# Form **990**

**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.

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

OMB No. 1545-0047

2024

Open to Public

Department of the Treasury

A For the 2024 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable COMMUNITY FOUNDATION SANTA CRUZ Address change COUNTY Name change 94 - 2808039Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 7807 SOQUEL DRIVE 831-662-2000 46,923,526. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return 95003 APTOS, CA H(a) Is this a group return Applica-tion pending F Name and address of principal officer: SABINE DUKES for subordinates? Yes X No SAME AS C ABOVE \_∣Yes 「 **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c)( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.CFSCC.ORG J Website: H(c) Group exemption number **K** Form of organization: X Corporation Trust Association Other L Year of formation: 1982 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE PHILANTHROPY TO MAKE Activities & Governance SANTA CRUZ COUNTY A BETTER PLACE TO LIVE, NOW AND IN THE FUTURE 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 3 Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 23 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 45,052,678. 37,214,040. Contributions and grants (Part VIII, line 1h) Revenue 290,996. 325,925. Program service revenue (Part VIII, line 2g) 5,363,749. 9,904,754. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -326,392**.** -521,193. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 50,381,031. 46,923,526. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 24,869,923. 22,817,447. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,997,464. 2,748,534. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,015,331. 1,113,221. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 28,633,788. 26,928,132. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19,995,394. 21,747,243. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 223,502,260. 252,472,451 Total assets (Part X, line 16) 25,714,972. 28,539,707 21 Total liabilities (Part X, line 26) 197,787,288. 223,932,744 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11/14/2025 Signature of officer Date Sign SABINE DUKES CHIEF FINANCE & OPERATING OFFICER Here Type or print name and title Date PTIN Preparer's name Preparer's signature 11/14/2025 KEVIN T. WILSON P01313212 Paid self-employed NOVOGRADAC & COMPANY LLP Firm's EIN 94-3108253 Preparer Firm's name SUITE Firm's address 1255 TREAT BLVD, Use Only Phone no. 925 - 949 - 4300 WALNUT CREEK, CA 94597 X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pa	till Statement of Program Service Accomplishments	_								
	Check if Schedule O contains a response or note to any line in this Part III									
1	Briefly describe the organization's mission:									
	TO PROMOTE PHILANTHROPY TO MAKE SANTA CRUZ COUNTY A BETTER PLACE TO LIVE, NOW AND IN THE FUTURE.									
	WE BRING TOGETHER PEOPLE, IDEAS, AND RESOURCES TO INSPIRE PHILANTHROPY									
	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?	٧n								
	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?	νo								
	If "Yes," describe these changes on Schedule O.									
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.									
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and									
	revenue, if any, for each program service reported.									
4a	(Code:) (Expenses \$25,905,772. including grants of \$22,817,447. ) (Revenue \$342,050.	• )								
	DONOR-ADVISED AND DISCRETIONARY FUNDS HELD AT THE FOUNDATION PROVIDED									
	GRANTS TO TAX-EXEMPT 501(C)(3) NONPROFIT ORGANIZATIONS, CHARITABLE									
	ORGANIZATIONS AND PUBLIC SECTOR SERVICE AGENCIES IN SANTA CRUZ COUNTY									
	AND BEYOND IN SIX BROAD FIELDS OF INTEREST DESIGNATED BY OUR BOARD OF									
	DIRECTORS AS CORE TO OUR MISSION. THESE ARE: ARTS, HISTORY AND CULTURE;									
	COMMUNITY DEVELOPMENT; EDUCATION/YOUTH SERVICES; ENVIRONMENT; HEALTH,									
	AND; HUMAN SERVICES.									
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$									
ΗIJ	(Code:) (Expenses \$	<b>–</b> ′								
4c	(Code:) (Expenses \$ including grants of \$)       (Revenue \$	_ )								
	Other program services (Describe on Schedule O.)									
тu	(Expenses \$ including grants of \$ ) (Revenue \$ )									
4e	Total program service expenses 25,905,772.	_								

Form 990 (2024) 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
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		<u> </u>
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		<u> X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
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	X	
10				
		10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а				
		11a	X	
b				
		11b		<u> X</u>
С				.,
		11c		X
d				٦,
		11d	37	X
		11e	X	
f		l	v	
		111	X	_
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IJ		15	Х	
16		13	- 21	
10		16		x
17		10		
.,		17		x
18		<b>⊢</b> "		<del></del>
		12		x
19		"		<del></del>
.5	,	19		x
202				X
		20b		<del></del> -
21				
		21	Х	
	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V If the organization directly or through a related organization, hold assets in donor-restricted endowments? If "Yes," complete Schedule D, Part V II If the organization report an amount for lollowing questions is "Yes," then complete Schedule D, Parts VI, VIII, IVII, IX, or X, as applicable.  Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 Did the organization report an amount for other assets 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 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 VIII Did the organization report an amount for other liabilities 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 X II Did the organization separate or consolidated financial statements for the tax year include a foothote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X II Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional II Is the organization as chool described in section 170(b)(1)(A)(iii) If "Yes," complete Schedule E II Did the organization and program service activities outside the United States, or aggregate			

Form 990 (2024) 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	00	Х	
04-	Schedule J	23	Λ	
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	040		X
h	Schedule K. If "No," go to line 25a	24a 24b		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	210		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	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		Х
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? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	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	37	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
0.4	contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		X
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 55		
	Part V, line 1	34	Х	
35a	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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	Establishment		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  1a 26  Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable  1b 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	(gambling) winnings to prize winners?	10	X	
	(garibling) wirinings to prize wiriners?	1c	000	(0004)

O24) COUNTY
Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2024)
Part V Sta

			Yes	No					
<b>2</b> 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 23		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			х					
L	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 FinCFN Form 114. Penert of Foreign Bank and Financial Associate (FRAR)								
<b>5</b> 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		Х					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	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								
oa	any contributions that were not tax deductible as charitable contributions?	6a		Х					
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ou							
-	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
	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								
	to file Form 8282?	7с		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
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		X					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X					
10	Section 501(c)(7) organizations. Enter:								
	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders  11a								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
10-	amounts due or received from them.)  Section 4047(-VII) non-everyth charitable trusts. Is the everythin filing Form 4000 in liquid Form 10412	100							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
_	Note: See the instructions for additional information the organization must report on Schedule O.	100							
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	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		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	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

Form 990 (2024) COUNTY 94 - 2808039 Page
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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 16			
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	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?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(IIII COSIO 2 TOGOSCO III SI III SI III SI II SI		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	Х	
	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			
	taxable entity during the year?	16a		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	• •		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SABINE DUKES - 831-662-2020			
	7807 SOQUEL DRIVE, APTOS, CA 95003			

# 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.

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

- 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.

(A)	(B)	(C)					Said	(D)	(E)	(F)
Name and title	Average	(do		Pos	ition	l than c	one	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	son is	s both	an	compensation	compensation	amount of
	week (list any							from the	from related organizations	other compensation
	hours for	direc				pe		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	com p		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SUSAN TRUE	40.00	띡	드	101	- Ke	E E	Fc			-
CHIEF EXECUTIVE OFFICER	10000	•		х				291,937.	0.	30,365.
(2) SABINE DUKES	40.00									
CHIEF OPERATING & FINANCE OFFICER	1.00			Х				224,500.	0.	34,873.
(3) TIM CARSON	1.00									
PROGRAM DIRECTOR	1.00					Х		165,183.	0.	20,824.
(4) HILARY SHUMAN-BRYANT	40.00									
DONOR SERVICES DIRECTOR						X		165,667.	0.	19,103.
(5) ALEXANDRA URBICK	40.00									
CONTROLLER						Х		161,667.	0.	17,999.
(6) JIM WEISENSTEIN	1.00								_	
PRESIDENT		Х		Х				0.	0.	0.
(7) TREVOR STRUDLEY	1.00									•
VICE PRESIDENT	1 00	Х		X				0.	0.	0.
(8) KIRK SCHMIDT	1.00								•	•
TREASURER	1 00	X		Х				0.	0.	0.
(9) CHRIS MURPHY	1.00	7,7							0	0
SECRETARY (10) DOD NIJEW	1 00	X						0.	0.	0.
(10) ROB ALLEN BOARD MEMBER	1.00	Х						0.	0.	0
(11) AUDRIES BLAKE	1.00	Λ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(12) GINA CASTANEDA	1.00	Λ						0.	0.	<u>U•</u>
BOARD MEMBER	1.00	х						0.	0.	0.
(13) LILIANA 'LILI' DIAZ	1.00	25						•	•	<u>.</u>
BOARD MEMBER		х						0.	0.	0.
(14) LAWRENCE 'LARRY' DONATONI	1.00								•	
BOARD MEMBER		Х						0.	0.	0.
(15) DOUG FISCHER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) ED NEWMAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(17) ROGELIO PONCE, JR.	1.00									
BOARD MEMBER		Х						0.	0.	0.

Page 8

Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			(C				(D)	(E)			(F)	
Name and title	Average	(do		Posi heck r			one	Reportable	Reportable			timate	
	hours per week	box	, unle	ss per	son is	s both	an	compensation	compensatio			nount	of
	(list any		<u> </u>				,	from the	from related organizations			other pensa	tion
	hours for	direct				- o		organization	(W-2/1099-MIS			om the	
	related	.ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)			anizati	
	organizations	trust	nal tru		oyee	ompe !		1099-NEC)	,		and	d relate	ed
	below	Individual trustee or director	Institutional trustee	Officer	sey employee	Highest compensated employee	Former				orga	nizatio	ons
	line)	ib	lust	i#0	Key	e Eig	Fon						
(18) SAMUEL PUN	1.00									^			^
BOARD MEMBER	1 00	Х		$\vdash \vdash$				0.		0.			0.
(19) SANDY SKEES	1.00	٠,								^			0
BOARD MEMBER	1 00	Х	_					0.		0.			0.
(20) MARIA ELENA DE LA GARZA	1.00	37								0			^
BOARD MEMBER	1 00	Х						0.		0.			0.
(21) LISA FRASER	1.00	37								^			^
BOARD MEMBER		Х						0.		0.			0.
4h Cubtatal	l							1,008,954.		0.	12	3,10	5.1
1b Subtotal c Total from continuation sheets to Part VI							•	0.		0.	14	J, I	0.
								1,008,954.		0.	12	3,10	
d Total (add lines 1b and 1c)									000 of roportable		12.	J , _ \	J <del>I</del> •
2 Total number of individuals (including but no compensation from the organization	ot iimitea to tri	ose	iiste	u ab	ove	e) WII	o re	eceived more than \$100,	ooo or reportable	•			5
compensation from the organization												Yes	No.
3 Did the organization list any <b>former</b> officer,	director trust	00 k	·0\/ 0	mnl	0.404	0 Or	hia	host componented amp	lovoo on			100	110
line 1a? If "Yes," complete Schedule J for si	•	,	,	•	,	,	_		•		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	•							•	•		4	х	
5 Did any person listed on line 1a receive or a											•		
rendered to the organization? If "Yes," com	•				•			•			5		Х
Section B. Independent Contractors	piete ochedar	<i>. U I</i> (	0/ 30	icii p	<i>/</i> C/3	<u> </u>							
Complete this table for your five highest cor	mpensated inc	lepe	nder	nt co	ntra	actor	s th	nat received more than \$	100.000 of comp	ensa	tion fro	m	
the organization. Report compensation for t										-			
(A)	•							(B)			(C	;)	
Name and business	address	NC	ONE	<u> </u>				Description of s	ervices	C	ompe	nsatio	1 <u> </u>
							П						
							T						
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	d to t	hos	e lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	zation				C	)						200	
											- 1		200.4

