,828.	2,	,890,558.	3,66	6,882.	1,9	02,719.	2	,497,740.
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	-7,020,247.	1,	,160,532.	1,29	5,325.	9	946,581.		993,135.
g	End of year balance	83,405,840.	69,	181,840.	80,533	1,080.	69,3	30,387.	67	,408,446.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g	, column (a)) held as:	•				
а	Board designated or quasi-endowment	.0000	%		•					
b	Permanent endowment 80.2100	%	_							
С	Term endowment 19.7900	 %								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
За	Are there endowment funds not in the posses	ssion of the organiza	tion that	are held an	nd administer	red for the	•			
	organization by:	-								Yes No
	(i) Unrelated organizations?								3a(i)	X
	(m) D								3a(ii)	Х
b	If "Yes" on line 3a(ii), are the related organizar								3b	Х
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	ent								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV	, line 11a. S	ee Form 990	, Part X, li	ine 10.			
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulat	ed	(d) Boo	k value
		basis (investr	nent)	basis	(other)	dep	reciation	1		
1a	Land	2,785,	000.	1,08	3,604.				3,86	8,604.
	Buildings				6,170.	2,4	62,8	36.		3,334.
c	Leasehold improvements				-				-	-
d	Equipment	I		1,31	0,546.	1,0	87,8	42.	22	2,704.
	Other				7,498.		08,9			8,518.
	I. Add lines 1a through 1e. (Column (d) must e		X line 10							3,160.

~ ~	JUNDATION SAN		0000000
Schedule D (Form 990) 2023 COUNTY		94	-2808039 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" of		T	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
• •			
(E)			
<u>(F)</u>		+	
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	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	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)		+	
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	E 000 B 1 B 1 B 1 B	44 L O . E	
Complete if the organization answered "Yes" of		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, line 15, col	(D))		
Part X Other Liabilities	. (D))		
Complete if the organization answered "Yes" of	on Form 000 Part IV line	110 or 11f Soo Form 000 Part V line 25	
(a) Description of liability	on Form 990, Fait IV, line	The of Thi. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			F 64 64 :
(2) CHARITABLE GIFT ANNUITY LI			561,914.
(3) CHARITABLE TRUST LIABILITI	LES		2,302,059.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. line 25. col	(R))		2,863,973.
toolullii toi illust cuudi Fullii 330. Fait A. IIIIC 23. Cui	. IUII		,

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII COUNTY

94-2808039 Page 4

Par	† XI Reconciliation of Revenue per Audited Financial State		th Revenue per Re	turn	
	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	64,052,968.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments		13,671,937.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			40 684 008
е	Add lines 2a through 2d			2e	13,671,937. 50,381,031.
3	Subtract line 2e from line 1			3	50,381,031.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	İ		
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			0
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	omonto W	ith Evnance per E	5	50,381,031.
Pal	rt XII Reconciliation of Expenses per Audited Financial State		itii Expenses per F	tetur	П
	Complete if the organization answered "Yes" on Form 990, Part IV, line				20 (22 700
1	Total expenses and losses per audited financial statements			1	28,633,788.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا م ا			
a	Donated services and use of facilities				
b	Prior year adjustments	_			
С.	Other losses				
d	Other (Describe in Part XIII.)				0
e	Add lines 2a through 2d			2e	0. 28,633,788.
3	Subtract line 2e from line 1			3	20,033,700.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	45	1		
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.) Add lines 4a and 4b			40	0.
5 5				4c 5	28,633,788.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information			, J	20,033,700.
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV lines	1h and 2h: Part V line 4	· Part `	X line 2: Part XI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			, 1 ait	Λ, ΙΙΙΟ Ζ, Γ ΔΙΤ ΛΙ,
111103	2d and 45, and 1 art An, intes 2d and 45. Also complete this part to provide any	additionaliin	omation.		
PAF	RT IV, LINE 2B:				
THE	E FOUNDATION RECEIVES AND DISTRIBUTES ASS	SETS FO	R THE BENEFI	т о	F VARIOUS
			·		
OTE	HER NOT-FOR-PROFIT ORGANIZATIONS UNDER CH	ERTAIN	DONOR FUND A	GRE	EMENTS.
THE	E FOUNDATION ACCEPTS A CONTRIBUTION FROM	A DONO	R AND AGREES	то	TRANSFER
A I	PORTION OF THE RETURN ON INVESTMENT OF THE	HOSE AS	SETS, SUBJEC	T T	O THE
			•		
FOU	JNDATION'S SENDING POLICY, TO ANOTHER ENT	TTY TH	AT IS SPECIF	IED	BY THE
	·				
OOL	NOR. THE FOUNDATION HOLDS SUCH FUNDS AS I	DESIGNA	TED FUNDS.		
PAF	RT X, LINE 2:				
THE	E PREPARATION OF CONSOLIDATED FINANCIAL S	STATEME	NTS IN ACCOR	DAN	CE WITH
<u>ACC</u>	COUNTING PRINCIPLES GENERALLY ACCEPTED IN	THE U	NITED STATES	OF	AMERICA
REC	DUIRES THE FOUNDATION AND SUBSIDIARIES TO	REPOR	T INFORMATIO	N R	EGARDING

Part XIII Supplemental Information (continued) ITS EXPOSURE TO VARIOUS TAX POSITIONS TAKEN BY THE FOUNDATION AND SUBSIDIARIES. 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 AND SUBSIDIARIES HAVE 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 INTEREST OR PENALTIES ASSESSED TO THE FOUNDATION ARE RECORDED IN OPERATING EXPENSES. NO INTEREST OR PENALTIES FROM FEDERAL OR STATE TAX AUTHORITIES WERE RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. PART V, LINE 4: ENDOWMENT FUNDS ARE INTENDED TO SUPPORT GRANTMAKING AND SCHOLARSHIPS FOR ORGANIZATIONS AND INDIVIDUALS TO CREATE A LASTING IMPACT AND MAKE SANTA CRUZ COUNTY THRIVE FOR ALL WHO CALL IT HOME, NOW AND IN THE FUTURE.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

OMB No. 1545-0047

COMMUNITY FOUNDATION SANTA CRUZ COUNTY 94-2808039 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region HUMAN SERVICES, COMMUNITY DEVELOPMENT, ENVIRONMENT NORTH AMERICA AND HEALTH 1,433,575. 0 0 1,433,575. 3 a Subtotal **b** Total from continuation 0 sheets to Part I Totals (add lines 3a 1,433,575. and 3b)

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

Schedule F (Form 990) 2023

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	HUMAN SERVICES	77,300.	WIRE	0.		
		NORTH AMERICA	EDUCATION/YOUTH DEVELOPMENT	15,300.	WIRE	0.		
		NORTH AMERICA	ARTS, HISTORY AND	27,500.	WIRE	0.		
		NORTH AMERICA	ENVIRONMENT	104,800.	WIRE	0.		
			ENVIRONMENT	872,000.		0.		
		NORTH AMERICA	ENVIRONMENT	22,500.		0.		
		NORTH AMERICA	EDUCATION/YOUTH DEVELOPMENT	124,323.		0.		
		NORTH AMERICA	EDUCATION/YOUTH DEVELOPMENT	47,848.		0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a t	tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

3 Enter total number of other organizations or entities

9

Schedule F (Form 990)	COUNT	Y			94-28	08039		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EDUCATION/YOUTH DEVELOPMENT	142,004.		0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Schedule F (Form 990) 2023 (Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

Part V | Supplemental Information

COUNTY

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

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 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 RECOMMEND 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 REQUESTS 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

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
SIGNIFICANT CHANGES OR ISSUES DURING THE GRANT PERIOD.
PART I, LINE 3:
THE FOUNDATION IS UTILIZING THE ACCRUAL METHOD TO ACCOUNT FOR
EXPENDITURES ON SCHEDULE F, PART I.
PART II, LINE 1 (ACCOUNTING METHOD):
THE FOUNDATION IS UTILIZING THE ACCRUAL METHOD TO ACCOUNT FOR GRANT
EXPENDITURES ON SCHEDULE F, PART II.

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. COMMUNITY FOUNDATION SANTA CRUZ

OMB No. 1545-0047

Open to Public Inspection

Name of the organization COMMUNITY COUNTY		Employer identification number $94-2808039$					
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assistance. Describe in Part IV the organization's process.	stance?						
Part II Grants and Other Assistance to I recipient that received more than 9	-				anization answered "\	es" on Form 990, Part	t IV, line 21, for any
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
350.ORG							
PO BOX 843004 BOSTON, MA 02284	26-1150699	501(C)(3)	49,298.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
ACHIEVE TAHOE PO BOX 8339 TRUCKEE, CA 96162	68-0024920	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
ACTIVITIES4ALL 534 CEREZE STREET WATSONVILLE, CA 95076	46-4487567	501(C)(3)	23,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
AGRICULTURAL HISTORY PROJECT PO BOX 1181 WATSONVILLE, CA 95077	77-0165945	501(C)(3)	29,764.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING
AGRI-CULTURE 141 MONTE VISTA AVENUE WATSONVILLE, CA 95076	77-0212413	501(C)(3)	24,166.	0.		ARTS, HISTORY,	FOR PROGRAMS, SERVICES AND SCHOLARSHIPS THAT SUPPORT AGRICULTURAL EDUCATION
AGRICULTURE AND LAND-BASED TRAINING ASSOCIATION - PO BOX 6264 - SALINAS, CA 93912	77-0566055	501(C)(3)	25,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
2 Enter total number of section 501(c)(3) at3 Enter total number of other organizations	•						

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMAH MUTSUN LAND TRUST 2460 17TH AVENUE #1019 SANTA CRUZ, CA 95062	32-0447436	501(C)(3)	253,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, STRATEGIC PLANNING
AMERICAN CANCER SOCIETY - SILICON VALLEY/CENTRAL COAST REGION - 747 CAMDEN AVENUE, SUITE B - CAMPBELL, CA 95008	13-1788491		5,343.	0.		HUMAN SERVICES	TO SUPPORT PROGRAMS AND SERVICES IN SANTA CRUZ COUNTY OPERATED BY AMERICAN CANCER SOCIETY
AMERICAN CIVIL LIBERTIES UNION FOUNDATION - 125 BROAD STREET 18TH FL - NEW YORK, NY 10004	13-6213516	501(C)(3)	196,441.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
AMERICAN FRIENDS OF MAGEN DAVID ADOM - 20 W. 36TH STREET, SUITE 1100 - NEW YORK, NY 10018	13-1790719	501(C)(3)	6,800.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
AMERICAN ONLINE GIVING FOUNDATION INC - 40 EAST MAIN STREET, SUITE 887 - NEWARK, DE 19711	81-0739440	501(C)(3)	2,245,078.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, DONATION MATCH AND RECOGNITION OF VOLUNTEERS SERVICE HOURS
AMERICAN RED CROSS OF THE CENTRAL COAST - PO BOX AR - CARMEL, CA 93921	53-0196605	501(C)(3)	34,009.	0.		HEALTH	TO SUPPORT THE PROGRAMS AND SERVICES IN SANTA CRUZ COUNTY
AOPA FOUNDATION 421 AVIATION WAY FREDERICK, MD 21701	20-8817225	501(C)(3)	10,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
ARIZONA STATE UNIVERSITY FOUNDATION - P.O. BOX 2260 - TEMPE, AZ 85280	86-6051042	501(C)(3)	80,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT SCHOLARSHIP
ARKANSAS COMMUNITY FOUNDATION 5 ALLIED DRIVE, SUITE 51110 BUILDING 5, 11TH FLOOR - LITTLE ROCK, AR 72202	52-1055743	501(C)(3)	9,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AROMAS SAN JUAN BAUTISTA COMMUNITY							
SCHOOLS FOUNDATION - 2300 SAN JUAN							FOR GENERAL OPERATING
HIGHWAY - SAN JUAN BAUTISTA, CA						EDUCATION/YOUTH	SUPPORT AND TO SUPPORT
95045	77-0431330	501(C)(3)	20,000.	0.		DEVELOPMENT	SCHOLARSHIP FUNDS
ARTS COUNCIL SANTA CRUZ COUNTY 1070 RIVER STREET SANTA CRUZ, CA 95060	94-2600140	501(C)(3)	14,995.	0.		ARTS, HISTORY,	FOR GENERAL SUPPORT, OPEN STUDIOS, AND ARTS EDUCATION
ASOCIACION MEXICANA DE BANCOS DE ALIMENTOS AC - AV. MIGUEL ANGEL DE QUEVEDO 8, AGRICOLA, CHIMALISTAC, ALVARO OBREGON, 01050 - MEXICO		501(C)(3)	77,300.	0.		HUMAN SERVICES	FOR FOOD TO FAMILIES LIVING IN THE BERRY-GROWING COMMUNITIES IN THE MEXICAN STATES
MINITED SERVICES MINITED		301(6)(3)	77,300.	<u> </u>		HOLDIN BERVICES	IN THE MEATERN STATES
ASPIRE PUBLIC SCHOOLS							TO SUPPORT TOWARDS THE
1001 22ND AVE, SUITE 100						EDUCATION/YOUTH	GIVING TREE, WITH
OAKLAND, CA 94606	94-3311088	501(C)(3)	25,000.	0.		DEVELOPMENT	EMPHASIS ON SCHOLARSHIPS
ASSIST INTERNATIONAL, INC. 800 S STOCKTON AVE RIPON, CA 95366	77-0243475	501(C)(3)	6,000.	0.		HUMAN SERVICES	TO SUPPORT THE WORK OF CAMINUL FELIX IN ROMANIA AND PROVIDE SUPPORT TO ROMANIAN REFUGEES
ASSOCIATION OF FAITH COMMUNITIES OF SANTA CRUZ COUNTY - 532 CENTER STREET - SANTA CRUZ, CA 95060	81-3652622	501(C)(3)	30,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND SHELTERING PROGRAMS
AUDUBON CANYON RANCH PO BOX 577 STINSON BEACH, CA 94970	94-6069140	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
AZTECAS YOUTH SOCCER ACADEMY PO BOX 1028 WATSONVILLE, CA 95076	77-0269322	501(C)(3)	21,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
BAY BAR & GRILL 209 ESPLANADE SUITE B CAPITOLA, CA 95010	00-000000	501(C)(3)	8,500.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT

Schedule I (Form 990) COUNT I							74-2000039 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLARMINE COLLEGE PREPARATORY 960 WEST HEDDING STREET SAN JOSE, CA 95126	94-1160938	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	FOR SCHOLARSHIP PROGRAM SUPPORT
BERKELEY YOUTH ALTERNATIVES 1255 ALLSTON WAY BERKELEY, CA 94702	94-1711728	501(C)(3)	15,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
BIG BROTHERS BIG SISTERS OF SANTA CRUZ COUNTY - 740 FRONT STREET SUITE 155 - SANTA CRUZ, CA 95060	94-2826754	501(C)(3)	24,082.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
BIRCHBARK FOUNDATION 9029 SOQUEL AVE, SUITE F SANTA CRUZ, CA 95062	81-2531220	501(C)(3)	8,750.	0.		HUMAN SERVICES	FOR GENERAL OPERATING
BIRTH COMPANIONS COMMUNITY CENTER 29 SAN JUAN AVE SAN FRANCISCO, CA 94112	86-3991365	501(C)(3)	20,000.	0.		HEALTH	FOR RISE TOGETHER CIRCLE OF SUPPORT GRANT
BLACK SURF SANTA CRUZ 101 COOPER ST, SUITE 223 SANTA CRUZ, CA 95060	87-4556850	501(C)(3)	30,100.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING AND RISE TOGETHER CIRCLE OF SUPPORT GRANT
BONNY DOON COMMUNITY SCHOOL FOUNDATION - PO BOX 8089 - SANTA CRUZ, CA 95061	77-0412170	501(C)(3)	11,698.	0.		EDUCATION/YOUTH	TO SUPPORT LEARNING AND ACADEMIC EXCELLENCE IN BONNY DOON
BOYS AND GIRLS CLUBS OF GREATER OXNARD AND PORT HUENEME - 1900 WEST 5TH STREET - OXNARD, CA 93030	95-1785162	501(C)(3)	12,600.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT OF NYELAND ACRES CLUB
BOY SCOUTS OF AMERICA - SILICON VALLEY MONTEREY BAY AREA COUNCIL - 970 W JULIAN - SAN JOSE, CA 95126	94-1156254	501(C)(3)	6,250.	0.		COMMUNITY DEVELOPMENT	FOR SUPPORT OF SKILLICORN BBQ ANNUAL FUNDRAISER.

Schedule I (Form 990) COUNTY	1 001,51111	J., D	_			9	94-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF SANTA CRUZ COUNTY - 543 CENTER STREET - SANTA CRUZ, CA 95060	94-6129075	501(C)(3)	51,250.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT AND POOL RENOVATIONS
BOYS & GIRLS CLUBS OF MID CENTRAL COAST/SANTA MARIA VALLEY - 901 NORTH RAILROAD AVENUE - SANTA MARIA, CA 93458	95-2468116	501(C)(3)	18,800.	0.		COMMUNITY DEVELOPMENT	FOR OPERATING EXPENSES OR OTHER CRITICAL NEEDS OF ITS LOCATION IN SANTA MARIA
BRENNAN CENTER FOR JUSTICE 120 BROADWAY, NO. 1750 NEW YORK, NY 10271	13-3839293	501(C)(3)	30,500.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT AND FOR SYMPOSIUM
BRUCE W. WOOLPERT ALGEBRA ACADEMY 350 TECHNOLOGY DRIVE WATSONVILLE, CA 95076	47-1116673	501(C)(3)	40,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
CABRILLO COLLEGE FOUNDATION 6500 SOQUEL DRIVE APTOS, CA 95003	94-6121953	501(C)(3)	269,726.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, PLUS CAP, WES, SCHOLARSHIPS, & MORE
CABRILLO FESTIVAL OF CONTEMPORARY MUSIC - 147 SOUTH RIVER STREET, SUITE 232 - SANTA CRUZ, CA 95060	94-6123298	501(C)(3)	6,229.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
CALIFORNIA AGRICULTURAL LEADERSHIP FOUNDATION - PO BOX 479 - SALINAS, CA 93902	94-6069269	501(C)(3)	36,667.	0.		ENVIRONMENT	TO SUPPORT 2023 AG LEADERSHIP FELLOWSHIP
CALIFORNIA FARM LINK 335 SPRECKELS DRIVE, SUITE F APTOS, CA 95003	94-3332630	501(C)(3)	150,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
CALIFORNIA NATIVE PLANT SOCIETY 2707 K ST, SUITE 1 SACRAMENTO, CA 95816	94-6116403	501(C)(3)	50,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

						4-2000033 Page
Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	ırt II.)	T
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
51-0183228	501(C)(3)	6,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
20-4927897	501(C)(3)	50,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT THE THOMAS
86-3991365	501(C)(3)	9,900.	0.		HEALTH	FOR RISE TOGETHER CIRCLE OF SUPPORT GRANT
94-3261684	501(C)(3)	20,000.	0.		HUMAN SERVICES	FOR THE TINY HOME PROJECT AND GENERAL OPERATING
00-000000	501(C)(3)	9,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
00-000000	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
30-0586010	501(C)(3)	222,593.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND MATCHING FOR VOLUNTEERS' SERVICE HOURS
77-0305354	501(C)(3)	106,393.	0.		HUMAN SERVICES	FOR GENERAL OPERATING, PROGRAM SUPPORT, JUVENILE JUSTICE PROGRAM, SCHOLARSHIP SUPPORT
77-0042961	501(C)(3)	1 710 000	n		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, TO SUPPORT CZU FIRE VICTIMS AND THEIR RELATED EXPENSES
	(b) EIN 51-0183228 20-4927897 86-3991365 94-3261684 00-0000000 00-0000000 77-0305354	(b) EIN (c) IRC section	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (51-0183228 501(c)(3) 6,000. 20-4927897 501(c)(3) 50,000. 86-3991365 501(c)(3) 9,900. 94-3261684 501(c)(3) 20,000. 00-0000000 501(c)(3) 9,000. 00-0000000 501(c)(3) 10,000. 30-0586010 501(c)(3) 222,593.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance 51-0183228 501(C)(3) 6,000. 0. 20-4927897 501(C)(3) 50,000. 0. 86-3991365 501(C)(3) 9,900. 0. 94-3261684 501(C)(3) 20,000. 0. 00-0000000 501(C)(3) 9,000. 0. 30-0586010 501(C)(3) 10,000. 0. 77-0305354 501(C)(3) 106,393. 0.	(b) EIN (c) IRC section if applicable applicable if applicable assistance if it is a satisfance if applicable if app	Sesistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (b) EIN

Schedule I (Form 990) COUNTY						9	4-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	23-7432162	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD, SUITE 2416 LOS ANGELES, CA 90048	95-1644600	501(C)(3)	10,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
CENTER FOR FARMWORKER FAMILIES PO BOX 957 FELTON, CA 95018	90-0800339	501(C)(3)	55,750.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, HELP FARMWORKER FAMILIES IN SANTA CRUZ AND PAJARO VALLEY
CENTER FOR PRODUCE SAFETY 1100 MAIN ST, SUITE 210 WOODLAND, CA 95695	35-2489134	501(C)(3)	20,000.	0.		ENVIRONMENT	TO SUPPORT CENTER FOR PRODUCE SAFETYS 2023 FUNDRAISING CAMPAIGN
CENTRAL COAST YMCA 600 CAMINO EL ESTERO MONTEREY, CA 93940	77-0202335	501(C)(3)	80,400.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, SPONSOR THE YMCA PAJARO PARK SUMMER CAMP IN 2023
CENTRO DE INTEGRACION JUVENIL DE ZAMORA A.C/ZAMORA YOUTH INTEGRATION CENTER A.C AVE SANTIAGO 457, VALENCIA, 59610		501(C)(3)	15,300.	0.		EDUCATION/YOUTH	FOR PREVENTION OF ADDICTION IN ADOLESCENTS
CENTRO INTERNACIONAL DE MEJORAMIENTO DE MAIZ Y TRIGO INTERNACIONAL - KM 45 CARRETERA MEXICO-VERACRUZ EL BATAN - MEXICO		501(C)(3)	27,500.	0.		ARTS, HISTORY,	FOR SUSTAINABLE AGRICULTURAL PRACTICES/PRODUCTION TECHNIQUES
CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE - 180 WOZ WAY - SAN JOSE, CA 95110	94-2870828	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
CITY OF WATSONVILLE 275 MAIN STREET, SUITE 400 WATSONVILLE, CA 95076	00-000000	501(C)(3)	20,623.	0.		COMMUNITY DEVELOPMENT	FOR DISPOSAL FEES FOR WATSONVILLE RESIDENTS DURING THE FLOODS IN 2023

Schedule I (Form 990) COUNTY						9	4-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEAN AIR TASK FORCE INC. 114 STATE STREET, 6TH FLOOR BOSTON, MA 02109	04-3512550	501(C)(3)	49,298.	0.		ENVIRONMENT	FOR GENERAL OPERATING
COACHELLA VALLEY RESCUE MISSION 47470 VAN BUREN INDIO, CA 92201	95-2684844	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
COASTAL KIDS HOME CARE 1172 SOUTH MAIN STREET, #125 SALINAS, CA 93901	20-2549984	501(C)(3)	30,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
COASTAL WATERSHED COUNCIL 107 DAKOTA AVENUE, SUITE 4 SANTA CRUZ, CA 95060	68-0368798	501(C)(3)	21,553.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
COLLEGE OF THE DESERT FOUNDATION 43500 MONTEREY AVENUE PALM DESERT, CA 92260	95-3829219	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
COMMITTEE FOR GREEN FOOTHILLS/GREEN FOOTHILLS FOUNDATION - 3921 E BAYSHORE RD - PALO ALTO, CA 94303	94-6121854	501(C)(3)	10,500.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
COMMUNITIES ORGANIZED FOR RELATIONAL POWER IN ACTION - 95 ALTA VISTA AVENUE - WATSONVILLE, CA 95076	77-0557460	501(C)(3)	20,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
COMMUNITY ACTION BOARD OF SANTA CRUZ COUNTY (CAB) - 406 MAIN STREET SUITE 207 - WATSONVILLE, CA 95076	94-2523780		1,336,923.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, DISASTER SUPPORT AND RISE TOGETHER CIRCLE OF SUPPORT
COMMUNITY ALLIANCE WITH FAMILY FARMERS - PO BOX 363 - DAVIS, CA 95617	94-2914745		104,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER AND GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		74-2000039 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY ARTS & EMPOWERMENT 240 MAPLE AVENUE WATSONVILLE, CA 95076	83-4528109	501(C)(3)	45,000.	0.		ARTS, HISTORY,	TO SUPPORT MURAL WORK ON THE CIVIC GARAGE AND THE WATSONVILLE BRILLANTE PROJECT
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076	94-2460211	501(C)(3)	620,456.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, MEALS ON WHEELS, MCR, DISASTER SUPPORT
COMMUNITY FOUNDATION FOR MONTEREY COUNTY - 2354 GARDEN ROAD - MONTEREY, CA 93940	94-1615897	501(C)(3)	186,250.	0.		COMMUNITY DEVELOPMENT	FOR MONTEREY GIVES CAMPAIGN, DISASTER SUPPORT AND GENERAL OPERATING SUPPORT
COMMUNITY HEALTH TRUST OF THE PAJARO VALLEY - 85 NIELSON STREET - WATSONVILLE, CA 95076	94-1149702	501(C)(3)	21,000.	0.		ARTS, HISTORY,	FOR ANNUAL FUNDRAISER WINE & ROSES AND RISE TOGETHER CIRCLE OF SUPPORT
COONGIE 910 HARMON GULCH RD BOULDER CREEK, CA 95006	84-3766902	501(C)(3)	40,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
COUNTY OF SANTA CRUZ/PROBATION DEPARTMENT/AZTECAS - P.O. BOX 1028 - WATSONVILLE, CA 95076	00-0000000	501(C)(3)	25,800.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT AND RISE TOGETHER CIRCLE OF SUPPORT
COUNTY PARK FRIENDS 870 17TH AVENUE, SUITE 2 SANTA CRUZ, CA 95062	77-0209249	501(C)(3)	33,610.	0.		ENVIRONMENT	FOR COMMUNITY PARK SUPPORT, SWIM DAY AND GENERAL OPERATING SUPPORT
CRADLE TO CAREER SANTA CRUZ COUNTY 4450 CAPITOLA RD, SUITE 106 CAPITOLA, CA 95010	94-1422471	501(C)(3)	59,500.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING
CRUZIO 877 CEDAR STREET SUITE 150 SANTA CRUZ, CA 95060	77-0459330	501(C)(3)	104,675.	0.		EDUCATION/YOUTH	FOR REIMBURSEMENT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRUZ ROJA MEXICANA EJERCITO MACIONAL NO. 1032 POLANCO MEXICO		501(C)(3)	104,800.	0.		HUMAN SERVICES	FOR VICTIMS OF HURRICANE OTIS IN GUERRERO, MEXICO, TO PURCHASE MEDICAL EQUIPMENT/SUPPLIES
CSUMB FOUNDATION 100 CAMPUS CENTER-AVC BLDG 97 SEASIDE, CA 93955	80-0494808	501(C)(3)	80,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR THE BRUCE W. WOOLPERT
CURATED BY THE SEA 703 FRONT ST. SANTA CRUZ, CA 95060	00-0000000	501(C)(3)	30,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
CURIODYSSEY AT COYOTE POINT 1651 COYOTE POINT DR SAN MATEO, CA 94401	94-1262434	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
DIENTES COMMUNITY DENTAL CARE 1830 COMMERCIAL WAY SANTA CRUZ, CA 95065	77-0311752	501(C)(3)	837,500.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, AGENCY PAYOUT REQUEST
DIGITAL NEST 349 MAIN STREET, SUITE 201 WATSONVILLE, CA 95076	46-5757256	501(C)(3)	193,250.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
DIVERSITY CENTER PO BOX 8280 SANTA CRUZ, CA 95061	77-0212967	501(C)(3)	49,100.	0.		COMMUNITY DEVELOPMENT	FOR GALA SPONSORSHIP, QUEER YOUTH TASK FORCE, STUDENT SUMMIT CHAPERONE HONORARIA
DOCTORS WITHOUT BORDERS USA 40 RECTOR STREET, 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	23,300.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
DOMINICAN HOSPITAL FOUNDATION 1555 SOQUEL DRIVE SANTA CRUZ, CA 95065	94-2450442	501(C)(3)	102,000.	0.		HEALTH	FOR WELLNESS MOBIL UNIT, MATCHING GRANTS, WELLNESS MOBIL UNIT, GENERAL OPERATING