Page 9

### COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Form 990 (2024)
Part VIII

Statement of Revenue

		Check if Schedule O	contain	s a response	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					
anta				···					
fts, Gra									
		Fundraising events							
ij gi		- ·	:						
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contr							
	Ť	All other contributions, gifts,			27 214 040				
듗뙲		similar amounts not included			37,214,040.				
ont od (	_	Noncash contributions included in	lines 1a-1	f <b>1g</b>  \$	8,282,462.	25 014 040			
<u>0</u> <u>6</u>	h	Total. Add lines 1a-1f			I	37,214,040.			
					Business Code				
Se	2 a				541900	268,525.	268,525.		
ē Ķ	b	INTEREST INCOME - PI	RI		900099	57,400.	57,400.		
Sepu	С								
eve	d								
Program Service Revenue	е								
4	f	All other program service	revenu	e					
	g	Total. Add lines 2a-2f				325,925.			
	3	Investment income (include	ding div	ridends, inter	est, and				
		other similar amounts)			9,904,754.			9904754.	
	4	Income from investment of	of tax-ex	kempt bond	proceeds				
	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	$\overline{}$	(i) Securities	(ii) Other				
		assets other than inventory	7a	•					
	h	Less: cost or other basis							
<u>o</u>	-	and sales expenses	7b						
Revenue	c	Gain or (loss)	7c						
ě		Net gain or (loss)							
er F		Gross income from fundraisi							
Other	o u	including \$	-						
١		contributions reported on							
		Part IV, line 18	•	′ I					
	h			8					
		Net income or (loss) from		·····	<u> </u>				
		Gross income from gamin							
	Ju	Part IV, line 19		I					
	h			l					
		Net income or (loss) from		·····	<u> </u>				
		Gross sales of inventory, I							
	iu a								
		and allowances							
		Less: cost of goods sold			ומי				
$\longrightarrow$	С	Net income or (loss) from	sales o	inventory	Business Code				
ရှ	4.4	OTHER INCOME			900099	16 105	16 105		
ieo ne					900099	16,125. -537 318	16,125.		
Miscellaneous Revenue	b	•			300033	-537,318.	-537,318.		
Sce.	C								
Ξ̈́		All other revenue				E01 100			
		Total. Add lines 11a-11d				-521,193.	105.000		0004754
	12	Total revenue. See instruction	ากร			46,923,526.	-195,268.	0.	9904754.

Form 990 (2024) COUNTY

Part IX Statement of Functional Expenses

The statement of Functional Expenses all columns. All other organizations must complete all columns. 94-2808039 Page **10** 

Secti	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 respor	se or note to any line in									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	22,817,447.	22,817,447.								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22										
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
_	trustees, and key employees	1,008,955.	1,008,955.								
6	Compensation not included above to disqualified	, ,	, ,								
_	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages	1,380,391.	789,826.	401,215.	189,350.						
8	Pension plan accruals and contributions (include	, , <u></u>	. ,	,	,						
-	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits	608,118.	454,053.	105,183.	48,882.						
10	Payroll taxes	,	,	,							
11	Fees for services (nonemployees):										
	Management										
b	Legal										
c	Accounting	278,240.	207,934.	47,813.	22,493.						
d	Lobbying		,	, -	,						
e	Professional fundraising services. See Part IV, line 17				_						
f	Investment management fees				_						
g	Other. (If line 11g amount exceeds 10% of line 25,										
·	column (A), amount, list line 11g expenses on Sch 0.)										
12	Advertising and promotion	15,603.	11,725.	2,638.	1,240.						
13	Office expenses	284,454.	213,793.	48,053.	1,240. 22,608.						
14	Information technology										
15	Royalties										
16	Occupancy										
17	Travel										
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	34,680.		5,859.	2,756.						
20	Interest	29,612.	22,256.	5,003.	2,353.						
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	261,719.		44,215.	20,801.						
23	Insurance	51,764.	38,905.	8,745.	4,114.						
24	Other expenses. Itemize expenses not covered 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.)										
а	REPAIRS & MAINTENANCE	157,149.	118,110.	26,549.	12,490.						
b		·		·	•						
С											
d											
е	All other expenses				<del></del>						
25	Total functional expenses. Add lines 1 through 24e	26,928,132.	25,905,772.	695,273.	327,087.						
26	<b>Joint costs.</b> 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)				5 <b>000</b> (200 t)						

Form 990 (2024)
Part X Balance Sheet

		Check if Schedule O contains a response or note	to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			3,362,912.	1	7,833,454.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			941,928.	3	2,036,798.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualifi	ed per	sons (as defined			
		under section 4958(f)(1)), and persons described		6			
ış	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			8		
۲ĕ	9	Prepaid expenses and deferred charges			85,853.	9	90,762.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	14,322,497.	9,193,160.	10c	10,301,120.
	b						
	11	Investments - publicly traded securities	202,251,567.	11	212,432,436.		
	12	Investments - other securities. See Part IV, line 1	109,643.	12	1,468,037.		
	13	Investments - program-related. See Part IV, line 1		3,296,863.	13	13,897,894.	
	14	Intangible assets		4 060 224	14	0.	
	15	Other assets. See Part IV, line 11			4,260,334.	15	4,411,950.
$\longrightarrow$	16	Total assets. Add lines 1 through 15 (must equa			223,502,260.	16	252,472,451.
	17	Accounts payable and accrued expenses			1,671,585. 457,500.	17	2,274,772. 347,917.
	18	Grants payable	457,500.	18	347,317.		
	19	Deferred revenue				19	
	20 21	Tax-exempt bond liabilities			19,862,811.	20 21	22,267,536.
	22	Escrow or custodial account liability. Complete F Loans and other payables to any current or former			17,002,011.	21	22,201,330.
Liabilities	22	trustee, key employee, creator or founder, substa					
≣		controlled entity or family member of any of these				22	
Lia	23	Secured mortgages and notes payable to unrelate	-		859,103.	23	835,820.
	24	Unsecured notes and loans payable to unrelated			000,1001	24	000,0200
	25	Other liabilities (including federal income tax, pay	-				
		parties, and other liabilities not included on lines					
		of Schedule D	-		2,863,973.	25	2,813,662.
	26				25,714,972.	26	28,539,707.
		Organizations that follow FASB ASC 958, chec					
Ses		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			197,787,288.	27	223,932,744.
Ba	28	Net assets with donor restrictions				28	
n l		Organizations that do not follow FASB ASC 95	8, che	ck here			
편		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or equ				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc				31	
ě	32	Total net assets or fund balances			197,787,288.	32	223,932,744.
	33	Total liabilities and net assets/fund balances			223,502,260.	33	252,472,451.

Pa	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	46	5,92	3,5	26.
2	Total expenses (must equal Part IX, column (A), line 25)	2	26	5,92	8,1	32.
3	Revenue less expenses. Subtract line 2 from line 1	3	19	9,99	5,3	94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	197	7,78	7,2	88.
5	Net unrealized gains (losses) on investments	5		5,15	0,0	62.
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	223	3,93	2,7	44.
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	О.				
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					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					
За	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?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		lit			
_	ar quitte avalair why an Cahadula O and describe any stans taken to undergraph audite			26	l	

Form **990** (2024)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

### **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.

COMMUNITY FOUNDATION SANTA CRUZ

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

OMB No. 1545-0047

**Employer identification number** 

Open to Public Inspection

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 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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))

Schedule A (Form 990) 2024

COUNTY

Pa	rt II Support Schedule for	_					-
	(Complete only if you checke			-	n failed to qualify i	under Part III. If the	organization
800	fails to qualify under the tests	s listed below, plea	se complete Part	III.)			
	• • • • • • • • • • • • • • • • • • • •		(1.) 0004	(-) 0000	(-1) 00000	(-) 0004	(O T. + - 1
	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	34426217	13811213	38200035	45052678	37214041	198837114
•	Tax revenues levied for the organ-	54420217.	43044243.	30299933.	43032070.	5/214041.	19003/114
2	ization's benefit and either paid to						
	or expended on its behalf						
2	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
1	<b>Total.</b> Add lines 1 through 3	34426217.	43844243.	38299935.	45052678.	37214041	198837114
5	The portion of total contributions	311202171	130112131	30233333	130320701	5,2110111	130037111
J	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)						23540724.
6	Public support. Subtract line 5 from line 4.						175296390
Sec	tion B. Total Support				1		
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4		43844243.	38299935.	45052678.	37214041.	198837114
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2651914.	3222860.	2753366.	3960423.	5185034.	17773597.
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.)	239,992.	1189437.	125,923.	94,444.	16,125.	
	<b>Total support.</b> Add lines 7 through 10						218276632
	Gross receipts from related activities,						
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and sto	p here					
Sec	tion C. Computation of Publ	ic Support Per	centage			т т	
14	Public support percentage for 2024 (		•			14	80.31 %
15	Public support percentage from 2023					15	78.44 %
16a	33 1/3% support test - 2024. If the				14 is 33 1/3% or m	nore, check this bo	
	stop here. The organization qualifies		~				
b	33 1/3% support test - 2023. If the				I line 15 is 33 1/3%	or more, check th	is box
	and <b>stop here.</b> The organization qua	• •					
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact				· ·	VI how the organiz	zation
	meets the facts-and-circumstances to	-	•	• • •	•		
b	10% -facts-and-circumstances test	•	•			•	10% or
	THORO AND IT THE OVERNITHING MOSTS +	an tacte and arrain	perancoe toet obo	CLY TRUE DOV ORG	TOD DOTO EVOLOID	IN MARK VII NAVV +ha	

organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

### 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.)

Se	ction A. Public Support	slow, please comp	olete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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						
1	Tax revenues levied for the organ-						
7	ization'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						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  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 the	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organization	on,
_	check this box and stop here						
	ction C. Computation of Publi					т т	
	Public support percentage for 2024 (li			column (f))		15	<u>%</u>
	Public support percentage from 2023					16	%
	ction D. Computation of Inves			. 10 1 (0)		T 4= T	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					18	% 7 is not
198	a 33 1/3% support tests - 2024. If the						/ 18 HOL
k	more than 33 1/3%, check this box are 33 1/3% support tests - 2023. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	

### 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
		.03	.13
	1		
	2		
	3a		
	_		
	3b		
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	dule A (Form 990) 2024 COUNTY 94 – 2 6	0003	<u> Р</u> а	age <b>5</b>
Pai	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	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 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 <b>Part VI</b> 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			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental			
	entity (see instructions).			
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			
	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			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

## COMMUNITY FOUNDATION SANTA CRUZ

Schedule A (Form 990) 2024 COUNTY

94-2808039 Page 6

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must			
Sect	on 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		
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	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	on 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-functional		d Type III supporting orga	nization (see
-	instructions).	,	),	\

94-280<u>8039 Page 7</u>

Sche	dule A (Form 990) 2024 COUNTY			9	4-2808039	Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continu</sub>	ed)		
Sect	on D - Distributions				Current Yea	ar
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
_3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	}	3		
_4	Amounts paid to acquire exempt-use assets			4		
_5_	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
_6_	Other distributions (describe in Part VI). See instructions.			6		
_7_	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			88		
_9_	Distributable amount for 2024 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2024	s	(iii) Distributab Amount for 2	
1	Distributable amount for 2024 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2024 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2024					
a	From 2019					
b	From 2020					
С	From 2021					
d	From 2022					
е	From 2023					
f	Total of lines 3a through 3e					
g	Applied to under distributions of prior years					
h	Applied to 2024 distributable amount					
i	Carryover from 2019 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2024 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2024 distributable amount					
С	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2024, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in <b>Part VI.</b> See instructions.					
6	Remaining underdistributions for 2024. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2025. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
а	Excess from 2020					
b	Excess from 2021					
c	Excess from 2022					
d	Excess from 2023					
е	Excess from 2024					

COMMUNITY FOUNDATION SANTA CRUZ 94-280<u>8039 Page 8</u> COUNTY Schedule A (Form 990) 2024 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.)