94-2808039

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Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ECOLOGY ACTION 877 CEDAR STREET, SUITE 240 SANTA CRUZ, CA 95060	94-2584236	501(C)(3)	201,762.	0.		ENVIRONMENT	FOR CARBON NEUTRAL SANTA CRUZ COUNTY INITIATIVE, PROGRAM SUPPORT, THINK BIKE STUDY TRIP
ELKHORN SLOUGH FOUNDATION PO BOX 267 MOSS LANDING, CA 95039	94-2823247	501(C)(3)	28,617.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, CAPITAL CAMPAIG
EL SISTEMA SANTA CRUZ 235 SOUTH BRANCIFORTE AVENUE SANTA CRUZ, CA 95062	84-4998415	501(C)(3)	35,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
EMDR RESEARCH FOUNDATION 1369 PORT WASHINGTON AVE, #367 GRAFTON, WI 53024	72-1601034	501(C)(3)	100,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
EMERGENCY ASSISTANCE FOUNDATION, INC - PO BOX 850001 - ORLANDO, FL 32885	45-1813056	501(C)(3)	200,000.	0.		HUMAN SERVICES	FOR IMMEDIATE RESPONSE PROGRAM FOR CALIFORNIA WINTER STORMS IN JANUARY 2023
ENCOMPASS COMMUNITY SERVICES 380 ENCINAL STREET, SUITE 200 SANTA CRUZ, CA 95060	23-7275290	501(C)(3)	49,490.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, AGENCY PAYOUT REQUEST
ENVIRONMENT IN THE PUBLIC INTEREST 1241 JOHNSON AVE, #230 SAN LUIS OBISPO, CA 93401	52-2381905	501(C)(3)	50,000.	0.		ENVIRONMENT	FOR PROTECT SAN BENITO
EPISCOPAL CHURCH OF ST. JOHN THE BAPTIST - 125 CANTERBURY DRIVE - APTOS, CA 95003	94-1629317	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
ESCUELAS SUSTENTABLES A.C AV. COYOACAN NO. 1622, COL DEL VALLE SUR, BENITO JUAREZ, 03100 CIUDAD DE MEX		501(C)(3)	872,000.	0.		ENVIRONMENT	TO CONSTRUCT THE LAS ESTRELLITAS DAY CARE IN THE SAN QUINTIN REGION OF BAJA CALIFORNIA

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESPERANZA COMMUNITY FARMS 8 ESTRELLAS CIRCLE SALINAS, CA 93905	92-0412067	501(C)(3)	14,550.	0.		ENVIRONMENT	FOR THE HARVESTING EQUITY EVENT, GENERAL OPERATING SUPPORT
ESPERANZA DEL VALLE 925 46TH AVE, #108 CAPITOLA, CA 95010	47-2040811	501(C)(3)	10,000.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT
EVERGREEN UNION SCHOOL DISTRICT 19500 LEARNING WAY COTTONWOOD, CA 96022	68-0353781	501(C)(3)	93,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO PURCHASE/INSTALL AN HVAC SYSTEMS AT BEND ELEMENTARY SCHOOL IN RED BLUFF, CALIFORNIA
FAMILIES IN TRANSITION, INC. 406 MAIN STREET SUITE 326 WATSONVILLE, CA 95076	77-0327992	501(C)(3)	46,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
FAMILY SERVICE AGENCY OF THE CENTRAL COAST - 104 WALNUT AVENUE SUITE 208 - SANTA CRUZ, CA 95060	94-1716354	501(C)(3)	12,485.	0.		HEALTH	FOR WOMENCARE, SURVIVOR'S HEALING CENTER, GENERAL OPERATING SUPPORT
FIELDGUIDES INC. P.O. BOX 270 HORNBROOK, CA 96044	77-0006233	501(C)(3)	7,500.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
FOCAPAS- PROMOTION OF CULTURE, ART, PROMOTION AND SOCIAL ASSISTANCE (FOMENTO A L - ADOLFO LOPEZ MATEOS STREET #18 INT. 201,		501(C)(3)	22,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING
FOOD BANK OF SANTA BARBARA COUNTY 490 W FOSTER RD SANTA MARIA, CA 93455	77-0169214	501(C)(3)	45,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
FOOD SHARE, INC. 4156 SOUTHBANK ROAD OXNARD, CA 93036	77-0018162	501(C)(3)	25,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT

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FOOD WHAT?!							
1156 HIGH ST						EDUCATION/YOUTH	FOR ANNUAL FUNDRAISER,
SANTA CRUZ, CA 95064	81-2590280	501(C)(3)	33,550.	0.		DEVELOPMENT	GENERAL OPERATING SUPPOR
							TO SUPPORT MOROCCAN
FOUNDATION SANADY							FAMILIES AFFECTED BY THE
9 AVENUE KHALID BNOU LOUALID, CASAB						EDUCATION/YOUTH	2023 EARTHQUAKE, FOR
MEXICO		501(C)(3)	124,323.	0.		DEVELOPMENT	EDUCATIONAL PROGRAMS
FRACTURED ATLAS							
248 W. 35TH ST, 10TH FLOOR						EDUCATION/YOUTH	
NEW YORK, NY 10001	11-3451703	501(C)(3)	20,000.	0.		DEVELOPMENT	FOR CURATED BY THE SEA
							TO SUPPORT THE MISSION
FRIENDS OF SANTA CRUZ STATE PARKS							AND ACTIVITIES, GENERAL
1543 PACIFIC AVENUE, SUITE 206							OPERATING AND COMMUNITY
SANTA CRUZ, CA 95060	51-0183410	501(C)(3)	29,609.	0.		ENVIRONMENT	PARK SUPPORT
EDITENDO OF MALE DATE OF MEATI							
FRIENDS OF THE RAIL & TRAIL PO BOX 1652							HOD GENERAL OPERATING
	46-1323531	E01/G \/2\	12 000	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
CAPITOLA, CA 95060	40-1323531	501(C)(3)	12,000.	٠.		ENVIRONMENT	SUPPORT
FRIENDS OF THE RIVER FOUNDATION							
1418 20TH ST, SUITE 100							FOR GENERAL OPERATING
SACRAMENTO, CA 95811	94-2400210	501(C)(3)	6,250.	0.		ENVIRONMENT	SUPPORT
,		,,,,,	1				FOR GENERAL OPERATING
FRIENDS OF THE SANTA CRUZ PUBLIC							SUPPORT AND SPECIAL
LIBRARIES - PO BOX 8472 - SANTA						ARTS, HISTORY,	LIBRARY PROGRAMS AT SANT
CRUZ, CA 95061	94-2612557	501(C)(3)	27,491.	0.		AND CULTURE	CRUZ PUBLIC LIBRARIES
•			,				TO SUPPORT THE MISSION
FRIENDS OF THE WATSONVILLE PUBLIC							AND PROGRAMS OF THE
LIBRARIES - 275 MAIN STREET SUITE						ARTS, HISTORY,	FRIENDS OF THE
100 - WATSONVILLE, CA 95076	23-7066840	501(C)(3)	14,170.	0.		AND CULTURE	WATSONVILLE PUBLIC
·							
FRIENDS OF THE WORLD FOOD PROGRAM							
P.O. BOX 96316							TO SUPPORT EFFORTS TO
WASHINGTON, DC 20090	13-3843435	501(C)(3)	10,000.	0.		HUMAN SERVICES	FEED THE PEOPLE OF GAZA

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Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	ırt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF WATSONVILLE PARKS AND COMMUNITY SERVICE - PO BOX 462 - WATSONVILLE, CA 95077	46-4409013	501(C)(3)	6,200.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT NERDVILLE MINI-CON, HOLIDAY LIGHTS, WATSONVILLE STRAWBERRY FEST BOOTH
GEFFEN PLAYHOUSE 10886 LE CONTE AVENUE LOS ANGELES, CA 90024	95-4492653	501(C)(3)	15,000.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT
GEORGIANA BRUCE KIRBY PREPARATORY SCHOOL - 425 ENCINAL ST - SANTA CRUZ, CA 95060	68-0413959	501(C)(3)	5,375.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GSA CLUB, GENERAL OPERATING SUPPORT
GIRL SCOUTS OF CALIFORNIA CENTRAL COAST - 1500 PALMA DRIVE SUITE 110 - VENTURA, CA 93003	94-1567162	501(C)(3)	12,705.	0.		EDUCATION/YOUTH	TO SUPPORT THE SCOUTING PROGRAMS IN THE MONTEREY BAY AREA
GIRLS INCORPORATED OF THE CENTRAL COAST - 318 CAYUGA ST, SUITE 206 - SALINAS, CA 93901	20-5040398	501(C)(3)	79,250.	0.		EDUCATION/YOUTH	TO ESTABLISH A SCHOLARSHIP FUND, GENERAL OPERATING SUPPORT
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PL, SUITE A BOULDER, CO 80301	84-1612422	501(C)(3)	5,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
GLOBE INTERNATIONAL MINISTRIES PO BOX 3040 PENSACOLA, FL 32516	00-0000000	501(C)(3)	10,000.	0.		HUMAN SERVICES	TO SUPPORT THE MINISTRY OF BARRON FREITAS
GREY BEARS, INC. 2710 CHANTICLEER AVENUE SANTA CRUZ, CA 95065	94-2298681	501(C)(3)	56,700.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
GROUNDWORKS COLLABORATIVE PO BOX 370 BRATTLEBORO, VT 05302	03-0267404	501(C)(3)	15,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		74-2000039 Page 1
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HABITAT FOR HUMANITY MONTEREY BAY 108 MAGNOLIA STREET SANTA CRUZ, CA 95062	77-0206356	501(C)(3)	6,408.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT PROGRAMS IN SANTA CRUZ COUNTY, GENERAL OPERATING SUPPORT
HAPPY VALLEY ELEMENTARY SCHOOL 3125 BRANCIFORTE DRIVE SANTA CRUZ, CA 95065	94-6002633	501(C)(3)	52,246.	0.		EDUCATION/YOUTH	TO SUPPORT CULTURAL AND ARTS PROGRAMS AND ACADEMIC PROGRAMS, GENERAL OPERATING SUPPORT
HAPPY VALLEY ELEMENTARY SCHOOL PARENT CLUB - 3125 BRANCIFORTE DR - SANTA CRUZ, CA 95065	31-1777497	501(C)(3)	8,500.	0.		EDUCATION/YOUTH	FOR GRASS IRRIGATION, GENERAL OPERATING SUPPORT
HAWAII COMMUNITY FOUNDATION 827 FORT STREET HONOLULU, HI 96813	99-0261283	501(C)(3)	16,500.	0.		COMMUNITY DEVELOPMENT	FOR THE MAUI STRONG FUND, KAUAI ALOHA ENDOWMENT FUND
HEALTH CARE FOUNDATION OF VENTURA COUNTY - 3291 LOMA VISTA ROAD - VENTURA, CA 92003	47-1535937	501(C)(3)	178,000.	0.		HEALTH	FOR INDIGENOUS MEDICAL INTERPRETATION PROGRAM TO PURCHASE EQUIPMENT FOR DIABETES CLINICS
HEALTH PROJECTS CENTER 9000 SOQUEL AVENUE SUITE 103 SANTA CRUZ, CA 95062	94-2713281	501(C)(3)	20,500.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
HIGH FIVES NONPROFIT FOUNDATION 10775 PIONEER TRAIL, #108 TRUCKEE, CA 96161	26-4275773	501(C)(3)	25,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES, CA 90012	95-4800735	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
HOMELESS GARDEN PROJECT PO BOX 617 SANTA CRUZ, CA 95061	77-0475165	501(C)(3)	13,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, PLAY SUPPORT

Page 1 Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV, assistance appraisal, other) HOMEWARD BOUND OF MARIN 1385 N HAMILTON PARKWAY TO SUPPORT ENDING VETERAN NOVATO, CA 94939 68-0011405 501(C)(3) 0. HUMAN SERVICES HOMELESSNESS 25,000 HOOVER INSTITUTION - STANFORD UNIVERSITY - 434 GALVEZ MALL. STANFORD UNIVERSITY - STANFORD, CA EDUCATION/YOUTH FOR GENERAL OPERATING 94-1156365 501(C)(3) 0. DEVELOPMENT SUPPORT 94305 130,000 HOPE CRISIS RESPONSE NETWORK PO BOX 6393 COMMUNITY SANTA ROSA, CA 95406 35-2147808 501(C)(3) 250,000 0. DEVELOPMENT FOR DISASTER SUPPORT HORSE WHISPERS 830 COLE ROAD FOR GENERAL OPERATING 88-4320339 501(C)(3) 0 ENVIRONMENT SUPPORT AROMAS, CA 95004 8,800 HOSPICE OF SANTA CRUZ COUNTY FOR GENERAL OPERATING 940 DISC DRIVE SUPPORT, PROGRAM SUPPORT, 94-2497618 501(C)(3) MATCHING GRANTS SCOTTS VALLEY, CA 95066 179,258, 0. HEALTH HOUSING MATTERS TO SUPPORT MOBILE SHOWER 115-B CORAL STREET SHUTTLE, GENERAL 77-0126783 501(C)(3) OPERATING SUPPORT SANTA CRUZ, CA 95060 102,620 0. HUMAN SERVICES HOUSING SANTA CRUZ COUNTY 132 VAN NESS AVENUE FOR GENERAL OPERATING SANTA CRUZ, CA 95060 47-4091853 501(C)(3) 11,000 0. HUMAN SERVICES SUPPORT INCOMM INCENTIVES 111 SW FIFTH AVE. #900 PORTLAND, OR 97204 00-0000000 501(C)(3) 1,004,156. 0. HUMAN SERVICES FOR DISASTER SUPPORT INSIGHT SANTA CRUZ FOR TEACHER HOUSING 740 FRONT STREET SUITE 240 SUPPORT, GENERAL EDUCATION/YOUTH SANTA CRUZ, CA 95060 77-0567516 501(C)(3) 0. DEVELOPMENT OPERATING SUPPORT 9 000.

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa		74-2000039 Page
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INSTITUTE FOR JUSTICE 901 N GLEBE RD, #900 ARLINGTON, VA 22203	52-1744337	501(C)(3)	7,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
INSTITUTE FOR SECURITY AND TECHNOLOGY - 5800 HARBORD DRIVE - OAKLAND, CA 94611	47-5677755	501(C)(3)	10,000.	0.		OTHER	FOR GENERAL OPERATING SUPPORT
INTERNATIONAL MENTAL HEALTH CONSULTING, INC - 602 TOWHEE LANE - CHESAPEAKE, VA 23323	82-2270159	501(C)(3)	75,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
INTERNATIONAL RESCUE COMMITTEE P.O. BOX 6068 ALBERT LEA, MN 56007	13-5660870	501(C)(3)	24,000.	0.		HUMAN SERVICES	FOR EMERGENCY AID, GENERAL OPERATING SUPPOR
INTERNATIONAL ROTARY FOUNDATION 1560 SHERMAN AVE EVANSTON, IL 60201	36-3245072	501(C)(3)	7,300.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT FOR LOCAL ROTARY
JACOB'S HEART CHILDREN'S CANCER SUPPORT SERVICES - 680 WEST BEACH STREET - WATSONVILLE, CA 95076	68-0413822	501(C)(3)	52,101.	0.		HUMAN SERVICES	TO SUPPORT EMERGING JEDI AWARDS, GENERAL OPERATIN SUPPORT, PROGRAM SUPPORT
JERRY LOYOLA FOUNDATION 12935 ROSE COURT WATSONVILLE, CA 95076	45-2160940	501(C)(3)	7,000.	0.		EDUCATION/YOUTH	FOR MATCHING FUNDS FOR BASIC NEEDS OF FAMILIES FACING CANCER
JEWEL THEATRE COMPANY PO BOX 1080 SANTA CRUZ, CA 95061	22-3916870	501(C)(3)	5,590.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
J. PAUL GETTY TRUST 1200 GETTY CENTER DRIVE LOS ANGELES, CA 90049	95-1790021	501(C)(3)	10,000.	0.		ARTS, HISTORY,	FOR PATRON PROGRAM

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JUNIOR ACHIEVEMENT WORLDWIDE							
745 ATLANTIC AVENUE						EDUCATION/YOUTH	FOR GENERAL OPERATING
BOSTON, MA 02111	27-3666259	501(C)(3)	15,000.	0.		DEVELOPMENT	SUPPORT
JUNIPERO SERRA HIGH SCHOOL							
451 WEST 20TH AVENUE						EDUCATION/YOUTH	FOR GENERAL SCHOLARSHIP
SAN MATEO, CA 94403	94-1156697	501(C)(3)	20,000.	0.		DEVELOPMENT	FUND
KALAMAZOO COLLEGE							
1200 ACADEMY STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
KALAMAZOO, MI 49006	38-1358014	501(C)(3)	100,000.	0.		DEVELOPMENT	SUPPORT
WARTER THERMATIONAL HELD							EOD DEDATE WORK
KARIMU INTERNATIONAL HELP FOUNDATION - 75260 VISTA CORONA -						EDUCATION/YOUTH	FOR REPAIR WORK CLASSROOMS AT UFANI
PALM DESERT, CA 92211	32-0227956	501(C)(3)	10,520.	0.		DEVELOPMENT	SCHOOL
		561(5)(5)	10,020.	•			
KIDPOWER TEENPOWER FULLPOWER							
PO BOX 1212						EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061	77-0226712	501(C)(3)	27,000.	0.		DEVELOPMENT	SUPPORT
KIDSTREAM							
3100 E. PONDEROSA DRIVE						EDUCATION/YOUTH	FOR CAPITAL CAMPAIGN,
CAMARILLO, CA 93010	81-3055601	501(C)(3)	105,000.	0.		DEVELOPMENT	WINTER WISHES BASKETS
KQED - NORTHERN CALIFORNIA PUBLIC							
BROADCASTING, INC - 2601 MARIPOSA						ARTS, HISTORY,	FOR GENERAL OPERATING
STREET - SAN FRANCISCO, CA 94110	94-1241309	501(C)(3)	6,750.	0.		AND CULTURE	SUPPORT
			1	••			
KSQD/NATURAL BRIDGES MEDIA							
PO BOX 5551						ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ, CA 95063	82-4627723	501(C)(3)	6,550.	0.		AND CULTURE	SUPPORT
							FOR FALL CONCERT
KUUMBWA JAZZ CENTER							SPONSORSHIP, JAZZ
320 CEDAR STREET, SUITE 2	F1 0150050	E01/G \/3\	20.015	_		ARTS, HISTORY,	EDUCATION FUND, GENERAL
SANTA CRUZ, CA 95060	51-0159252	bot(G)(3)	30,016.	0.		AND CULTURE	OPERATING SUPPORT

Schedule I (Form 990) COUNTY					- I. I. I /F		74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAND TRUST OF SANTA CRUZ COUNTY 617 WATER STREET SANTA CRUZ, CA 95060	94-2431856	501(C)(3)	1,202,404.	0.		ENVIRONMENT	TO SUPPORT STRATEGIC PLAN, GENERAL OPERATING SUPPORT, CONSERVATION CIRCLE
DAVIN CROZ, CH 35000	34 2431030	301(6)(3)	1,202,404.	· ·		INVIRONIMI I	CIRCUI
LIFE LAB SCIENCE PROGRAM 1156 HIGH STREET SANTA CRUZ, CA 95064	94-2778848	501(C)(3)	47,250.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR CAPITAL CAMPAIGN, PROGRAM AND GENERAL OPERATING SUPPORT
LIVE LIKE COCO FOUNDATION 220 CENTER AVENUE APTOS, CA 95003	81-1667219	501(C)(3)	7,500.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
LIVE ON GOVOOL DIGEDIGE							
LIVE OAK SCHOOL DISTRICT 984-1BOSTWICK LANE SANTA CRUZ, CA 95062	00-0000000	501(C)(3)	8,500.	0.		EDUCATION/YOUTH DEVELOPMENT	TO FUND WASHINGTON DC TRIP SCHOLARSHIPS
LOMA PRIETA JOINT UNION SCHOOL DISTRICT - 23800 SUMMIT ROAD - LOS GATOS, CA 95033	00-0000000	501(C)(3)	9,928.	0.		EDUCATION/YOUTH DEVELOPMENT	TO ENABLE RICH LEARNING EXPERIENCES AND ACADEMIC EXCELLENCE IN LOMA PRIETA
LOS ALTOS COMMUNITY FOUNDATION 183 HILLVIEW AVENUE LOS ALTOS HILLS, CA 94022	77-0273721	501(C)(3)	7,500.	0.		EDUCATION/YOUTH	FOR SCHOLARSHIP PROGRAM SUPPORT
LOS ANGELES BALLET 11755 EXPOSITION BLVD LOS ANGELES, CA 90064	20-1819852	501(C)(3)	11,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
LOS ANGELES COUNTY MUSEUM OF ART (LACMA) - 5908 WILSHIRE BLVD - LOS ANGELES, CA 90036	95-2264067	501(C)(3)	21,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
LOS ANGELES LGBT CENTER 1118 N. MCCADDEN PLACE LOS ANGELES, CA 90038	95-3567895	501(C)(3)	10,000.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		4-2000039 Pagi
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARGARITAVILLE CAPITOLA						CONGRETATION	
231 ESPLANADE CAPITOLA, CA 95010	00-0000000	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
MESSINA COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL, MA 02467	04-2103545	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	FOR DEAN'S FUND FOR STRATEGIC INITIATIVES
MONARCH SERVICES 233 EAST LAKE AVENUE WATSONVILLE, CA 95076	94-2462783	501(C)(3)	51,175.	0.		HUMAN SERVICES	TO SUPPORT THE MISSION AND PROGRAMS, GENERAL OPERATING SUPPORT, PARTY WITH A PURPOSE
MONKEY WRENCH STUDIO INC DBA DAVENPORT ROADHOUSE - 366 COLLADO DRIVE - SCOTTS VALLEY, CA 95066	00-0000000	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624	81-0369262	501(C)(3)	25,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
MONTEREY BAY AQUARIUM FOUNDATION 886 CANNERY ROW MONTEREY, CA 93940	94-2487469	501(C)(3)	6,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
MONTEREY BAY FISHERIES TRUST 101 COOPER STREET SANTA CRUZ, CA 95060	47-1978379	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR SEAFOOD DISTRIBUTION THROUGH SECOND HARVEST
MONTEREY BAY SALMON AND TROUT PROJECT - 101 COOPER STREET UNIT 246 - SANTA CRUZ, CA 95060	94-2401308	501(C)(3)	98,076.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, AGENCY PAYOUT REQUEST
MORELAND NOTRE DAME SCHOOL 133 BRENNAN STREET WATSONVILLE, CA 95076	94-1347045	501(C)(3)	13,704.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, SCHOLARSHIP ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa		74-2000039 Page 1
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MOUNTAINS 2 SEA 1245 EUREKA CANYON ROAD WATSONVILLE, CA 95076	83-0697842	501(C)(3)	17,000.	0.		EDUCATION/YOUTH	TO SUPPORT EMERGING JEDI AWARDS, GENERAL OPERATING SUPPORT
MOUNT MADONNA CENTER/ADVAITA HANUMAN FELLOWSHIP - 445 SUMMIT ROAD - WATSONVILLE, CA 95076	51-0174679	501(C)(3)	15,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
MOUNT MADONNA SCHOOL 491 SUMMIT ROAD WATSONVILLE, CA 95076	94-2693186	501(C)(3)	25,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
MUSEUM OF ART AND HISTORY AT THE MCPHERSON CENTER (SANTA CRUZ MUSEUM OF ART AND - 705 FRONT STREET - SANTA CRUZ, CA 95060	94-2718861	501(C)(3)	262,852.	0.		ARTS, HISTORY,	FOR HISTORY AWARDS, RYDELL EXHIBITION, LONDON NELSON LEGACY INITIATIVE, SEWING SEEDS
MUSIC ACADEMY OF THE WEST 1070 FAIRWAY ROAD SANTA BARBARA, CA 93108	95-1525814	501(C)(3)	25,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
MUSIC IN MAY P.O. BOX 2451 SANTA CRUZ, CA 95063	81-4148441	501(C)(3)	12,500.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
MY THAI BEACH 207 ESPLANADE CAPITOLA, CA 95010	00-0000000	501(C)(3)	10,500.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
NAMI SANTA CRUZ COUNTY 35 PENNY LANE, SUITE 2 WATSONVILLE, CA 95076	77-0002878	501(C)(3)	47,300.	0.		HEALTH	FOR SPRING CAMPAIGN, MATCHING FUNDS, GENERAL OPERATING SUPPORT, HOPE FOR YOUTH CAMPAIGN
NATIONAL AUDUBON SOCIETY/AUDUBON CALIFORNIA SOCIETY - 1901 HARRISON STREET, SUITE 1450 - OAKLAND, CA 94612	13-1624102	501(C)(3)	23,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