# SCHEDULE D (Form 990)

(Rev. December 2024) 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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

**Employer identification number** 94-2808039

Pai	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		ccounts. Complete if the
	organization answered fes on Form 990, Fart IV, iii		(b) Funds and other accounts
1	Total number at end of year	203	425
2	Aggregate value of contributions to (during year)	29,938,532.	12,953,837.
3	Aggregate value of grants from (during year)	1,172,125.	2,168,063.
4	Aggregate value at end of year		141,655,264.
5	Did the organization inform all donors and donor advisors in	•	
_	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 of		
	impermissible private benefit?		X Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a hist	torically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a co	
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b			2b
С.	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
2	on a historic structure listed in the National Register  Number of conservation easements modified, transferred, re		2d
3		leased, extiliguished, or terminated by the organ	iization during the tax
4	year Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
Ū	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	asements during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense stater	ment and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statements th	nat describes the
Da	organization's accounting for conservation easements.  t III   Organizations Maintaining Collections or	f Aut Historical Transcripto or Other 6	Similar Assats
Fai			Sillilar Assets.
	Complete if the organization answered "Yes" on Form		lance about walks
та	If the organization elected, as permitted under FASB ASC 95 of art, historical treasures, or other similar assets held for pul	•	
	service, provide in Part XIII the text of the footnote to its final	· · · · · · · · · · · · · · · · · · ·	lice of public
h	If the organization elected, as permitted under FASB ASC 95		e sheet works of
b	art, historical treasures, or other similar assets held for public	· · · · · · ·	
	provide the following amounts relating to these items.	o exhibition, education, or research in farther and	o or public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			•
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A		•
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

Part IV   Escrow and Custodial Arrangements   Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Ia   Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?	Par	t III   Organizations Maintaining C	collections of Ar	t, Historical Tre	easures, or 0	Other S	Similar <i>I</i>	Assets	(continu	ued)
a Public exhibition d Loan or exchange program e Other  b Scholarly research e Other  c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  e Distributions during the year  1e Distributions during the year  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? X Yes N b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  X Yes  1e Distributions during the year  1e Distributions during th	3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that m	nake sigr	nificant use	e of its		
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  Distributions during the year  e Distributions during the year  f Ending balance  (a) Current year (b) Prior year (c) Two years back (e) Four years back (e) Prior year (e) Two years back (e) Four years back (e) Four years back (e) Grant year (e) Two years back (e) Four years back (e) Grant year (e) Two years back (e) Four years back (e) Grant year (e) Two years back (e) Four years back (e) Grant year (e) Two years back (e) Four yea		collection items (check all that apply).								
c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Endowment Funds Complete if the organization has been provided in Part XIII.  C Beginning of year balance  1a Beginning of year balance  1a Beginning of year balance  1b Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance  1b Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1b Port V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1c Contributions  2	а	Public exhibition	d	Loan or exc	hange program	า				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, clid the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization sollection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  11	b	Scholarly research	е	Other						
to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  1b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  [a) Current year  [a) Current year  [a) Current year  [b) Prior year  [c) Two years back  [d) Three years back  [e) Four years  [e) Two years back  [e) Four years  [e) Four years	С	Preservation for future generations								
to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year 1 It	4	Provide a description of the organization's continuous	ollections and explair	n how they further th	ne organization	's exemp	ot purpose	in Part )	KIII.	
Part IV   Escrow and Custodial Arrangements   Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?	5	During the year, did the organization solicit of	or receive donations of	of art, historical treas	sures, or other	similar as	ssets			
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back on the part of the part year (b) Prior year (c) Two years back (d) Three years back (e) Four years back on the part year (b) Prior year (c) Two years back (d) Three years back (e) Four years										☐ No
1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount   1c	Par	t IV Escrow and Custodial Arran	gements Comple	te if the organizatior	n answered "Ye	es" on Fo	orm 990, P	art IV, lir	ne 9, or	
on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?    Ves		reported an amount on Form 990, Pa	rt X, line 21.							
b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount   1c	1a	Is the organization an agent, trustee, custod	ian, or other intermed	diary for contribution	ns or other asse	ets not in	ncluded			
Amount    C   Beginning balance		on Form 990, Part X?						$\square$	Yes	X No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back be Contributions 2,358,007, 998,636, 1,668,264, 6,193,315, 836,633,633,633,633,633,633,633,633,633,	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
d Additions during the year  e Distributions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back by Contributions  1a Beginning of year balance  83,405,840, 69,181,840, 80,531,080, 69,330,387, 67,408,444 by Contributions  2,358,007, 998,636, 1,668,264, 6,193,315, 836,63 conditions on the street of the explanation has been provided in Part XIII.  A by Contributions  C Net investment earnings, gains, and losses 7,089,003, 9,724,945, -8,966,414, 9,969,586, 3,934,60 do grants or scholarships  4,441,337, 3,519,828, 2,890,558, 3,666,882, 1,902,71 do grants or scholarships  A doministrative expenses  F Administrative expenses  2,807,211, -7,020,247, 1,160,532, 1,295,325, 946,58 do gend of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  0000  C Term endowment  19,7900  C Term endowment  19,7900  C Term endowment  19,7900  C Term endowment 19,000 do gain and administered for the organization that are held and administered for the		Amount								
e Distributions during the year f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance	С	Beginning balance					1c			
f Ending balance	d	Additions during the year					1d			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?    If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.   Part V	е	Distributions during the year					1e			
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.    Part V   Endowment Funds   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four	f	Ending balance					1f			
Part V   Endowment Funds   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four yea	2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	ustodial accoun	nt liability	/?	X	Yes	No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back beginning of year balance 83,405,840. 69,181,840. 80,531,080. 69,330,387. 67,408,444 beginning of year balance 2,358,007. 998,636. 1,668,264. 6,193,315. 836,633 cell of the current year of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment 19,7900 // The percentages on lines 2a, 2b, and 2c should equal 100%.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years										X
Beginning of year balance	Par	t V   Endowment Funds Complete in								
b Contributions 2,358,007. 998,636. 1,668,264. 6,193,315. 836,63 c Net investment earnings, gains, and losses 7,089,003. 9,724,9458,966,414. 9,969,586. 3,934,60 d Grants or scholarships 4,441,337. 3,519,828. 2,890,558. 3,666,882. 1,902,71 e Other expenditures for facilities and programs f Administrative expenses 2,807,2117,020,247. 1,160,532. 1,295,325. 946,58 g End of year balance 91,218,724. 83,405,840. 69,181,840. 80,531,080. 69,330,38: 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 00000 % Permanent endowment 80.2100 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the										
c Net investment earnings, gains, and losses       7,089,003.       9,724,945.       -8,966,414.       9,969,586.       3,934,60         d Grants or scholarships       4,441,337.       3,519,828.       2,890,558.       3,666,882.       1,902,71         e Other expenditures for facilities and programs       2,807,211.       -7,020,247.       1,160,532.       1,295,325.       946,58         g End of year balance       91,218,724.       83,405,840.       69,181,840.       80,531,080.       69,330,38         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a Board designated or quasi-endowment       •0000       %         b Permanent endowment       80 • 2100       %         c Term endowment       19 • 7900       %         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the	1a									
d Grants or scholarships 4,441,337. 3,519,828. 2,890,558. 3,666,882. 1,902,71  e Other expenditures for facilities and programs  f Administrative expenses 2,807,2117,020,247. 1,160,532. 1,295,325. 946,58  g End of year balance 91,218,724. 83,405,840. 69,181,840. 80,531,080. 69,330,38  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment 0000 %  b Permanent endowment 80.2100 %  c Term endowment 19.7900 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	b	Contributions		-						836,636.
e Other expenditures for facilities and programs  f Administrative expenses 2,807,2117,020,247. 1,160,532. 1,295,325. 946,58 g End of year balance 91,218,724. 83,405,840. 69,181,840. 80,531,080. 69,330,38  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С	Net investment earnings, gains, and losses								
and programs  f Administrative expenses  g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment  b Permanent endowment  19.7900  C Term endowment  19.7900  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	d	Grants or scholarships	4,441,337.	3,519,828.	2,890,	3,666,882		5,882.	1,	902,719.
f Administrative expenses  g End of year balance  2,807,2117,020,247. 1,160,532. 1,295,325. 946,58  g End of year balance  91,218,724. 83,405,840. 69,181,840. 80,531,080. 69,330,389  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment  • 0000 %  b Permanent endowment  19.7900 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	е	Other expenditures for facilities								
g End of year balance  91,218,724. 83,405,840. 69,181,840. 80,531,080. 69,330,38  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment  • 0000  b Permanent endowment  19,7900  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the		. •								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	f									
a Board designated or quasi-endowment .0000 %  b Permanent endowment 80.2100 %  c Term endowment 19.7900 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	g					840.	80,531	1,080.	69,	330,387.
b Permanent endowment 80.2100 %  c Term endowment 19.7900 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	2		•	e (line 1g, column (a	)) held as:					
c Term endowment 19.7900 %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	а	• • • • • • • • • • • • • • • • • • • •		_%						
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the	b									
3a Are there endowment funds not in the possession of the organization that are held and administered for the	С		-* -							
W. N										
organization by:	За		ession of the organiza	ition that are held ar	nd administered	d for the			Г	V N-
- 9		organization by:								
V										X
(ii) Related organizations?										
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	b	-	· ·						3b	Λ
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment	Dai			wment funds.						
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.	rai			Dort IV line 11a S	coo Form 000 F	Dart V lin	20.10			
		· · · · · · · · · · · · · · · · · · ·	1		i i				<u> </u>	
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation		Description of property	` ,	( , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	. ,			( <b>a</b> ) Book	value
4 440 000 4 000 604		Land	4 110	<u> </u>		depr	COIALIUIT	-	5 102	604
7 456 450 0 650 400 4 005 005						2 61	EN 101			
				/,45	0,1/0.	۷,0:	JU, 103	<del>,                                    </del>	±,0UD	, 30 / •
c Leasehold improvements       1,355,225.       1,146,339.       208,886				1 25	5 225	1 1	16 330		200	886
				•					<i>ጋ∠</i> 1 2∩1	120
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 10, 301, 120	<u>ı otal</u>	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, line 10c, column	<u>(B))</u>				-	•

Sch	edule	D (F	orm	990)	(Rev.	12-2024)	COU.	M.T. X
	- 1 71					0:1		

Part VII Investments - Other Securities  Complete if the organization answered "Yes" of the organization of the organizat	on Form 990. Part IV. line 1		<u> </u>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives	, ,		•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.	on Form 000 Port IV line 1	11.0 Coo Form 000 Port V line 12	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-vear market value
(1) IMPACT INVESTMENT LOAN	13,897,894.	END-OF-YEAR MARKE	
(2)	13,031,034.	LIVE OF TEAK MARKE	I VALUE
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))	13,897,894.		
Part IX Other Assets	, ,		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11d. See Form 990, Part X, line 15.	
(a) I	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.	. (B))		
Part X Other Liabilities	5 000 D 1 N/ II		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			F25 520
(2) CHARITABLE GIFT ANNUITY LI			535,538.
(3) CHARITABLE TRUST LIABILITI	.ES		2,278,124.
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			2 012 662
Total. (Column (b) must equal Form 990, Part X, line 25, col.	. (B))		2,813,662.