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NATIONAL MUSEUM OF WOMEN IN THE ARTS - PO BOX 120 - MERRIFIELD, VA 22116	52-1238810	501(C)(3)	50,000.	0.		ARTS, HISTORY,	TO SUPPORT SPACE TO SOAR
NATIONAL PARK FOUNDATION 1500 K STREET NW, SUITE 700 WASHINGTON, DC 20005	52-1086761	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING
NATIVIDAD MEDICAL FOUNDATION PO BOX 4427 SALINAS, CA 93912	77-0194989	501(C)(3)	10,000.	0.		ENVIRONMENT	TO SPONSOR AGRICULTURAL LEADERSHIP COUNCIL (TALC)
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH ST NEW YORK, NY 10011	13-2654926	501(C)(3)	51,298.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	31,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
NEW WAY HOMES 1040 MYSTERY SPOT ROAD SANTA CRUZ, CA 95065	47-4091853	501(C)(3)	21,250.	0.		HUMAN SERVICES	FOR HOUSING SANTA CRUZ
NEXT GENERATION SCHOLARS 1018 E STREET SAN RAFAEL, CA 94901	26-1110584	501(C)(3)	52,000.	0.		EDUCATION/YOUTH	FOR KICKBALL SHOWDOWN, MATCHING FUNDS
NOVA UKRAINE 963 MEARS CT STANFORD, CA 94305	46-5335435	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
NUCLEAR THREAT INITIATIVE 1776 EYE STREET, N.W, SUITE 600 WASHINGTON, DC 20006	52-2289435	501(C)(3)	30,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		74-2000033 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OASIS IN BAJA INC 817 GEORGEBORO COURT BRENTWOOD, TN 37027	84-3339981	501(C)(3)	49,400.	0.		HUMAN SERVICES	FOR US/BAJA/CANADA GROWERS CONFERENCE SUPPORT
O'NEILL SEA ODYSSEY 2222 EAST CLIFF DRIVE SUITE 222 SANTA CRUZ, CA 95062	77-0464784	501(C)(3)	56,973.	0.		ENVIRONMENT	TO SUPPORT THE MISSION AND ACTIVITIES OF O'NEILL SEA ODYSSEY, GENERAL OPERATING SUPPORT
OUTREACH FOR NAZARETH ORPHANAGE 6797 ENCELIA PL CARLSBAD, CA 92011	32-0431991	501(C)(3)	5,100.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
OVEREATERS ANONYMOUS PO BOX 44727 RIO RANCHO, NM 87174	23-7016806	501(C)(3)	6,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
OXFAM AMERICA 226 CAUSEWAY ST, 5TH FLOOR BOSTON, MA 02114	23-7069110	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
OXNARD WAVE FOOTBALL CLUB 1221 MASTHEAD DRIVE OXNARD, CA 93035	88-1719854	501(C)(3)	27,370.	0.		EDUCATION/YOUTH	FOR BIGGEST BANDWAGON EVENT, GENERAL OPERATING SUPPORT, MATCHING FUNDS
PACHAMAMA ALLIANCE P.O. BOX 29191 SAN FRANCISCO, CA 94129	94-3249793	501(C)(3)	11,000.	0.		ENVIRONMENT	FOR AMAZON SACRED HEADWATERS INITIATIVE, GENERAL OPERATING SUPPORT
PACIFIC COLLEGIATE SCHOOL 3004 MISSION STREET SANTA CRUZ, CA 95060	77-0485136	501(C)(3)	11,875.	0.		EDUCATION/YOUTH	FOR QIA (QUEER INTERSECTIONAL ALLIANCE) CLUB, GENERAL OPERATING SUPPORT
PACIFIC ENVIRONMENTAL EDUCATION CENTER - PO BOX 73 - FORT BRAGG, CA 95437	94-2411962	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAJARO VALLEY ARTS							
37 SUDDEN STREET						ARTS, HISTORY,	FOR GENERAL OPERATING
WATSONVILLE, CA 95076	77-0107201	501/C \/3\	11,500.	0.		AND CULTURE	SUPPORT, PROGRAM SUPPORT
WAISONVILLE, CA 93070	77-0107201	501(0 /(3/	11,300.	0.		AND COLIORE	FOR GENERAL OPERATING
PAJARO VALLEY HISTORICAL							SUPPORT, SUPPORT
ASSOCIATION - PO BOX 623 -						ARTS, HISTORY,	MAINTENANCE OF THE
WATSONVILLE, CA 95077	94-1663161	501(C)(3)	24,835.	0.		AND CULTURE	HISTORIC BOCKIUS-ORR
WAISONVILLE, CA 93077	J4 1003101	501(6 /(5/	24,033.	· ·		AND COLIONS	FOR GENERAL OPERATING
PAJARO VALLEY LOAVES AND FISHES							SUPPORT, EMPTY BOWL
150 SECOND STREET							FUNDRAISING, MATCHING
WATSONVILLE, CA 95076	77-0319247	501(C)(3)	233,249.	0.		HUMAN SERVICES	FUNDS
PAJARO VALLEY PREVENTION AND	77 0313247	501(6 /(5/	255,245.	· ·		HOMAN BERVICES	FOR SOUP FOR A CAUSE
STUDENT ASSISTANCE, INC 335							EVENT, GENERAL OPERATING
EAST LAKE AVENUE - WATSONVILLE, CA						EDUCATION/YOUTH	SUPPORT, ANNUAL HEROES IN
95076 WITSONVILLE, CH	77-0269322	501 (C) (3)	22,750.	0.		DEVELOPMENT	PREVENTION
33070	77 0203322	301(0)(3)	22,750.	· ·		DHVHHOIMHNI	I KEVENTION
PAJARO VALLEY SHELTER SERVICES							FOR MOTHERS DAY RUN,
115 BRENNAN STREET							TRANSITIONAL STUDENT
WATSONVILLE, CA 95076	94-1393418	501(C)(3)	116,605.	0.		HUMAN SERVICES	HOUSING, PROGRAM SUPPORT
	71 1070110	002(0)(0)	110,000.	•			FOR RAISING A READER,
PAJARO VALLEY UNIFIED SCHOOL							AGENCY PAYOUT REQUEST TO
DISTRICT - 294 GREEN VALLEY ROAD -						EDUCATION/YOUTH	TEACHING KITCHEN/GARDEN
WATSONVILLE, CA 95076	00-000000	501(C)(3)	540,210.	0.		DEVELOPMENT	LEARNING CENTER
		561(5)(5)	010,220.	•			
PAJARO VALLEY YOUTH SOCCER CLUB							
PO BOX 3242						EDUCATION/YOUTH	
FREEDOM, CA 95019	77-0420362	501(C)(3)	22,214.	0.		DEVELOPMENT	FOR AGENCY REQUEST PAYOUT
,							
PALM BEACH ATLANTIC UNIVERSITY INC							
901 S FLAGLER DRIVE, P.O. BOX 24708						EDUCATION/YOUTH	FOR GENERAL OPERATING
WEST PALM BEACH, FL 33416	59-1092732	501(C)(3)	13,000.	0.		DEVELOPMENT	SUPPORT
,							
PALM BEACH DAY ACADEMY INC							
241 SEAVIEW AVE						EDUCATION/YOUTH	FOR GENERAL OPERATING
PALM BEACH, FL 33480	59-0873834	501(C)(3)	7,000.	0.		DEVELOPMENT	SUPPORT
			1 ,,,,,,,,,	·	1		1

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PARADISE BEACH GRILLE							
215 ESPLANADE						COMMUNITY	
CAPITOLA, CA 95010	00-000000	501(C)(3)	10,000.	0.		DEVELOPMENT	FOR DISASTER SUPPORT
PEACE DEVELOPMENT FUND							
PO BOX 1280						COMMUNITY	FOR GENERAL OPERATING
AMHERST, MA 01004	04-2738794	501(C)(3)	6,000.	0.		DEVELOPMENT	SUPPORT
PENINSULA OPEN SPACE TRUST							
222 HIGH STREET							FOR GENERAL OPERATING
PALO ALTO, CA 94301	94-2392007	501(C)(3)	6,250.	0.		ENVIRONMENT	SUPPORT
PLANNED PARENTHOOD FEDERATION OF							
AMERICA - 123 WILLIAM STREET, 10TH							FOR GENERAL OPERATING
FLOOR - NEW YORK, NY 10038	13-1644147	501(C)(3)	77,572.	0.		HEALTH	SUPPORT
PLANNED PARENTHOOD ILLINOIS							
P.O. BOX 735332							FOR GENERAL OPERATING
CHICAGO, IL 60673	36-2170901	501(C)(3)	13,275.	0.		HEALTH	SUPPORT
			·				
PLANNED PARENTHOOD MAR MONTE							
1691 THE ALAMEDA				_			FOR GENERAL OPERATING
SAN JOSE, CA 95126	94-1583439	501(C)(3)	36,479.	0.		HEALTH	SUPPORT
POSITIVE DISCIPLINE COMMUNITY							
RESOURCES - PO BOX 5365 - SANTA						EDUCATION/YOUTH	FOR GENERAL OPERATING
CRUZ, CA 96063	27-1364795	501(C)(3)	42,000.	0.		DEVELOPMENT	SUPPORT
PROGRAMA ADOPTE UN TALENTO A.C.							TO SUPPORT SCIENCE CL
(PAUTA) - MEXICO CITY, CDMX,						EDUCATION/YOUTH	IN HUAMANTLA ON THE
MEXICO - MEXICO		501(C)(3)	47,848.	0.		DEVELOPMENT	MEXICAN STATE OF TLAX
QUEER YOUTH TASK FORCE							
PO BOX 8280						EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061	77-0212967	E01/G \/3\	10,000.	0.		DEVELOPMENT	SUPPORT

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RANCHO CIELO YOUTH CAMPUS							
P.O. BOX 6948						EDUCATION/YOUTH	FOR GENERAL OPERATING
SALINAS, CA 93912	77-0555859	501(C)(3)	27,500.	0.		DEVELOPMENT	SUPPORT
RANCHO MIRAGE PUBLIC LIBRARY							
FOUNDATION - 71-100 HWY 111 -						EDUCATION/YOUTH	FOR SUMMER READING
RANCHO MIRAGE, CA 92270	27-3559025	501(C)(3)	10,000.	0.		DEVELOPMENT	PROGRAM
RANK THE VOTE							
872 MASSACHUSETTS AVENUE, SUITE 1-6						COMMUNITY	FOR GENERAL OPERATING
CAMBRIDGE, MA 02139	84-4007566	501(C)(3)	250,000.	0.		DEVELOPMENT	SUPPORT
RESOURCE CONSERVATION DISTRICT OF			,				
SANTA CRUZ COUNTY (RCD) - 820 BAY							
AVENUE, SUITE 136 - CAPITOLA, CA						COMMUNITY	FOR COORDINATION OF STOR
95010	94-6000534	501(C)(3)	103,000.	0.		DEVELOPMENT	RESOURCES
RICE UNIVERSITY							
6100 MAIN STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
HOUSTON, TX 77005	74-1109620	501(C)(3)	180,000.	0.		DEVELOPMENT	SUPPORT
ROAD RUNNERS OF AMERICA-TAMPA BAY							
RUNNERS - PO BOX 290372 - TAMPA							FOR GENERAL OPERATING
BAY, FL 33687	59-2130553	501(C)(3)	17,100.	0.		HEALTH	SUPPORT
,,		,,,,,					FOR GENERAL OPERATING AN
ROCKY MOUNTAIN BIOLOGICAL							GRADUATE FELLOWSHIP IN
LABORATORY - PO BOX 519 - CRESTED							THE ECOLOGY AND EVOLUTIO
BUTTE, CO 81224	84-6050523	501(C)(3)	61,707.	0.		ENVIRONMENT	OF PLANTS
			,				FOR UKRAINE GENERATOR
ROTARY CLUB OF SANTA CRUZ SUNRISE							PROJECT, BIKE RIDE
FOUNDATION - PO BOX 7026 - SANTA						COMMUNITY	SPONSORSHIP, POLAR
CRUZ, CA 95061	81-0619851	501(C)(3)	8,100.	0.		DEVELOPMENT	PLUNGE, PROGRAM SUPPORT
							HOD GENERAL OPERATIVE
SALUD PARA LA GENTE							FOR GENERAL OPERATING
195 AVIATION WAY, SUITE 200	04 2705747	E01/G \/3\	24.750	_		HIMAN GERVIORS	SUPPORT AND MEDICAL
WATSONVILLE, CA 95076	94-2705747	DOT(C)(3)	24,750.	0.		HUMAN SERVICES	SUPPLIES