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

Par	t XI Reconciliation of Revenue per Audited Financial Staten		Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		
1	Total revenue, gains, and other support per audited financial statements		. 1	52,311,885.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a 5,388,359	•	
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	5,388,359.
3	Subtract line 2e from line 1		3	46,923,526.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
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.)		. 5	46,923,526.
Pai	rt XII Reconciliation of Expenses per Audited Financial State		r Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		
1	Total expenses and losses per audited financial statements		. 1	26,928,132.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	26,928,132.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		. 5	26,928,132.
Pai	rt XIII Supplemental Information			
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III	art IV, lines 1b and 2b; Part V, line	e 4; Part	X, line 2; Part XI,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional information.		
	RT IV, LINE 2B:			
	E FOUNDATION RECEIVES AND DISTRIBUTES ASS			
	HER NOT-FOR-PROFIT ORGANIZATIONS UNDER CE			
	E FOUNDATION ACCEPTS A CONTRIBUTION FROM			
	PORTION OF THE RETURN ON INVESTMENT OF TH			
	JNDATION'S SENDING POLICY, TO ANOTHER ENT		FIED	BY THE
DOI	NOR. THE FOUNDATION HOLDS SUCH FUNDS AS D	ESIGNATED FUNDS.		
	RT X, LINE 2:			
	E PREPARATION OF CONSOLIDATED FINANCIAL S			
	COUNTING PRINCIPLES GENERALLY ACCEPTED IN			
	QUIRES THE FOUNDATION AND SUBSIDIARIES TO			
	S EXPOSURE TO VARIOUS TAX POSITIONS TAKEN			
	BSIDIARIES. MANAGEMENT HAS DETERMINED WH			
	T THE RECOGNITION THRESHOLD AND HAS MEASU			
	THOSE TAX POSITIONS. MANAGEMENT BELIEVE			
	BSIDIARIES HAVE ADEQUATELY ADDRESSED ALL			
THE	ERE ARE NO UNRECORDED TAX LIABILITIES. F	EDERAL TAX AUTHOR	RITIE	S

GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS THREE YEARS OF TAX RETURNS FILED. CALIFORNIA TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO

INTEREST OR PENALTIES ASSESSED TO THE FOUNDATION ARE RECORDED IN OPERATING EXPENSES. NO INTEREST OR PENALTIES FROM FEDERAL OR STATE TAX AUTHORITIES

EXAMINE AND AUDIT THE PREVIOUS FOUR YEARS OF TAX RETURNS FILED.

WERE RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

### COMMUNITY FOUNDATION SANTA CRUZ

94-2808039 Page 5 Schedule D (Form 990) (Rev. 12-2024) COUNTY Part XIII | Supplemental Information (continued) 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) (Rev. December 2024)

Department of the Treasury

Internal Revenue Service

Part I

**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.

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

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ

COUNTY

**Employer identification number** 

94-2808039

	Form 990, Part IV	/, line 14b.				
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gran	ts and other assistance,	
				he selection criteria used to award the g		Yes X No
	9,	J J	,			
2	For grantmakers Desc	rihe in Part V the	organization's	procedures for monitoring the use of its	grants and other assistance outsi	ide the
_	United States.	indo in i die v ene	organization o	or occurred for mornioning the doc or no s	granto ana otnor acciotantes cato	40 110
2		aa fallawina Dart	I lina 2 tabla ad	un ha duplicated if additional appear is no	adad \	
_3_	(a) Region	(b) Number of		n be duplicated if additional space is ne (d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total
	(a) negion	offices	èmployees.	(by type) (such as, fundraising, pro-	is a program service,	expenditures
		in the region	agents, and independent contractors	gram services, investments, grants to	describe specific type	for and
		in the region	contractors	recipients located in the region)	of service(s) in the region	investments
			in the region	· · · · · · · · · · · · · · · · · · ·		in the region
				COMMUNITY DEVELOPMENT,		
				EDUCATION/YOUTH		
				DEVELOPMENT, ENVIRONMENT		
NOR	TH AMERICA	0	0	AND HEALTH		1,475,388.
				COMMUNITY DEVELOPMENT AND		
EURC	סר.	0	0	EDUCATION/YOUTH DEVELOPMENT		280,000.
EUKC	)FE	•	•	EDUCATION/ TOUTH DEVELOPMENT		280,000.
AFR]	ICA	0	0	COMMUNITY DEVELOPMENT		39,572.
				+		
3 a	Subtotal	0	0			1,794,960.
b	Total from continuation					
	sheets to Part I	0	0			0.
С	Totals (add lines 3a					
,	and 3h)	0	0			1 794 960.

**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>(b)</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, FM\ appraisal, other)
		NORTH AMERICA	ENVIRONMENT	29,500.		0.		
		NORTH AMERICA	ENVIRONMENT	180,000.		0.		
		NORTH AMERICA	COMMUNITY DEVELOPMENT	447,728.		0.		
		NORTH AMERICA	COMMUNITY DEVELOPMENT	125,400.		0.		
		NORTH AMERICA	HEALTH	65,000.		0.		
			EDUCATION/YOUTH					
		NORTH AMERICA	DEVELOPMENT	24,520.		0.		
		NORTH AMERICA	COMMUNITY DEVELOPMENT	88,940.		0.		
		EUROPE	EDUCATION/YOUTH DEVELOPMENT	30,000.		0.		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a 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

12

**3** Enter total number of other organizations or entities

Schedule F (Form 990) (Rev. 12-2024)

Schedule F (Form 990) COUNTY 94-2808039 Page 2

chedule F (Form 990)	COUNT	1			94-20	00033		Page 2
Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</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, FM appraisal, other)
		EUROPE	COMMUNITY DEVELOPMENT	250,000.		0.		
			EDUCATION/YOUTH					
		NORTH AMERICA	DEVELOPMENT	13,290.		0.		
		NORTH AMERICA	ENVIRONMENT	501,010.		0.		
		AFRICA	COMMUNITY DEVELOPMENT	39,572.		0.		

Part III Grants and Other Assistanc Part III can be duplicated if ac			tes. Complete i	f the organization answered "Yes" o	on Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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) (Rev. 12-2024)

### 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.

### 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 SIGNIFICANT CHANGES OR ISSUES DURING THE GRANT PERIOD.

### PART I, LINE 3:

PART TT

THE FOUNDATION IS UTILIZING THE ACCRUAL METHOD TO ACCOUNT FOR EXPENDITURES ON SCHEDULE F, PART I.

LINE 1 (ACCOUNTING METHOD).

T 7 7 T		I	110000111111	, 11111	1100, .						
THE	FOUNDATI	ON IS	UTILIZIN	THE	ACCRUAL	METHOD	ТО	ACCOUNT	FOR	GRANT	
EXE	ENDITURES	ON S	CHEDULE F	, PAR	T II.						
	_		_		_						

### SCHEDULE I (Form 990)

(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization COMMUNITY COUNTY	FOUNDATI	ON SANTA CR	UZ				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 assis     Describe in Part IV the organization's propert II Grants and Other Assistance to III.	stance?ocedures for monit	oring the use of grant	funds in the United	States.			Yes X No
recipient that received more than \$	\$5,000. Part II can	be duplicated if additi	onal space is neede	ed.			•
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 noncash assistance	(h) Purpose of grant or assistance
KITCHEN TABLE ADVISORS 2150 ALLSTON WAY, SUITE 320 BERKELEY, CA 94704	99-1587057	501(C)(3)	66,667.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT
THE TREVOR PROJECT ATTN:DEVELOPMENT, PO BOX 69232 WEST HOLLYWOOD, CA 90069	95-4681287	501(C)(3)	9,300.	0.		HUMAN SERVICES	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 DEVELOPMENT	SCHOLARSHIP PROGRAMS
LOS ANGELES LGBT CENTER 1118 N. MCCADDEN PLACE LOS ANGELES, CA 90038	95-3567895	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT
COACHELLA VALLEY RESCUE MISSION 47470 VAN BUREN INDIO, CA 92201	95-2684844	501(C)(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, SUPPORT FOR FAMILIES IN NEED
PLANNED PARENTHOOD LOS ANGELES PO BOX 740528 LOS ANGELES, CA 90074	95-2408623	501(C)(3)	10,000.	0.		HEALTH	GENERAL OPERATING SUPPORT
<ul> <li>Enter total number of section 501(c)(3) at</li> <li>Enter total number of other organizations</li> </ul>	•	•					·

(a) Name and address of	(L) EIN	(a) IDO a saliana	(-1) A	(-) A	(C) NA - H I - C	(a) Description of	(1) D
(a) Name and address of organization or government	<b>(b)</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
ACADEMY OF MOTION PICTURE ARTS AND							
SCIENCE FOUNDATION/ACADEMY MUSEUM							
OF MOTION P - 400 BORTH ROXBURY						ARTS, HISTORY,	
DRIVE - BEVERLY HILLS, CA 90210	95-2243698	501(C )(3)	50,000.	0.		AND CULTURE	GENERAL OPERATING SUPPOR
J. PAUL GETTY TRUST							
1200 GETTY CENTER DRIVE						ARTS, HISTORY,	TO SUPPORT THE PATRON
LOS ANGELES, CA 90049	95-1790021	501(C )(3)	10,000.	0.		AND CULTURE	PROGRAM
BOYS AND GIRLS CLUBS OF GREATER							
OXNARD AND PORT HUENEME - 1900						COMMUNITY	BOYS AND GIRLS CLUBS
WEST 5TH STREET - OXNARD, CA 93030	95-1785162	501(C)(3)	20,000.	0.		DEVELOPMENT	SPECIAL RECEPTION
CEDARS-SINAI MEDICAL CENTER							
GIFT ADMINISTRATION 8700 BEVERLY							
BLVD, SUITE 2416 - LOS ANGELES, CA							
90048	95-1644600	501(C )(3)	10,000.	0.		HEALTH	GENERAL OPERATING SUPPOR
MUSIC ACADEMY OF THE WEST							
1070 FAIRWAY ROAD						ARTS, HISTORY,	SANTA BARBARA SUMMER
SANTA BARBARA, CA 93108	95-1525814	501(C )(3)	25,000.	0.		AND CULTURE	MUSIC PROGRAM
SANTA CRUZ HIGH SCHOOL PTA							
415 WALNUT AVE							GENERAL OPERATING
SANTA CRUZ, CA 95060	94-6174400	501(C )(3)	12,000.	0.		DEVELOPMENT	SUPPORT, GRAD NIGHT
SANTA CRUZ SPCA							
2601 CHANTICLEER AVENUE							
SANTA CRUZ, CA 95065	94-6171565	501(C )(3)	40,127.	0.		ENVIRONMENT	GENERAL OPERATING SUPPOR
TEMPLE BETH EL JEWISH COMMUNITY							ROCK SHABBAT AND GUS GOL
CENTER - 3055 PORTER GULCH ROAD -						COMMUNITY	FUND, GENERAL OPERATING
APTOS, CA 95003	94-6139655	501(C )(3)	54,628.	0.		DEVELOPMENT	SUPPORT
BOYS & GIRLS CLUB OF SANTA CRUZ							
COUNTY - 543 CENTER STREET - SANTA						EDUCATION/YOUTH	
CRUZ, CA 95060	94-6129075	501(C )(3)	27,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPOR