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	rt II.)	
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SALUD Y CARINO							
1723 GREY SEAL RD						EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95062	46-1924115	501(C)(3)	35,000.	0.		DEVELOPMENT	SUPPORT
SALVATION ARMY SANTA CRUZ CORPS							
721 LAUREL STREET							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	94-1156347	501(C)(3)	73,091.	0.		HUMAN SERVICES	SUPPORT
SALVATION ARMY WATSONVILLE							
214 UNION STREET							FOR GENERAL OPERATING
WATSONVILLE, CA 95076	95-3082788	501(C)(3)	35,965.	0.		HUMAN SERVICES	SUPPORT
SAN LORENZO VALLEY HISTORICAL							
SOCIETY - PO BOX 576 - BOULDER						ARTS, HISTORY,	FOR GENERAL OPERATING
CREEK, CA 95006	94-3240597	501(C)(3)	5,096.	0.		AND CULTURE	SUPPORT
			, -	-			FOR STUDENT SUPPORT, POOL
SAN LORENZO VALLEY SCHOOL DISTRICT							MATERIALS, AND OLYMPIA
325 MARION AVENUE							WATERSHED HABITAT
BEN LOMOND, CA 95005	00-0000000	501(C)(3)	9,659.	0.		HEALTH	MANAGEMENT PROGRAM
							TO SUPPORT ANNUAL HABITAT
SAN LORENZO VALLEY WATER DISTRICT							MANAGEMENT AND MONITORING
13060 HIGHWAY 9							WITHIN THE OLYMPIA
BOULDER CREEK, CA 95006	00-000000	501(C)(3)	11,299.	0.		ENVIRONMENT	WATERSHED HABITAT
							FOR ATHLETIC SCHOLARSHIP
SANTA CLARA UNIVERSITY							MARYGRACE COLBY
500 EL CAMINO REAL						EDUCATION/YOUTH	SCHOLARSHIP, AND SANTA
SANTA CLARA, CA 95053	94-1156617	501(C)(3)	81,000.	0.		DEVELOPMENT	CLARA FUND
SANTA CRUZ ART LEAGUE							FOR GENERAL OPERATING
526 BROADWAY						ARTS, HISTORY,	SUPPORT AND TO SUPPORT
SANTA CRUZ, CA 95060	94-1561380	501(C)(3)	11,800.	0.		AND CULTURE	SCHOLARSHIP FUNDS
SANTA CRUZ BLACK							
612 OCEAN STREET						COMMUNITY	FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	88-1413455	501(C)(3)	6,000.	0.		DEVELOPMENT	SUPPORT

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		74-2000039 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA CRUZ CITY PARKS AND RECREATION DEPARTMENT - 323 CHURCH STREET - SANTA CRUZ, CA 95060	94-6000427	501(C)(3)	150,000.	0.		ENVIRONMENT	TO SUPPORT INASIVE PLANT REMOVAL AT POGONIP AND MOORE CREEK PRESERVE
SANTA CRUZ COMMUNITY HEALTH 125 WATER STREET A2 SANTA CRUZ, CA 95060	23-7428303	501(C)(3)	94,610.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT AND PROGRAM SUPPORT
SANTA CRUZ COUNTY ANIMAL SHELTER 2200 7TH AVENUE SANTA CRUZ, CA 95062	90-0039494	501(C)(3)	7,787.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ COUNTY BLACK HEALTH MATTERS INITIATIVE - 612 OCEAN ST - SANTA CRUZ, CA 95060	90-0826298	501(C)(3)	15,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ COUNTY FAIRGROUNDS FOUNDATION - PO BOX 1806 - FREEDOM, CA 95019	20-0385058	501(C)(3)	9,183.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING
SANTA CRUZ HILLEL 801 HIGH STREET SANTA CRUZ, CA 95060	77-0427628	501(C)(3)	7,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ LOCAL 877 CEDAR STREET, SUITE 150 SANTA CRUZ, CA 95060	37-2064285	501(C)(3)	152,765.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT AND SPANISH LANGUAGE PROGRAMMING
SANTA CRUZ MONTESSORI SCHOOL 6230 SOQUEL DRIVE APTOS, CA 95003	94-1573507	501(C)(3)	8,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT AND SCHOLARSHIP FUND
SANTA CRUZ MOUNTAINS TRAIL STEWARDSHIP - PO BOX 331 - SANTA CRUZ, CA 95061	77-0457425	501(C)(3)	19,690.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT AND TIMELESS TRAILS

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990) Pa		74-2808039 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA CRUZ MUSEUM OF NATURAL HISTORY - 1305 EAST CLIFF DRIVE - SANTA CRUZ, CA 95062	94-2427733	501(C)(3)	49,500.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ ROTARY FOUNDATION PO BOX 497 SANTA CRUZ, CA 95061	33-1125601	501(C)(3)	31,000.	0.		COMMUNITY DEVELOPMENT	FOR GREATEST NEEDS AND SCHOLARSHIP FUNDS
SANTA CRUZ SHAKESPEARE 549 UPPER PARK ROAD SANTA CRUZ, CA 95065	46-4635444	501(C)(3)	175,420.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ SPCA 2601 CHANTICLEER AVENUE SANTA CRUZ, CA 95065	94-6171565	501(C)(3)	36,992.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT AND SENIOR FRIENDS PROGRAMMING
SANTA CRUZ SYMPHONY 307 CHURCH STREET SANTA CRUZ, CA 95060	94-2373284	501(C)(3)	14,063.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT AND SCHOOL PROGRAMS
SANTA CRUZ TODDLER CARE CENTER 1738 16TH AVENUE SANTA CRUZ, CA 95062	94-2457539	501(C)(3)	16,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ WALDORF SCHOOL 2190 EMPIRE GRADE SANTA CRUZ, CA 95060	00-0000000	501(C)(3)	110,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT AND CAPITAL CAMPAIGN
SANTA CRUZ WELCOMING NETWORK 311 DARWIN STREET SANTA CRUZ, CA 95060	31-1748056	501(c)(3)	8,170.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
SAVE OUR SHORES 345 LAKE AVENUE, SUITE A SANTA CRUZ, CA 95062	94-2745941	501(C)(3)	27,253.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	rt II.) T	1
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SAVE THE CHILDREN FEDERATION INC 501 KINGS HIGHWAY EAST, SUITE 400 FAIRFIELD, CT 06825	06-0726487	501(C)(3)	5,860.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
SAVE THE MUSIC FOUNDATION P.O. BOX 2096 NEW YORK, NY 10108	13-6089816	501(C)(3)	25,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
SAVE THE REDWOODS LEAGUE 111 SUTTER STREET, 11TH FLOOR SAN FRANCISCO, CA 94104	94-0843915	501(C)(3)	10,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY - 800 OHLONE PARKWAY - WATSONVILLE, CA 95076	77-0326685	501(C)(3)	646,625.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND DISASTER SUPPORT PROGRAMS
SECONDMUSE 401 ASH ST STE B LAKE OSWEGO, OR 97034	84-2181021	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR THE REGENERATIVE MONTEREY PROJECT
SEMPERVIRENS FUND 951 MARINERS ISLAND BLVD SUITE 300 SAN MATEO, CA 94404	94-2155097	501(C)(3)	6,750.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
SENDEROS 840 NORTH BRANCIFORTE AVE SANTA CRUZ, CA 95062	80-0893412	501(C)(3)	81,500.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT AND COVID-19 COMMUNITY CONFIDENCE PROGRAM
SENIOR LEGAL SERVICES OF SANTA CRUZ AND SAN BENITO COUNTIES - 317 SOQUEL AVENUE - SANTA CRUZ, CA 95062	94-2280258		26,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
SENIOR NETWORK SERVICES 1777-A CAPITOLA ROAD SANTA CRUZ, CA 95062	94-2259716	501(C)(3)	30,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.)	1
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SEQUOIA HIGH SCHOOL							
1201 BREWSTER AVE						EDUCATION/YOUTH	FOR HOLMQUIST FAMILY
REDWOOD CITY, CA 94062	80-0366150	501(C)(3)	20,000.	0.		DEVELOPMENT	SCHOLARSHIP
SHADOWBROOK RESTAURANT							
PO BOX 65						COMMUNITY	
CAPITOLA, CA 95010	00-0000000	501(C)(3)	10,000.	0.		DEVELOPMENT	FOR DISASTER SUPPORT
SIENA HOUSE							FOR GENERAL OPERATING
108 HIGH STREET							SUPPORT, FUNDRAISER,
SANTA CRUZ, CA 95060	77-0518866	501(C)(3)	24,361.	0.		HEALTH	YOUTH SERVICES
SOCIETY OF ST. VINCENT DE PAUL-		, , , , ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
COUNCIL OF SANTA CRUZ COUNTY -							
1146 SOQUEL AVE, #4103 - SANTA							FOR GENERAL OPERATING
CRUZ, CA 95062	94-2500194	501(C)(3)	10,000.	0.		HUMAN SERVICES	SUPPORT
			,				FOR QSA CLUB, FOOTBALL
SOQUEL HIGH SCHOOL							TEAM QUALIFYING FOR THE
401 OLD SAN JOSE ROAD						EDUCATION/YOUTH	CALIFORNIA STATE
SOQUEL, CA 95073	00-000000	501(C)(3)	10,875.	0.		DEVELOPMENT	CHAMPIONSHIP
·							FOR BUCK/CARDINAL FUND,
STANFORD UNIVERSITY							UNDERGRADUATE ED, SCHOOI
PO BOX 20466						EDUCATION/YOUTH	OF EDUCATION, SPORTS
STANFORD, CA 94309	94-1156365	501(C)(3)	10,000.	0.		DEVELOPMENT	MEDICINE FUND
STANFORD UNIVERSITY-SCHOOL OF							
ENGINEERING - PO BOX 20466 -						EDUCATION/YOUTH	FOR GENERAL OPERATING
STANFORD, CA 94309	94-1156365	501(C)(3)	20,000.	0.		DEVELOPMENT	SUPPORT
Elimions, on 51505	71 1130303	301(0)(3)	20,000.	••		DEVELOTIENT.	Dell'ent
ST. ANTHONY FOUNDATION							
150 GOLDEN GATE AVENUE							FOR GENERAL OPERATING
SAN FRANCISCO, CA 94102	94-1513140	501(C)(3)	25,488.	0.		HUMAN SERVICES	SUPPORT
ST. FRANCIS HIGH SCHOOL SALESIAN	+		25,200.	•			
COLLEGE PREPARATORY - 2400 EAST							
LAKE AVENUE - WATSONVILLE, CA						EDUCATION/YOUTH	FOR BURGUNDY & GRAY GALA
95076	77-0553474	501(C)(3)	20,000.	0.		DEVELOPMENT	VISION CAMPAIGN