Schedule I (Form 990) COUNTY							74-2808039 Page 1
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	<b>(b)</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
CABRILLO FESTIVAL OF CONTEMPORARY MUSIC - 147 SOUTH RIVER STREET, SUITE 232 - SANTA CRUZ, CA 95060	94-6123298	501(C )(3)	13,172.	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT, NEW ORCHESTRA WORK 2025 SEASON
CABRILLO COLLEGE FOUNDATION 6500 SOQUEL DRIVE APTOS, CA 95003	94-6121953	501(C )(3)	457,993.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, WES, EMERGENCY FUND, CAP, & MORE
COMMITTEE FOR GREEN FOOTHILLS/GREEN FOOTHILLS FOUNDATION - 3921 E BAYSHORE RD - PALO ALTO, CA 94303	94-6121854	501(C )(3)	5,500.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, LENNIE ROBERTS LEGACY FUND
CALIFORNIA NATIVE PLANT SOCIETY 2707 K ST, STE 1 SACRAMENTO, CA 95816	94-6116403	501(C )(3)	5,500.	0.		ENVIRONMENT	YOUTH NATURE PROGRAMS, TO PRESERVE AND PROTECT NATIVE PLANTS
UC DAVIS FOUNDATION 1477 DREW AVE, STE 101 DAVIS, CA 95616	94-6081352	501(C )(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	SEADOC SOCIETY FUND OF THE SCHOOL OF VETERINARY MEDICINE
CALIFORNIA AGRICULTURAL LEADERSHIP FOUNDATION - PO BOX 479 - SALINAS, CA 93902	94-6069269	501(C )(3)	36,667.	0.		EDUCATION/YOUTH	2024 AG LEADERSHIP FELLOWSHIP
HAPPY VALLEY ELEMENTARY SCHOOL 3125 BRANCIFORTE DRIVE SANTA CRUZ, CA 95065	94-6002633	501(C )(3)	35,141.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT CULTURAL AND ARTS PROGRAMS AND ACADEMIC PROGRAMS
PACHAMAMA ALLIANCE P.O. BOX 29191 SAN FRANCISCO, CA 94129	94-3249793	501(C )(3)	10,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, SACRED HEADWATERS INITIATIVE
SAN LORENZO VALLEY HISTORICAL SOCIETY - PO BOX 576 - BOULDER CREEK, CA 95006	94-3240597	501(C )(3)	11,179.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY	Assistance to B		and Davis - P - C		adula I (Far 200) D		74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	eaule I (Form 990), Pa I	arτ 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
TIDES CENTER							TO SUPPORT CENTER
1012 TORNEY AVE						COMMUNITY	GENETICS AND SOCIETY
SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	16,000.	0.		DEVELOPMENT	PROJECT
PUBLIC POLICY INSTITUTE OF							
CALIFORNIA - 500 WASHINGTON							
STREET, STE 600 - SAN FRANCISCO,							PRIORITIES FOR CALINIAS
CA 94111	94-3207299	501(C)(3)	6,000.	0.		ENVIRONMENT	WATER INITIATIVE
			,				
THE INDEPENDENT INSTITUTE							
100 SWAN WAY						ARTS, HISTORY,	
OAKLAND, CA 94621	94-3008370	501(C )(3)	7,500.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
COMMUNITY ALLIANCE WITH FAMILY							
FARMERS - PO BOX 363 - DAVIS, CA							
95617	94-2914745	501(C)(3)	9,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
ST. FRANCIS SOUP KITCHEN							
205 MORA STREET	94-2880883	E01/G \/2\	10 400	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
SANTA CRUZ, CA 95060	94-2000003	501(C )(3)	10,400.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
CHILDREN'S DISCOVERY MUSEUM OF SAN							
JOSE - 180 WOZ WAY - SAN JOSE, CA						ARTS, HISTORY,	
95110	94-2870828	501(C)(3)	10,000.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
		(- / (- /					
THE TECH INTERACTIVE							
201 SOUTH MARKET STREET						ARTS, HISTORY,	
SAN JOSE, CA 95113	94-2864660	501(C)(3)	12,500.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
BIG BROTHERS BIG SISTERS OF SANTA							
CRUZ COUNTY - 740 FRONT STREET						EDUCATION/YOUTH	
SUITE 155 - SANTA CRUZ, CA 95060	94-2826754	501(C )(3)	24,331.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
ELKHORN SLOUGH FOUNDATION							
PO BOX 267							GENERAL OPERATING
MOSS LANDING, CA 95039	94-2823247	501(C)(3)	316,955.	0.		ENVIRONMENT	SUPPORT, CAPITAL CAMPAIGN

Page 1

Schedule I (Form 990)