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
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ST. FRANCIS SOUP KITCHEN							
205 MORA STREET							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	94-2880883	501(C)(3)	11,250.	0.		HUMAN SERVICES	SUPPORT
SUSTAINABLE CONSERVATION							FOR SOIL HEALTH AND
98 BATTERY ST, SUITE 302							GROUNDWATER QUALITY
SAN FRANCISCO, CA 94111	94-3232437	501(C)(3)	65,000.	0.		ENVIRONMENT	COLLABORATIVE PROJECT
SUTTER CARE AT HOME - SANTA CRUZ			,				TO SUPPORT THE MISSION
(HOME HEALTH)/VISITING NURSE							AND ACTIVITIES OF
ASSOCIATION OF SAN - PO BOX 160045							VISITING NURSE
- SACRAMENTO, CA 95816	94-1622036	501(C)(3)	12,673.	0.		HEALTH	ASSOCIATION OF SANTA CRUZ
TAHOE EXPEDITION ACADEMY INC							
8651 SPECKLED AVENUE, BOX 1272	05 5250554	501/6 \/2\	50,000	•		EDUCATION/YOUTH	
KINGS BEACH, CA 96143	27-5379571	501(C)(3)	50,000.	0.		DEVELOPMENT	FOR SCHOLARSHIPS
TAHOE TRUCKEE COMMUNITY FOUNDATION							FOR DONOR PARTY
PO BOX 366						COMMUNITY	CHARITABLE FUND,
TRUCKEE, CA 96160	68-0416404	501(C)(3)	128,000.	0.		DEVELOPMENT	SCHOLARSHIPS
TANNERY WORLD DANCE & CULTURAL							
CENTER - 1060 RIVER ST, #111 -						ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	90-0826298	501(C)(3)	45,000.	0.		AND CULTURE	SUPPORT
TEEN KITCHEN PROJECT							FOR NEW KITCHEN
PO BOX 1853							EQUIPMENT, GENERAL
SOQUEL, CA 95073	27-0524692	501(C)(3)	47,000.	0.		HUMAN SERVICES	OPERATING SUPPORT
			17,550.	•			TO SUPPORT HOME SWEET
TEMPLE BETH EL JEWISH COMMUNITY							HOME, RABBI PAULA FUND,
CENTER - 3055 PORTER GULCH ROAD -						COMMUNITY	CEMETERY FUND, GENERAL
APTOS, CA 95003	94-6139655	501(C)(3)	55,209.	0.		DEVELOPMENT	OPERATING/PROGRAMS
THE 418 PROJECT						,	FOR MATCHING FUNDS,
155 SOUTH RIVER STREET	EE 022552	501/6 \/2\	0.60 0.10	_		ARTS, HISTORY,	CAPITAL CAMPAIGN,
SANTA CRUZ, CA 95060	77-0335796	pn1(C)(3)	269,012.	0.		AND CULTURE	GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	T
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THEATREWORKS SILICON VALLEY PO BOX 50458 PALO ALTO, CA 94303	94-2831245	501(C)(3)	30,000.	0.		ARTS, HISTORY,	FOR THE SAVE THEATREWORKS
THE BERKELEY BABY BOOK PROJECT PO BOX 8213 BERKELEY, CA 94707	46-1358633	501(C)(3)	7,234.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
THE CLIMATE CENTER 1275 - 4TH STREET, #191 SANTA ROSA, CA 95404	45-0485495	501(C)(3)	6,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
THE COASTSIDE JEWISH COMMUNITY PO BOX 1729 EL GRANADA, CA 94018	94-3307213	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
THE GIVING BACK FUND 500 COMMERCIAL STREET, SUITE 4R BOSTON, MA 02109	04-3367888	501(C)(3)	7,000.	0.		COMMUNITY DEVELOPMENT	FOR THE WORK TO OWN FUND, JTA FOUNDATION SCHOLARSHIP FUND
THE INDEPENDENT INSTITUTE 100 SWAN WAY OAKLAND, CA 94621	94-3008370	501(C)(3)	7,500.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
THE SAFINA CENTER AT STONY BROOK UNIVERSITY - 80 NORTH COUNTRY RD - SETAUKET, NY 11733	61-1406022	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
THE SAND BAR CAPITOLA 211 ESPLANADE CAPITOLA, CA 95010	00-000000	501(C)(3)	10,500.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
THE SANTA CRUZ HUB FOR SUSTAINABLE LIVING - 703 PACIFIC AVE - SANTA CRUZ, CA 95060	31-1748056	501(C)(3)	11,250.	0.		ENVIRONMENT	FOR SANTA CRUZ WELCOMING NETWORK

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THE TECH INTERACTIVE (FORMERLY							
KNOWN AS THE TECH MUSEUM OF							
INNOVATION) - 201 SOUTH MARKET						ARTS, HISTORY,	FOR GENERAL OPERATING
STREET - SAN JOSE, CA 95113	94-2864660	501(C)(3)	12,000.	0.		AND CULTURE	SUPPORT
THE TRUSTEES OF RESERVATIONS							
200 HIGH STREET							TO SUPPORT NAUMKEAG
BOSTON, MA 02110	04-2105780	501(C)(3)	50,000.	0.		ENVIRONMENT	WOODLAND WALK
THE TRUST FOR CONSERVATION							
INNOVATION DBA MULTIPLIER - 548							
MARKET ST, PMB 81178 - SAN							FOR KITCHEN TABLE
FRANCISCO, CA 94104	91-2166435	501(C)(3)	33,000.	0.		HUMAN SERVICES	ADVISORS
THE UC HASTINGS FOUNDATION							TO SUPPORT THE JUDGE
200 MCALLISTER STREET							
	23-7135898	501/C \/3\	30,406.	0.		HUMAN SERVICES	ROBERT H. SCHNACKE AWARD PROGRAM
SAN FRANCISCO, CA 94102	23-7133696	301(C)(3)	30,406.	0.		HUMAN SERVICES	PROGRAM
TIDES CENTER							FOR THE HEALTHY DEMOCRACY
P.O. BOX 889385							FUND, CENTER FOR GENETIC
LOS ANGELES, CA 90088	94-3213100	501(C)(3)	16,600.	0.		ENVIRONMENT	AND SOCIETY PROJECT
TIPES POINTATION							
TIDES FOUNDATION 1012 TORNEY AVE						COMMUNITY	FOR THE HEALTHY DEMOCRACY
	51-0198509	E01/G \/2\	6,000.	0.		DEVELOPMENT	FUND
SAN FRANCISCO, CA 94219	31-0198309	301(C)(3)	8,000.	0.		DEVELOPMENT	FOND
TRUCKEE TRAILS FOUNDATION							
PO BOX 1751							FOR NEW TRAIL ENGINEER
TRUCKEE, CA 96106	01-0601303	501(C)(3)	42,500.	0.		ENVIRONMENT	POSITION, MATCHING FUNDS
MDUCH FOR DURING LAND							TO CUIDODE THE NODELLEDN
TRUST FOR PUBLIC LAND 23 GEARY STREET SUITE 1000							TO SUPPORT THE NORTHERN
	23-7222333	501/C \/3\	35,000.	0.		ENVIRONMENT	ROCKIES PROGRAM, GENERAL OPERATING SUPPORT
SAN FRANCISCO, CA 94108	23-1222333	201(C)(3)	35,000.	0.		EN A T KONMEN.I.	OPERATING SUPPORT
TUOLUMNE RIVER TRUST							
PO BOX 3727							FOR GENERAL OPERATING
SONORA, CA 95370	94-2834151	501(C)(3)	7,000.	0.		ENVIRONMENT	SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UC REGENTS-UCSC ARBORETUM 1156 HIGH STREET SANTA CRUZ, CA 95064	00-000000	501(C)(3)	73,375.	0.		ARTS, HISTORY,	TO SUPPORT THE UCSC ARBORETUM
UC SANTA CRUZ FOUNDATION 1156 HIGH STREET, MS: OSP SANTA CRUZ, CA 95064	23-7394590	501(C)(3)	408,888.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, LONG MARINE LAB, HUMANITIES INSTITUTE, LIBRARY, & MORE
UJA FEDERATION NEW YORK P.O. BOX 4227 NEW YORK, NY 10261	51-0172429	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR EMERGENCY FUND
UNCHAINED PO BOX 441 SOQUEL, CA 95073	27-5502745	501(C)(3)	12,750.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, GRAHAM HILL JUVIE PROGRAM
UNITED FOOD BANK OF PLANT CITY 702 E ALSOBROOK ST, SUITE D PLANT CITY, FL 33563	59-3069728	501(C)(3)	21,300.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
UNITED WAY OF SANTA CRUZ COUNTY PO BOX 1458 CAPITOLA, CA 95010	94-1422471	501(C)(3)	31,500.	0.		HEALTH	TO SUPPORT SANTA CRUZ COUNTY BLACK HEALTH MATTERS
UNITY SHOPPE INC 110 WEST SOLA STREET SANTA BARBARA, CA 93101	77-0391064	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
UNIVERSITY OF TULSA 800 SOUTH TUCKER DRIVE TULSA, OK 74104	73-0579298		92,560.	0.		EDUCATION/YOUTH	TO BE ADDED TO THE JEANETTE HARMON SCHOLARSHIP IN BIOLOGY
USET FOUNDATION PO BOX 355 GLADSTONE, NJ 07934	22-1668879	501(C)(3)	30,000.	0.		ENVIRONMENT	TO SUPPORT PATHWAY TO THE PODIUM

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Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY CHURCHES UNITED							
9400 HIGHWAY 9, PO BOX 367							FOR GENERAL OPERATING
BEN LOMOND, CA 95005	77-0163322	501(C)(3)	27,000.	0.		HUMAN SERVICES	SUPPORT
VANGUARD CHARITABLE ENDOWMENT							FOR THE BURKE BORINA
PROGRAM - PO BOX 9509 - WARWICK,						COMMUNITY	VANGUARD CHARITABLE
RI 02889	23-2888152	501(C)(3)	96,522.	0.		DEVELOPMENT	ACCOUNT
		001(0)(0)	70,022.	•			
VENTURES							
PO BOX 2375						COMMUNITY	FOR GENERAL OPERATING
WATSONVILLE, CA 95077	77-0247648	501(C)(3)	28,000.	0.		DEVELOPMENT	SUPPORT
VETS 4 VETS SANTA CRUZ							
842 FRONT STREET							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	45-3697584	501(C)(3)	20,000.	0.		HUMAN SERVICES	SUPPORT
							TO SUPPORT STRENGTHENING
VISION MUNDIAL DE MEXICO, A.C.							SKILLS FOR LIFE FOR
CUIDAD DE MEXICO 11300				_			ADOLESCENTS AND THEIR
MEXICO		501(C)(3)	142,004.	0.		DEVELOPMENT	FAMILIES
VOLUMBER CENTER OF CANDA CRUZ							FOR GENERAL OPERATING
VOLUNTEER CENTER OF SANTA CRUZ COUNTY - 1740 17TH AVENUE, SUITE 2							SUPPORT, FOR THE LITERAC
, , , , , , , , , , , , , , , , , , ,	94-1702678	E01/G \/3\	107 060	0.		HUMAN SERVICES	PROGRAM, PEI, EMERGING JEDI AWARDS
- SANTA CRUZ, CA 95062	94-1702078	501(C)(3)	187,969.	0.		HUMAN SERVICES	DEDI AWARDS
WALNUT AVENUE FAMILY & WOMEN'S							
CENTER - 303 WALNUT AVENUE - SANTA							FOR GENERAL OPERATING
CRUZ, CA 95060	94-1186197	501(C)(3)	56,500.	0.		HUMAN SERVICES	SUPPORT
•			1	-			TO SUPPORT YOUR RISE
WATSONVILLE FILM FESTIVAL							TOGETHER CIRCLE OF
PO BOX 172						ARTS, HISTORY,	SUPPORT GRANT, GENERAL
WATSONVILLE, CA 95077	81-3138376	501(C)(3)	60,250.	0.		AND CULTURE	OPERATING SUPPORT
							FOR CHUCK LUCAS AWARD,
WATSONVILLE HIGH SCHOOL							FOR SAGA, DN AWARDS,
250 E BEACH ST						EDUCATION/YOUTH	VISUAL & PERFORMING ARTS
WATSONVILLE, CA 95076	00-0000000	501(C)(3)	30,375.	0.		DEVELOPMENT	DEPARTMENT SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WATSONVILLE HIGH SCHOOL FOUNDATION 17 HAWTHORNE AVENUE WATSONVILLE, CA 95076	77-0008389	501(C)(3)	12,474.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT THE MISSION AND ACTIVITIES, GENERAL OPERATING SUPPORT
WATSONVILLE LAW CENTER 315 MAIN STREET, SUITE 207 WATSONVILLE, CA 95076	20-8157214	501(C)(3)	77,270.	0.		COMMUNITY DEVELOPMENT	FOR THE MATERNAL HEALTH PROJECT, GENERAL OPERATING SUPPORT
WATSONVILLE ROTARY FOUNDATION PO BOX 282 WATSONVILLE, CA 95077	94-2577900	501(C)(3)	6,500.	0.		EDUCATION/YOUTH	FOR THE ROTARY FOUNDATION, CLAWS FOR A CAUSE
WATSONVILLE WETLANDS WATCH 500 HARKINS SLOUGH ROAD WATSONVILLE, CA 95019	77-0519882	501(C)(3)	56,277.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
WEST VALLEY COMMUNITY SERVICES 10104 VISTA DRIVE CUPERTINO, CA 95014	94-2211685	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
WHARF HOUSE 1400 WHARF RD CAPITOLA, CA 95010	00-0000000	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR DISASTER SUPPORT
WHARF TO WHARF RACE PO BOX 307 CAPITOLA, CA 95010	77-0061106	501(C)(3)	25,000.	0.		COMMUNITY DEVELOPMENT	FOR CAPITOLA VILLAGE WHARF PROJECT
WHITE STAG LEADERSHIP DEVELOPMENT ACADEMY - 33 SOLEDAD DRIVE - MONTEREY, CA 93940	20-3271014	501(C)(3)	100,000.	0.		EDUCATION/YOUTH	TO SUPPORT PICO BLANCO
WILDAID, INC 333 PINE STREET, SUITE 300 SAN FRANCISCO, CA 94104	20-3644441	501(C)(3)	50,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUN'I'Y							14-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLIAM JAMES ASSOCIATION PO BOX 1632 SANTA CRUZ, CA 95061	23-7320163	501(C)(3)	31,341.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING
WILY NETWORK INC 189 WELLS AVENUE SUITE 301 NEWTON, MA 02459	47-2434992	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
WOMEN FOR WOMEN INTERNATIONAL 2000 M ST, SUITE 200 WASHINGTON, DC 20036	52-1838756	501(C)(3)	10,000.	0.		HUMAN SERVICES	TO SUPPORT AFGHANISTAN PROGRAM
WORLD CENTRAL KITCHEN 200 MASSACHUSETTS AVE 7TH FLOOR WASHINGTON, DC 20001	27-3521132	501(C)(3)	6,000.	0.		HUMAN SERVICES	FOR UKRAINE RELIEF, GENERAL OPERATING SUPPORT
WORLD WILDLIFE FUND 1250 24TH ST NW, SUITE 1105 WASHINGTON, DC 20090	52-1693387	501(C)(3)	50,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
WYOMING COMMUNITY FOUNDATION 1472 N 5TH ST., SUITE 201 LARAMIE, WY 82072	83-0287513	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
Y360 PO BOX 26479 COLORADO SPRINGS, CO 80936	84-1300954	501(C)(3)	8,000.	0.		HUMAN SERVICES	TO SUPPORT THE MINISTRY OF ENOC PUEYES, TO SUPPORT THE MINISTRY OF PATTI & MARCOS PUEYES
YOUNG LADIES GRAND INSTITUTE - SANTA CRUZ #95 - 222 HIGHLAND AVE - SANTA CRUZ, CA 95060	23-7514541	501(C)(3)	15,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
YWCA OF WATSONVILLE 340 EAST BEACH STREET WATSONVILLE, CA 95076	94-1212142	501(C)(3)	16,071.	0.		EDUCATION/YOUTH	TO SUPPORT THE MISSION AND ACTIVITIES, YMCA PAJARO PARK SUMMER CAMP