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) LIFE LAB SCIENCE PROGRAM GENERAL OPERATING 1156 HIGH STREET EDUCATION/YOUTH 94-2778848 501(C)(3) 0 DEVELOPMENT SANTA CRUZ, CA 95064 52,500 SUPPORT, CAPITAL CAMPAIGN SAVE OUR SHORES 345 LAKE AVENUE SUITE A GENERAL OPERATING SANTA CRUZ, CA 95062 94-2745941 501(C)(3) 0 SUPPORT, BOARD MATCH 43,972 ENVIRONMENT MUSEUM OF ART AND HISTORY AT THE MCPHERSON CENTER (SANTA CRUZ MUSEUM OF ART AND - 705 FRONT ARTS, HISTORY, STREET - SANTA CRUZ, CA 95060 94-2718861 501(C)(3) 20,242 0. AND CULTURE GENERAL OPERATING SUPPORT HEALTH PROJECTS CENTER 9000 SOOUEL AVENUE SUITE 103 94-2713281 501(C)(3) 0 HEALTH SANTA CRUZ, CA 95062 20,000 GENERAL OPERATING SUPPORT SALUD PARA LA GENTE 195 AVIATION WAY, STE 200 WATSONVILLE, CA 95076 94-2705747 501(C)(3) 10,350 0. HEALTH GENERAL OPERATING SUPPORT FRIENDS OF THE SANTA CRUZ PUBLIC GENERAL OPERATING LIBRARIES - PO BOX 8472 - SANTA SUPPORT, SANTA CRUZ ARTS, HISTORY, 94-2612557 501(C)(3) AND CULTURE PUBLIC LIBRARIES CRUZ CA 95061 19,714. 0. ARTS COUNCIL SANTA CRUZ COUNTY GENERAL OPERATING, OPEN 1070 RIVER STREET ARTS, HISTORY, STUDIOS! WATSONVILLE. SANTA CRUZ, CA 95060 94-2600140 501(C)(3) 29,147. 0. AND CULTURE TEACHING ARTIST PATHWAYS COMMUNITY ACTION BOARD OF SANTA GENERAL OPERATING CRUZ COUNTY (CAB) - 406 MAIN SUPPORT, DAVENPORT STREET SUITE 207 - WATSONVILLE, CA RESOURCE SERVICE CENTER 95076 94-2523780 501(C)(3) 94,439. 0. HUMAN SERVICES FIRE RECOVERY SOCIETY OF ST. VINCENT DE PAUL-COUNCIL OF SANTA CRUZ COUNTY -1146 SOQUEL AVE, #4103 - SANTA CRUZ, CA 95062 94-2500194 501(C)(3) 0. 14,000 HUMAN SERVICES GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY						9	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	urt 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
HOSPICE OF SANTA CRUZ COUNTY 940 DISC DRIVE SCOTTS VALLEY, CA 95066	94-2497618	501(C )(3)	241,368.	0.		HEALTH	GENERAL OPERATING SUPPORT, GRIEF PROGRAM, ANGELS PROGRAM
MONARCH SERVICES 233 EAST LAKE AVENUE WATSONVILLE, CA 95076	94-2462783	501(C )(3)	40,824.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076	94-2460211	501(C )(3)	208,154.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, MEALS ON WHEELS
SANTA CRUZ TODDLER CARE CENTER 1738 16TH AVENUE SANTA CRUZ, CA 95062	94-2457539	501(C )(3)	18,000.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT
DOMINICAN HOSPITAL FOUNDATION 1555 SOQUEL DRIVE SANTA CRUZ, CA 95065	94-2450442	501(C)(3)	161,000.	0.		HEALTH	GENERAL OPERATING, HEALING GARDEN, PROSTATE CANCER SUPPORT GROUP, WIGS
LAND TRUST OF SANTA CRUZ COUNTY 911 CENTER STREET SANTA CRUZ, CA 95060	94-2431856	501(C)(3)	1,260,876.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, BEACH RANCH PROJECT, CIRCLE P RANCH
SANTA CRUZ MUSEUM OF NATURAL HISTORY - 1305 EAST CLIFF DRIVE - SANTA CRUZ, CA 95062	94-2427733	501(C )(3)	189,250.	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT, WHALE RESTORATION
FRIENDS OF THE RIVER FOUNDATION 3336 BRADSHAW ROAD, SUITE 335 SACRAMENTO, CA 95827	94-2400210	501(C)(3)	6,250.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
PENINSULA OPEN SPACE TRUST 222 HIGH STREET PALO ALTO, CA 94301	94-2392007	501(C )(3)	12,250.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY  Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		04-2808039 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 SYMPHONY 307 CHURCH STREET SANTA CRUZ, CA 95060	94-2373284	501(C )(3)	17,081.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT, SCHOOL VISIT SPONSORSHIP
SENIOR CITIZENS ORGANIZATION OF THE SAN LORENZO VALLEY - P.O. BOX 136 - BEN LOMOND, CA 95005	94-2317085	501(C )(3)	16,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, SENIOR & COMMUNITY CENTER
GREY BEARS, INC. 2710 CHANTICLEER AVENUE SANTA CRUZ, CA 95065	94-2298681	501(C )(3)	61,400.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, SENIOR FOOD PROGRAM
SENIOR LEGAL SERVICES OF SANTA CRUZ AND SAN BENITO COUNTIES - 317 SOQUEL AVENUE - SANTA CRUZ, CA 95062	94-2280258	501(C )(3)	128,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, EVENT SPONSORSHIP
SENIOR NETWORK SERVICES 3333 SOQUEL DR., STE. A SOQUEL, CA 95073	94-2259716	501(C )(3)	8,500.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPOR
SEMPERVIRENS FUND PO BOX 1417 LOS ALTOS, CA 94023	94-2155097	501(C )(3)	8,250.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, ANO NUEVO FUND
EARTHJUSTICE 50 CALIFORNIA STREET, STE 500 SAN FRANCISCO, CA 94111	94-1730465	501(C )(3)	12,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPOR
FAMILY SERVICE AGENCY OF THE CENTRAL COAST - 104 WALNUT AVENUE SUITE 208 - SANTA CRUZ, CA 95060	94-1716354	501(C )(3)	52,883.	0.		HEALTH	SURVIVOR'S HEALING CENTER, WOMENCARE, PAJAR VALLEY PROGRAMS
MID-COUNTY SENIOR CENTER 829 BAY AVENUE CAPITOLA, CA 95010	94-1711616	501(C )(3)	15,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY						9	04-2808039 Page 1
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
VOLUNTEER CENTER OF SANTA CRUZ COUNTY - 1740 17TH AVENUE, SUITE 2 - SANTA CRUZ, CA 95062	94-1702678	501(C )(3)	186,192.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, SANTA CRUZ GIVES, HELPING HANDS
PAJARO VALLEY HISTORICAL ASSOCIATION - PO BOX 623 - WATSONVILLE, CA 95077	94-1663161	501(C )(3)	36,009.	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT
EPISCOPAL CHURCH OF ST. JOHN THE BAPTIST - 125 CANTERBURY DRIVE - APTOS, CA 95003	94-1629317	501(C )(3)	12,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
SUTTER CARE AT HOME - SANTA CRUZ (HOME HEALTH)/VISITING NURSE ASSOCIATION OF SAN - PHILANTHROPY GIFT PROCESSING, PO BOX 160045 -	94-1622036		12,879.	0.		HEALTH	TO SUPPORT THE VNA SANTA
COMMUNITY FOUNDATION FOR MONTEREY COUNTY - 2354 GARDEN ROAD - MONTEREY, CA 93940	94-1615897	501(C )(3)	10,500.	0.		ENVIRONMENT	ELKHORN SLOUGH FOUNDATION VIA MONTEREY GIVES CAMPAIGN
PLANNED PARENTHOOD MAR MONTE 1691 THE ALAMEDA SAN JOSE, CA 95126	94-1583439	501(C )(3)	20,750.	0.		HEALTH	GENERAL OPERATING SUPPORT
SANTA CRUZ MONTESSORI SCHOOL 6230 SOQUEL DRIVE APTOS, CA 95003	94-1573507	501(C )(3)	9,000.	0.		EDUCATION/YOUTH	GENERAL OPERATING SUPPORT, SCHOLARSHIP FUND
GIRL SCOUTS OF CALIFORNIA CENTRAL COAST - DEVELOPMENT DEPARTMENT, 1500 PALMA DRIVE SUITE 110 - VENTURA, CA 93003	94-1567162	501(C)(3)	12,911.	0.		EDUCATION/YOUTH	TO SUPPORT GSCC SCOUTING PROGRAMS IN MONTEREY BAY AREA
HIDDEN VILLA 26870 MOODY ROAD LOS ALTOS HILLS, CA 94022	94-1539836	501(C )(3)	50,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY						9	4-2808039 Page 1
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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ST. ANTHONY FOUNDATION 150 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	94-1513140	501(C )(3)	26,765.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
UNITED WAY OF SANTA CRUZ COUNTY PO BOX 1458 CAPITOLA, CA 95010	94-1422471	501(C )(3)	46,636.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT
PAJARO VALLEY SHELTER SERVICES 115 BRENNAN STREET WATSONVILLE, CA 95076	94-1393418	501(C )(3)	135,508.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, EDUCATION SUPPORT
MORELAND NOTRE DAME SCHOOL 133 BRENNAN STREET WATSONVILLE, CA 95076	94-1347045	501(C )(3)	12,113.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, BLUE AND WHITE BANNER FUND
CURIODYSSEY AT COYOTE POINT 1651 COYOTE POINT DR SAN MATEO, CA 94401	94-1262434	501(C )(3)	10,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
KQED - NORTHERN CALIFORNIA PUBLIC BROADCASTING, INC - 2601 MARIPOSA STREET - SAN FRANCISCO, CA 94110	94-1241309	501(C )(3)	6,800.	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT
YWCA OF WATSONVILLE 340 EAST BEACH STREET WATSONVILLE, CA 95076	94-1212142	501(C )(3)	31,809.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, "LA ESCUELITA" 2024 PROGRAM
VISTA CENTER FOR THE BLIND AND VISUALLY IMPAIRED - 3315 MISSION DRIVE, SUITE B - SANTA CRUZ, CA 95065	94-1196206	501(C )(3)	5,500.	0.		HEALTH	GENERAL OPERATING SUPPORT
WALNUT AVENUE FAMILY & WOMEN'S CENTER - 303 WALNUT AVENUE - SANTA CRUZ, CA 95060	94-1186197	501(C )(3)	38,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							74-2808039 Page
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	art II.)	1
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BELLARMINE COLLEGE PREPARATORY							SCHOLARSHIP PROGRAM
960 WEST HEDDING STREET						EDUCATION/YOUTH	SUPPORT, CAPTIAL
SAN JOSE, CA 95126	94-1160938	501(C )(3)	40,000.	0.		DEVELOPMENT	CAMPAIGN/WADE CENTER
HOOVER INSTITUTION - STANFORD	71 1100300	001(0 )(0)	10,000.				
UNIVERSITY - OFFICE OF							
DEVELOPMENT, 434 GALVEZ MALL,						EDUCATION/YOUTH	
STANFORD UNIVERSITY - STANFORD, CA	94-1156365	501(C)(3)	130,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
	71 110000	001(0 )(0)	100,000.				
STANFORD UNIVERSITY							
PO BOX 20466						EDUCATION/YOUTH	
STANFORD, CA 94309	94-1156365	501(C)(3)	10,250.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
STANFORD UNIVERSITY-SCHOOL OF			· ·				
ENGINEERING - DEVELOPMENT							
SERVICES, PO BOX 20466 - STANFORD,						EDUCATION/YOUTH	
CA 94309	94-1156365	501(C )(3)	20,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
SALVATION ARMY SANTA CRUZ CORPS							GENERAL OPERATING
721 LAUREL STREET						COMMUNITY	SUPPORT, PROGRAM SUPPORT,
SANTA CRUZ, CA 95060	94-1156347	501(C )(3)	74,961.	0.		DEVELOPMENT	DONATION MATCH
SALVATION ARMY WATSONVILLE							
214 UNION STREET	04 1156345	501/6 \/2\	42.102	_			
WATSONVILLE, CA 95076	94-1156347	501(C )(3)	43,103.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
BOY SCOUTS OF AMERICA - SILICON							GWILLIAGODN DADDDOUG
VALLEY MONTEREY BAY AREA COUNCIL -						COMMUNITARY	SKILLICORN BARBEQUE,
1900 THE ALAMEDA SUITE 100 - SAN	04 1156054	E01/G \/3\	10 116	_		COMMUNITY	EAGLE SCOUTS EDUCATION
JOSE, CA 95126	94-1156254	DUI(C )(3)	10,116.	0.		DEVELOPMENT	FUND
SAVE THE REDWOODS LEAGUE							
111 SUTTER STREET, 11TH FLOOR							
SAN FRANCISCO, CA 94104	94-0843915	501(C)(3)	12,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
CHRISTIAN COUNSELING SERVICES	31 3313313		12,000.	<u> </u>			
ASSISTANCE FUND - 11040 N 28TH							
DRIVE, UNIT 327 - PHOENIX, AZ							
85029	93-4164091	501(C)(3)	25,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
	1 22 1101071		1 23,000.	· ·	l .		Och odd I/Ferra 000

Schedule I (Form 990) COUNTY				- (0.1			74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	<b>vernments</b> (Sche	edule I (Form 990), Pa r	art II.) T	1
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LONG TERM RECOVERY GROUP OF SANTA CRUZ COUNTY - 131 COTTINI WAY -	02 2501002	501/2 )/2)	50,600	0.		WINN GERWAGE	GENERAL OPERATING SUPPORT, UNMET NEEDS CASE
SANTA CRUZ, CA 95060	92-2581082	501(C )(3)	50,608.	0.		HUMAN SERVICES	#298
FRIENDS OF ALOHA VICKERY TRAIL 2900 RESEARCH PARK DRIVE SOQUEL, CA 95073	92-2105575	501(C )(3)	20,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
ESPERANZA COMMUNITY FARMS 8 ESTRELLAS CIRCLE SALINAS, CA 93905	92-0412067	501(C )(3)	21,250.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT
THE TRUST FOR CONSERVATION INNOVATION DBA MULTIPLIER - 548 MARKET ST, PMB 81178 - SAN							
FRANCISCO, CA 94104	91-2166435	501(C)(3)	33,333.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
MARTHA'S KITCHEN 311 WILLOW STREET SAN JOSE, CA 95110	91-2091094	501(C )(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
TRUCKEE RIVER WATERSHED COUNCIL PO BOX 8568							
TRUCKEE, CA 96162	91-1818748	501(C)(3)	6,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
TANNERY WORLD DANCE & CULTURAL CENTER - 1060 RIVER ST, #111 - SANTA CRUZ, CA 95060	90-0826298	501(C )(3)	25,000.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT
CENTER FOR FARMWORKER FAMILIES PO BOX 957 FELTON, CA 95018	90-0800339	501(C )(3)	38,200.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, DIRECT ASSISTANCE
SANTA CRUZ COUNTY ANIMAL SHELTER 1001 RODRIGUEZ STREET			,				
SANTA CRUZ, CA 95062	90-0039494	501(C)(3)	8,587.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art II.)	
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HORSE WHISPERS							
830 COLE ROAD							
AROMAS, CA 95004	88-4320339	501(C)(3)	9,600.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
SANTA CRUZ BLACK							
612 OCEAN STREET	00 4440455	504 (5. ) (0)				COMMUNITY	
SANTA CRUZ, CA 95060	88-1413455	501(C)(3)	6,200.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
CENTER FOR SUSTAINABLE FINANCE &							
PRIVATE WEALTH NORTH AMERICA - PO						COMMUNITY	
BOX 7035 - BERKELEY, CA 94707	88-0761980	501(C)(3)	10,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
,							
PROREP COALITION							
PO BOX 3577						COMMUNITY	
GRASS VALLEY, CA 95945	88-0736423	501(C )(3)	150,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
BLACK SURF SANTA CRUZ							GENERAL OPERATING
101 COOPER ST, STE 223						COMMUNITY	SUPPORT, 2024 LIBERATION
SANTA CRUZ, CA 95060	87-4556850	501(C)(3)	11,800.	0.		DEVELOPMENT	PADDLE OUT
PAJARO VALLEY HEALTHCARE DISTRICT							
PROJECT (DBA WATSONVILLE COMMUNITY							
HOSPITAL FO - PO BOX 2704 -	07 2222474	E01/G \/2\	FF4 F00	0		TITI A T MIT	GENERAL ODERATING GUDDORT
WATSONVILLE, CA 95077	87-2323474	501(C )(3)	554,500.	0.		HEALTH	GENERAL OPERATING SUPPORT
MAR VISTA FIELD PROJECT							TO REHABILITATE GRASS
617 EAST LAKE AVENUE						COMMUNITY	FIELD AND IRRIGATION
WATSONVILLE, CA 95076	85-1952365	501(C)(3)	179,151.	0.		DEVELOPMENT	INFRASTRUCTURE
,			,				
EL SISTEMA SANTA CRUZ							
235 SOUTH BRANCIFORTE AVENUE						EDUCATION/YOUTH	
SANTA CRUZ, CA 95062	84-4998415	501(C)(3)	27,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
COMMUNITY ARTS & EMPOWERMENT							GENERAL OPERATING
240 MAPLE AVENUE	02.4500465	501/5 )/3)		_		ARTS, HISTORY,	SUPPORT, INTERNSHIP
WATSONVILLE, CA 95076	83-4528109	DOT(G )(3)	5,300.	0.		AND CULTURE	SUPPORT

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MOUNTAINS 2 SEA							GENERAL OPERATING
1245 EUREKA CANYON ROAD						EDUCATION/YOUTH	SUPPORT, 2024 EMERGING
WATSONVILLE, CA 95076	83-0697842	501(C)(3)	22,500.	0.		DEVELOPMENT	JEDI AWARDS
REGGIE STEPHENS FOUNDATION 418 RIGG STREET							
SANTA CRUZ, CA 95060	82-3969806	501(C)(3)	15,850.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
THE BRIGID ALLIANCE PO BOX 58 PLANETARIUM STATION							
NEW YORK, NY 10024	82-3843989	501(C )(3)	8,000.	0.		HEALTH	GENERAL OPERATING SUPPORT
IMPACT EXPERIENCE INSTITUTE							
2323 BROADWAY	00 0404613	501/6 \/2\	10.000	_		COMMUNITY	
OAKLAND, CA 94612	82-2424613	DUI(C )(3)	10,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
MUSIC IN MAY							
P.O. BOX 2451	01 41 40 441	E01/G \/2\	F 500	_		ARTS, HISTORY,	GENERAL OPERATING GURDON
SANTA CRUZ, CA 95063	81-4148441	501(C )(3)	5,500.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
ASSOCIATION OF FAITH COMMUNITIES OF SANTA CRUZ COUNTY - 501 SOQUEL							
AVE STE G - SANTA CRUZ, CA 95062	81-3652622	501(C )(3)	42,500.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
WATSONVILLE FILM FESTIVAL PO BOX 172						ARTS, HISTORY,	GENERAL OPERATING
WATSONVILLE, CA 95077	81-3138376	501(C )(3)	73,500.	0.		AND CULTURE	SUPPORT, WATSONVILLE FILM FESTIVAL
MIIBORVIEDE, ON 35077	01 3130370	301(0 )(3)	73,300.	••		IND COLICIE	
FOOD WHAT?!							GENERAL OPERATING
1156 HIGH ST						EDUCATION/YOUTH	SUPPORT, EMERGING JEDI
SANTA CRUZ, CA 95064	81-2590280	501(C)(3)	89,850.	0.		DEVELOPMENT	AWARDS
THE CALI PROJECT (COMMUNITY							
ALLIANCE FOR LIFELONG							
INDEPENDENCE) - 505 CORCORAN	01 2102122	E01/G \/3\	75 000	_		HIMAN GERVIORS	TOWN GIVENING
AVENUE - SANTA CRUZ, CA 95062	81-2182122	DOT(C )(3)	75,000.	0.		HUMAN SERVICES	LOAN GIVENESS

Schedule I (Form 990) COUNT I							74-2000039 Page
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations T	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	art II.)	T
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ROTARY CLUB OF SANTA CRUZ SUNRISE FOUNDATION - PO BOX 7026 - SANTA CRUZ, CA 95061	81-0619851	501(C)(3)	7,000.	0.		COMMUNITY DEVELOPMENT	PROGRAM SUPPORT, BIKE RIDE FUNDRAISER/SPONSORSHIP
<u> </u>	02 0023002		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			
THE MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624	81-0369262	501(C )(3)	50,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
SENDEROS 840 NORTH BRANCIFORTE AVE SANTA CRUZ, CA 95062	80-0893412	501(C )(3)	40,250.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, PROGRAM SUPPORT
CANCER PATIENT ALLIANCE							
312 FOUNTAIN AVENUE PACIFIC GROVE, CA 93950	77-0569948	501(C)(3)	10,000.	0.		HEALTH	TO SUPPORT THE SALINAS VALLEY ALLIANCE CANCER
INSIGHT SANTA CRUZ 740 FRONT STREET SUITE 240						EDUCATION/YOUTH	TEACHER DANA TOWARDS HOUSING FUND, CAPITAL
SANTA CRUZ, CA 95060	77-0567516	501(C )(3)	14,000.	0.		DEVELOPMENT	CAMPAIGNS
COMMUNITIES ORGANIZED FOR RELATIONAL POWER IN ACTION - 95 ALTA VISTA AVENUE - WATSONVILLE,						COMMUNITY	
CA 95076	77-0557460	501(C )(3)	20,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
ST. FRANCIS HIGH SCHOOL SALESIAN  COLLEGE PREPARATORY - 2400 EAST  LAKE AVENUE - WATSONVILLE, CA  95076	77-0553474	501(C)(3)	19,503.	0.		EDUCATION/YOUTH	THE BURGUNDY & GRAY GALA,
	55551/1		13,303.				
VENTANA WILDERNESS ALLIANCE							
288 PEARL ST. SUITE 101 MONTEREY, CA 93940	77-0532467	501(C )(3)	5,179.	0.		ENVIRONMENT	YOUTH IN WILDERNESS
WATSONVILLE WETLANDS WATCH 500 HARKINS SLOUGH ROAD				_			
WATSONVILLE, CA 95019	77-0519882	P01(C )(3)	58,242.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							74-2505039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	art II.)	T
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SIENA HOUSE							GENERAL OPERATING,
108 HIGH STREET							PROGRAMS BENEFITING YOUTH
SANTA CRUZ, CA 95060	77-0518866	501(C )(3)	82,747.	0.		HEALTH	AND WOMEN
HOMELESS GARDEN PROJECT							
PO BOX 617						COMMUNITY	
SANTA CRUZ, CA 95061	77-0475165	501(C )(3)	78,091.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
BINITI CROZ, CII 33001	77 0473103	301(0 )(3)	70,031.	· ·		BHVHHOIMHNI	CENTRAL CLEANING BOLLOKI
O'NEILL SEA ODYSSEY							
2222 EAST CLIFF DRIVE SUITE 222							
SANTA CRUZ, CA 95062	77-0464784	501(C )(3)	63,719.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
CRUZIO							
877 CEDAR STREET SUITE 150						EDUCATION/YOUTH	
SANTA CRUZ, CA 95060	77-0459330	501(C )(3)	74,914.	0.		DEVELOPMENT	REIMBURSEMENT REQUESTS
SANTA CRUZ MOUNTAINS TRAIL							
STEWARDSHIP - PO BOX 331 - SANTA	77 0457405	E01/G \/2\	70 700	_		ENVITDONMENT	GENERAL OPERATING
CRUZ, CA 95061 AROMAS SAN JUAN BAUTISTA COMMUNITY	77-0457425	501(0 )(3)	72,700.	0.		ENVIRONMENT	SUPPORT, TRAIL WORK
SCHOOLS FOUNDATION - 2300 SAN JUAN							
HIGHWAY - SAN JUAN BAUTISTA, CA						EDUCATION/YOUTH	
95045	77-0431330	501(C)(3)	140,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
SANTA CRUZ HILLEL FOUNDATION							
801 HIGH STREET							
SANTA CRUZ, CA 95060	77-0427628	501(C )(3)	6,330.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
PAJARO VALLEY YOUTH SOCCER CLUB							
PO BOX 3242							DEVELOPMENT PROGRAMS AND
FREEDOM, CA 95019	77-0420362	501(C)(3)	136,004.	0.		DEVELOPMENT	COACHING CERTIFICATIONS
PONNY DOON COMMINITAL CCHOOL							CENEDAI ODEDAMINO
BONNY DOON COMMUNITY SCHOOL FOUNDATION - PO BOX 8089 - SANTA						EDUCATION/YOUTH	GENERAL OPERATING
CRUZ, CA 95061	77-0412170	501(C )(3)	12,742.	0.		DEVELOPMENT	SUPPORT, AGENCY PAYOUT REQUEST CORRECTION
CROZ, CH 93001	1 ,, 04171,0	Por(C /(J/	12,742.	U .		PT 4 THOT HEIM I	ENDOUBLE CONNECTION

Schedule I (Form 990) COUNTY						9	04-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	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
SANTA CRUZ COUNTY VETERANS MEMORIAL BUILDING - PO BOX 1303 - SANTA CRUZ, CA 95061	77-0385016	501(C)(3)	12,000.	0.		HUMAN SERVICES	AGENCY REQUEST PAYOUT
SHARED ADVENTURES PO BOX 396 SANTA CRUZ, CA 95061	77-0366565	501(C )(3)	27,000.	0.		HUMAN SERVICES	2024'S ROARING CAMPS HOLIDAY LIGHTS TRAIN
THE 418 PROJECT 155 SOUTH RIVER STREET SANTA CRUZ, CA 95060	77-0335796	501(C )(3)	937,047.	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT, SECRET SANTA, RISE TOGETHER INVESTMENT
LEADERSHIP SANTA CRUZ COUNTY 101 COOPER STREET SANTA CRUZ, CA 95060	77-0335391	501(C )(3)	5,500.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, CLASS 37 AG DAY 2024
SANTA CRUZ BARRIOS UNIDOS 1817 SOQUEL AVENUE SANTA CRUZ, CA 95060	77-0333450	501(C )(3)	80,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING, YOUTH-FOCUSED OPIOID TREATMENT AND PREVENTION
FAMILIES IN TRANSITION, INC. 406 MAIN STREET SUITE 326 WATSONVILLE, CA 95076	77-0327992	501(C )(3)	46,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY - 800 OHLONE PARKWAY - WATSONVILLE, CA 95076	77-0326685	501(C )(3)	351,306.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
PAJARO VALLEY LOAVES AND FISHES 150 SECOND STREET WATSONVILLE, CA 95076	77-0319247	501(C)(3)	117,437.	0.		HUMAN SERVICES	GENERAL OPERATING, TURKEY TROT, KITCHEN RENOVATION PROJECT
UNITED SERVICES AGENCY, INC 317 CENTENNIAL SANTA CRUZ, CA 95060	77-0311835	501(C)(3)	20,723.	0.		COMMUNITY DEVELOPMENT	TEDXSANTA CRUZ, LEGAL AND MEDICAL FOR UKRAINIAN FAMILIES