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) ZELDAS 203 ESPLANADE COMMUNITY 10,000. CAPITOLA, CA 95010 00-0000000 501(C)(3) 0. DEVELOPMENT FOR DISASTER SUPPORT

THE FOUNDATION'S INTEREST AREAS AND STRATEGIC PRIORITIES. A BOARD-APPOINTED

Schedule I (Form 990) 2023 COUNTY	1111011 011	VIII CRO2			94-2808039	Page 2
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.		•
(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 assis	stance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.		
PART I, LINE 2:						
THE FOUNDATION CONDUCTS A THOROUGH	DUE DILI	GENCE PROC	CESS IN REV	IEWING AND		
MONITORING ALL GRANTS APPROVED AND	AWARDED	BY THE FOU	UNDATION'S	BOARD OF		
DIRECTORS. STAFF REVIEWS ALL REQUES	STS TO FI	RST ENSURE	THE APPLI	CANT		
ORGANIZATION IS ELIGIBLE TO RECEIVE	E A GRANT	FROM THE	FOUNDATION	UNDER THE		
IRS GUIDELINES FOR CHARITIES AND NO	ONPROFITS	. DURING T	HIS INITIA	L SCREENING,		
THE APPLICANT'S FINANCIAL INFORMAT	ION, GOVE	RNANCE AND	PROGRAMS	ARE		
REVIEWED, AND A DETERMINATION IS MA	ADE IF TH	E PROPOSAL	IS CONSIS	TENT WITH		

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:

FRIENDS OF THE WATSONVILLE PUBLIC LIBRARIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION AND PROGRAMS
OF THE FRIENDS OF THE WATSONVILLE PUBLIC LIBRARIES

NAME OF ORGANIZATION OR GOVERNMENT: PAJARO VALLEY HISTORICAL ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT,

SUPPORT MAINTENANCE OF THE HISTORIC BOCKIUS-ORR HOUSE

NAME OF ORGANIZATION OR GOVERNMENT:

Part IV	Supplemental Information	
SUTTER	CARE AT HOME - SANTA CRUZ (HOME HEALTH)/VISITING NURSE ASSOCIATION	о ис
(H) PU	POSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION AND	
ACTIVI	IES OF VISITING NURSE ASSOCIATION OF SANTA CRUZ COUNTY	

SCHEDULE J (Form 990)

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Questions Regarding Compensation Yes No 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. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account 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 1b 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? 2 Indicate which, if any, of the following the 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. Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant Form 990 of other organizations X Approval by the board or compensation committee 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: X a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a Х Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. 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: X a The organization? 6a X b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 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 X 7 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 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SUSAN TRUE	(i)	271,176.	0.	0.	16,471.	12,164.	299,811.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SABINE DUKES	(i)	214,366.	0.	0.	12,880.	18,960.	246,206.	0.
CHIEF OPERATING & FINANCIAL OFFICER/	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TIM CARSON	(i)	156,464.	0.	0.	9,490.	16,045.	181,999.	0.
PROGRAM DIRECTOR - RWMF	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ROBERT SWARTZ	(i)	157,166.	0.	0.	6,888.	642.	164,696.	0.
EMPLOYEE	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ALEXANDRA URBICK	(i)	145,787.	0.	0.	6,636.	5,598.	158,021.	0.
CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

COMMUNITY FOUNDATION SANTA CRUZ

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COUNTY

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.

COMMUNITY FOUNDATION SANTA CRUZ

Employer identification number 94-2808039

Par	t I	Types of Property							
			(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	termini	ng	
			applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu		_	;
1	Art -	Works of art							
2		Historical treasures							
3		Fractional interests							
4		ks and publications							
5		ning and household goods							
6		and other vehicles							
7		s and planes							
8		lectual property							
9		urities - Publicly traded	Х	6	10,969,823.	FMV			
10		urities - Closely held stock		-	.,,.				
11		urities - Partnership, LLC, or							
• •		interests							
12		urities - Miscellaneous							
13		ified conservation contribution -							
		pric structures							
14		ified conservation contribution - Other							
15		estate - Residential							
16		estate - Commercial							
17		estate - Other							
18		ectibles							
19		d inventory							
20		s and medical supplies							
21									
22		dermy orical artifacts							
23		ntific specimens							
24		eological artifacts							
2 4 25	Othe								
26	Othe	`							
		·							
27	Othe Othe	,							
<u>28</u> 29		ber of Forms 8283 received by the organiz	ration during	the tax year for a	antributions				
29		hich the organization completed Form 828		•					
	IOI V	mich the organization completed Form 626	oo, rait v, L	onee Acknowledg	ement <u>29 </u>			Yes	No
202	Duri	ng the year, did the organization receive by	, contributio	n any proporty rop	orted in Part Llines 1 throug	h 28 that it		163	140
Jua		t hold for at least 3 years from the date of t		• • • • •	•	· ·			
		npt purposes for the entire holding period?					30a		Х
h		es," describe the arrangement in Part II.					Jua		
31		s the organization have a gift acceptance p	olicy that re	acuires the review (of any nonstandard contribut	ions?	31	х	
		s the organization hire or use third parties of					01		
JZd				•			32a		х
h		es," describe in Part II.					3Zd		
33		e organization didn't report an amount in c	olumn (a) far	r a type of property	for which column (a) is show	ked			
JJ		ribe in Part II.	Juli (C) 101	a type of property	To which column (a) is chec	neu,			

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

Schedule M (Form 990) 2023

COMMUNITY FOUNDATION SANTA CRUZ

Schedule M (Form 990) 2023 COUN'I'Y	94-2808039 Pag	ge 2
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and is reporting in Part I, column (b), the number of contributions, the number of items received, or a contribution this part for any additional information.	d 33, and whether the organization combination of both. Also complete	
SCHEDULE M, PART I, COLUMN (B):	_	
THE FOUNDATION IS REPORTING THE NUMBER OF ITEMS CONTRIBU	UTED (DEFINED AS	
EACH SEPARATE GIFT) IN SCHEDULE M, PART I, COLUMN (B).		

Schedule M (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ

Employer identification number 94-2808039

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT IN CONJUNCTION
WITH THE FOUNDATION'S FINANCE AND ACCOUNTING STAFF. A DRAFT FORM 990 IS
THEN REVIEWED BY THE CHIEF OPERATING & FINANCIAL OFFICER AND CHIEF
EXECUTIVE OFFICER; ADJUSTMENTS ARE MADE, AS NECESSARY. A COMPLETE COPY OF
THE FORM 990 WAS PROVIDED TO THE VOTING MEMBER OF THE GOVERNING BODY AFTER
FILING WITH THE INTERNAL REVENUE SERVICE.

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

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:

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.

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

FOR ALL MATTERS BEFORE THE BOAD 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.

THE FOUNDATION IS COMMITTED TO ATTRACTING AND RETAINING A QUALIFIED,

DIVERSE WORKFORCE THROUGH A COMPETITIVE COMPENSATION PROGRAM WITHIN THE

Employer identification number 94-2808039

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 ADDRESSED THE ANNUAL

EVALUATION PROCESS FOR STAFF.

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 RESULTS IN A SALARY INCREASE. SALARY INCREASES ARE PROVIDED ON THE BASIS OF MERIT, SUBJECT TO BUGETARY 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 OVERAL 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 THE BOARD PRESIDENT.

THE FOUNDATION USES THIS EVELUATION TOOL AS A WAY TO ENHANCE THE

COMMUNICATION BETWEEN THE BOARD AND THE CEO; MEASURES SPECIFIC, ANNUAL

OBJECTIVES; GAUGE JOB PERFORMANCE AND LEADERSHIP; AND SERVE AS A BASIS FOR SALARY COMPENSATION.

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.

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.

<u>Schedule O (Form 990) 2023</u>

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number 94-2808039

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

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.

Schedule O (Form 990) 2023 Page 2 COMMUNITY FOUNDATION SANTA CRUZ Name of the organization **Employer identification number** 94-2808039 COUNTY FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION AT ITS OFFICE. FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE FOUNDATION'S WEBSITE (WWW.CFSCC.ORG) IN ADDITIONAL TO BEING PUBLISHED WITHIN ITS ANNUAL REPORT. FORM 990, PART XII, 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.

SCHEDULE R (Form 990)

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
LMJ BORINA LAND LLC - 46-3734949	HOLDING TITLE TO				
807 SOQUEL DRIVE	AGRICULTURAL LAND; LEASING				COMMUNITY FOUNDATION
PTOS, CA 95003	AGRICULTURAL LAND	CALIFORNIA	176,152.	2,847,655.	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	(f) Direct controlling entity	1	i12(b)(13) colled ity?
				501(c)(3))	g010g717g77	Yes	No
REGIONAL WATER MANAGEMENT FOUNDATION - 38-3763365, 7807 SOQUEL DRIVE, APTOS, CA	MANAGE THE INTEGRATED REGIONAL WATER MGMT				COMMUNITY FOUNDATION SANTA		
95003	PROGRAM-SANTA CRUZ COUNTRY	CALIFORNIA	501(C)(3)	LINE 12A, I	CRUZ	X	

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

Page 2

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

(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k											
(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)		(k)
IN Primary activity Legal domicile (state or entity)		Direct controlling	Predominant income	Share of total	Share of	Disproportionat		Code V-UBI	Gener	al or Per	rcentage
	(state or	entity	excluded from tax under	income		allocations?		amount in box	partn	er? Ow	wnership
	country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	No]
									+		
									\vdash		
	(b)	(b) (c) Primary activity Legal domicile (state or foreign	(b) (c) (d)	(b) (c) (d) (e)	(b) (c) (d) (e) (f) Primary activity Legal domicile (state or foreign foreign foreign foreign foreign for the following for the following foreign for the following for the following foreign for the following foreign for the following for the following foreign for the following for the following foreign foreign for the following foreign foreign for the following foreign	(b) (c) (d) (e) (f) (g)	(b) (c) (d) (e) (f) (g) (l	(b) (c) (d) (e) (f) (g) (h) Primary activity Legal Direct controlling Predominant income Share of total Share of	(b) (c) (d) (e) (f) (g) (h) (i) Primary activity Legal Direct controlling Predominant income Share of total Share of Disconnections Code VI IBI	(b) (c) (d) (e) (f) (g) (h) (i) (j) Primary activity (Legal Direct controlling Predominant income Share of total Share of Discontinuity (Code VI IBI General	(b) (c) (d) (e) (f) (g) (h) (i) (j)

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled ity?
CHARITABLE REMAINDER TRUST (4)	CHARITABLE GIVING	CA	CFSCC					х	

Yes No

1a

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

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

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)				1b	Х	
c Gift, grant, or capital contribution from related organization(s)						
d Loans or loan guarantees to or for related organization(s)					X	
e Loans or loan guarantees by related organization(s)						_X_
f Dividends from related organization(s)				1f		_X_
g Sale of assets to related organization(s)				1g		_X_
h Purchase of assets from related organization(s)						_X_
i Exchange of assets with related organization(s)						_X_
j Lease of facilities, equipment, or other assets to related organization(s)						X
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I Performance of services or membership or fundraising solicitations for related organization						Х
m Performance of services or membership or fundraising solicitations by related orga						_X_
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					X	
Sharing of paid employees with related organization(s)				10	Х	
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1g	Х	
Theimbursement paid by related organization(s) for expenses				14		
r Other transfer of cash or property to related organization(s)						Х
s Other transfer of cash or property from related organization(s)						X
2 If the answer to any of the above is "Yes," see the instructions for information on v						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	/ed Method of determining amount involved			
(1) REGIONAL WATER MANAGEMENT FOUNDATION	С	0.	BOOK VALUE			
(2) REGIONAL WATER MANAGEMENT FOUNDATION	D	0.	0.BOOK VALUE			
(3)						
(4)						
<u>(5)</u>						
<u>(</u> 6)						
332163 09-28-23			Schedul	R (For	n 990)	2023

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									

COMMUNITY FOUNDATION SANTA CRUZ

Schedule R	(Form 990) 2023 COUNTY	94-2808039	Page 5
Part VII	Supplemental Information Supplemental inform		
	Provide additional information for responses to questions on Schedule R. See instructions.		