Schedule I (Form 990) COUNTY					111/5 205		74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor ⊺	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	art II.)	T
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							GENERAL OPERATING,
DIENTES COMMUNITY DENTAL CARE							WATSONVILLE EXPANSION,
1830 COMMERCIAL WAY		F01/7 \/2\	100.000				COMMERCIAL WAY CLINIC
SANTA CRUZ, CA 95065	77-0311752	501(C )(3)	182,900.	0.		HEALTH	REMODEL ODERATING
CASA OF SANTA CRUZ COUNTY							GENERAL OPERATING, JUVENILE JUSTICE,
813 FREEDOM BLVD							IMAGINE! 2024
WATSONVILLE, CA 95076	77-0305354	501(C )(3)	82,707.	0.		HUMAN SERVICES	SPONSORSHIP
	77 0000001	552(5 )(5)	02,707.	•			,
CUPERTINO ROTARY ENDOWMENT							
FOUNDATION - PO BOX 1101 -						COMMUNITY	
CUPERTINO, CA 95015	77-0288042	501(C)(3)	30,000.	0.		DEVELOPMENT	THE PERMANENT FUND DRIVE
LOS ALTOS COMMUNITY FOUNDATION							
183 HILLVIEW AVENUE						EDUCATION/YOUTH	
LOS ALTOS HILLS, CA 94022	77-0273721	501(C)(3)	10,000.	0.		DEVELOPMENT	MVLA SCHOLARSHIP SUPPORT
PAJARO VALLEY PREVENTION AND							GENERAL OPERATING, OPIOID
STUDENT ASSISTANCE, INC 335							AWARENESS, EMPOWER
EAST LAKE AVENUE - WATSONVILLE, CA				_			WATSONVILLE, RISE
95076	77-0269322	501(C)(3)	96,000.	0.		HEALTH	TOGETHER
VENTURES							GENERAL OPERATING
PO BOX 2375						COMMUNITY	SUPPORT, VENTURES'
WATSONVILLE, CA 95077	77-0247648	501(C )(3)	29,450.	0.		DEVELOPMENT	SEMILITAS PROGRAM
milbonville, en 33077	77 0247040	301(0 )(3)	25,450.	· ·		BHVHHOIMHNI	DIMILITIES TROCKEM
ASSIST INTERNATIONAL INC							
800 S STOCKTON AVE							TO SUPPORT THE WORK OF
RIPON, CA 95366	77-0243475	501(C)(3)	6,000.	0.		HUMAN SERVICES	CAMINUL FELIX IN ROMANIA
-							
KIDPOWER TEENPOWER FULLPOWER							
PO BOX 1212						EDUCATION/YOUTH	
SANTA CRUZ, CA 95061	77-0226712	501(C )(3)	27,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
DIVERSITY CENTER							
PO BOX 8280						COMMUNITY	
SANTA CRUZ, CA 95061	77-0212967	501(C)(3)	91,100.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT

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AGRI-CULTURE							
141 MONTE VISTA AVENUE							
WATSONVILLE, CA 95076	77-0212413	501(C )(3)	143,332.	0.		ENVIRONMENT	GENERAL OPERATING SUPPOR
COUNTY PARK FRIENDS 870 17TH AVENUE, SUITE 2 SANTA CRUZ, CA 95062	77-0209249	501(C)(3)	259,676.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING, TREASURE COVE PARK, JUNIOR GUARDS, DE YOUNG MUSEUM
HABITAT FOR HUMANITY MONTEREY BAY 555 MAIN ST WATSONVILLE, CA 95019	77-0206356	501(C )(3)	8,829.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, SANTA CRUZ COUNTY SUPPORT
CENTRAL COAST YMCA 600 CAMINO EL ESTERO MONTEREY, CA 93940	77-0202335	501(C )(3)	34,616.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPOR' OF THE WATSONVILLE YMCA
AGRICULTURAL HISTORY PROJECT PO BOX 1181 WATSONVILLE, CA 95077	77-0165945	501(C )(3)	37,293.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPOR
VALLEY CHURCHES UNITED 9400 HIGHWAY 9, PO BOX 367 BEN LOMOND, CA 95005	77-0163322	501(C )(3)	11,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, VALLEY CHRISTMA PROJECT
CONFLICT RESOLUTION CENTER 614 OCEAN STREET SANTA CRUZ, CA 95060	77-0129553	501(C )(3)	50,250.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, EVICTION DEFENS
HOUSING MATTERS 115-B CORAL STREET SANTA CRUZ, CA 95060	77-0126783	501(C)(3)	81,050.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPOR
PAJARO VALLEY ARTS 37 SUDDEN STREET WATSONVILLE, CA 95076	77-0107201		22,203.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT, OUTREACH, EXHIBITS AND ARTISTS

Schedule I (Form 990) COUNT I							4-2000033 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.)	T
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FAMILY SUPPORTIVE HOUSING							
692 NORTH KING ROAD							
SAN JOSE, CA 95133	77-0106237	501(C)(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
CATHOLIC CHARITIES DIOCESE OF							GENERAL OPERATING SUPPORT, CZU SUPPORT &
MONTEREY - 922 HILBY AVENUE, SUITE C - SEASIDE, CA 93955	77-0042961	501(C)(3)	1,063,000.	0.		HUMAN SERVICES	CASE MANAGEMENT
WATSONVILLE HIGH SCHOOL FOUNDATION 17 HAWTHORNE AVENUE WATSONVILLE, CA 95076	77-0008389		10,112.	0.		EDUCATION/YOUTH	GENERAL OPERATING SUPPORT
NAMI SANTA CRUZ COUNTY 35 PENNY LANE, SUITE 2 WATSONVILLE, CA 95076	77-0002878	501(C)(3)	31,500.	0.		HEALTH	GENERAL OPERATING SUPPORT, SPRING MATCHING CAMPAIGN
,			,				
RICE UNIVERSITY							
6100 MAIN STREET						EDUCATION/YOUTH	GENERAL OPERATING
HOUSTON, TX 77005	74-1109620	501(C )(3)	260,000.	0.		DEVELOPMENT	SUPPORT, OPENSTAX
TAHOE TRUCKEE COMMUNITY FOUNDATION PO BOX 366 TRUCKEE, CA 96160	68-0416404	501(C )(3)	308,000.	0.		COMMUNITY DEVELOPMENT	THE DONOR PARTY CHARITABLE FUND, SCHOLARSHIP SUPPORT
JACOB'S HEART CHILDREN'S CANCER SUPPORT SERVICES - 567 AUTO CENTER DRIVE - WATSONVILLE, CA 95076	68-0413822	501(C )(3)	39,797.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, EMERGING JEDI AWARDS, PROGRAM SUPPORT
COASTAL WATERSHED COUNCIL 107 DAKOTA AVENUE, SUITE 4	60.0360700	501/5 )/2)	05.500				
SANTA CRUZ, CA 95060	68-0368798	pn1(c )(3)	25,500.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST. MONTGOMERY, AL 36104	63-1135091	501(C )(3)	5,500.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
1011150HIRT, HI 50104	03 1133031	P(C /(J/	3,300.	٠.	1	Part & TICOMMENT	PERSONAL OFFICE POLICE

Schedule I (Form 990) COUNTY							4-2000039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	art II.)	I
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SOUTHERN POVERTY LAW CENTER							
400 WASHINGTON AVENUE							
MONTGOMERY, AL 36104	63-0598743	501(C)(3)	6,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
THE SAFINA CENTER AT STONY BROOK							
UNIVERSITY - 80 NORTH COUNTRY RD -						EDUCATION/YOUTH	
SETAUKET, NY 11733	61-1406022	501(C)(3)	10,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
UNITED FOOD BANK OF PLANT CITY							HURRICANE-IMPACTED
702 E ALSOBROOK ST, STE H							BERRY-GROWING COMMUNITIES
PLANT CITY, FL 33563	59-3069728	501(C )(3)	75,000.	0.		HUMAN SERVICES	IN HILLSBOROUGH
ROAD RUNNERS OF AMERICA-TAMPA BAY							TO SPONSOR THE 2025
RUNNERS - PO BOX 137, 19046 BRUCE						COMMUNITY	DRISCOLLS STRAWBERRY
B DOWNS BLVD - TAMPA BAY, FL 33647	59-2130553	501(C)(3)	12,500.	0.		DEVELOPMENT	CLASSIC ROAD RACE
CLEARWATER MARINE AQUARIUM							
249 WINDWARD PASSAGE							
CLEARWATER, FL 33767	59-2086737	501(C)(3)	6,000.	0.		ENVIRONMENT	MANATEES ONLY
DEDI ANDO GUDI GILLAN MI GDANIII							DOADD GOVEDNANCE
REDLANDS CHRISTIAN MIGRANT ASSOCIATION - 402 WEST MAIN STREET						EDUCATION/YOUTH	BOARD GOVERNANCE
	59-1221966	E01/G \/3\	70 000	0.		DEVELOPMENT	TRAINING, CAPITAL CAMPAIGN
- IMMOKALEE, FL 34142	39-1221966	501(C )(3)	70,000.	0.		DEVELOPMENT	CAMPAIGN
NATURE CONSERVANCY							GENERAL OPERATING
4245 NORTH FAIRFAX DRIVE SUITE 100							SUPPORT, PROGRAM SUPPORT
ARLINGTON, VA 22203	53-0242652	501(C )(3)	85,000.	0.		ENVIRONMENT	CA AND HI
AMERICAN DED CROSS							
AMERICAN RED CROSS PO BOX 37295							
	53-0196605	501/C \/3\	5,800.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
WASHINGTON, DC 20013	33-0130003	DOT(C )(3)	5,800.	0.		TIOMAN SERVICES	GENERAL OFERALING SUPPORT
AMERICAN RED CROSS OF THE CENTRAL							GENERAL OPERATING
COAST - PO BOX AR - CARMEL, CA							SUPPORT, SUPPORT IN SANTA
93921	53-0196605	501(C )(3)	9,147.	0.		HEALTH	CRUZ COUNTY

Schedule I (Form 990) COUNTY  Part II Continuation of Grants and Other A	Assistance to De	mostic Organizations	and Domostic Go	vornments (Sch	adula I (Form 990) Pa		4-2808039 Page
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NUCLEAR THREAT INITIATIVE 1776 EYE STREET, N.W., STE 600 WASHINGTON, DC 20006	52-2289435	501(C)(3)	40,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
WORLD WILDLIFE FUND 1250 24TH ST NW, STE 1105 WASHINGTON, DC 20090	52-1693387	501(C )(3)	50,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
GREEN AMERICA 1612 K STREET NW, STE 600 WASHINGTON, DC 20006	52-1660746	501(C)(3)	5,300.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
NATIONAL PARK FOUNDATION 1500 K STREET NW, SUITE 700 WASHINGTON, DC 20005	52-1086761	501(C )(3)	10,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
ARKANSAS COMMUNITY FOUNDATION  5 ALLIED DRIVE, SUITE 51110  BUILDING 5, 11TH FLOOR - LITTLE  ROCK, AR 72202	52-1055743	501(C)(3)	11,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, CONWAY COUNTY COMMUNITY
SANTA CRUZ COUNTY ANIMAL SHELTER FOUNDATION - 2200 7TH AVENUE - SANTA CRUZ, CA 95060	51-0439604	501(C)(3)	7,250.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, SPAY AND NEUTER SURGERIES
TIDES FOUNDATION 1012 TORNEY AVE SAN FRANCISCO, CA 94219	51-0198509	501(C)(3)	8,000.	0.		COMMUNITY DEVELOPMENT	THE HEALTHY DEMOCRACY
FRIENDS OF SANTA CRUZ STATE PARKS 1543 PACIFIC AVENUE, SUITE 206 SANTA CRUZ, CA 95060	51-0183410	501(C)(3)	14,697.	0.		ENVIRONMENT	GENERAL OPERATING, WILDER FLOOD RECOVERY, CASTRO ADOBE STATE HISTORIC PARK
CALIFORNIA WILDERNESS COALITION - CALWILD - 4900 SHATTUCK AVE, #22627 - OAKLAND, CA 94609	51-0183228	501(C )(3)	6,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY	Assistance to De	maatia Oussanisatiana	and Domestic Co	versmente (Sob	odulo I (Form 000) Po		04-2808039 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
KUUMBWA JAZZ CENTER 320-2 CEDAR STREET SANTA CRUZ, CA 95060	51-0159252	501(C)(3)	25,869.	0.		ARTS, HISTORY,	GENERAL OPERATING, SUMMER
INSTITUTE FOR SECURITY AND TECHNOLOGY - 5800 HARBORD DRIVE - OAKLAND, CA 94611	47-5677755	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPOR
IM-POSSIBLE INC D.B.A. THE MISSION: RENEWAL CENTER - 925 W ARKANSAS ST - DURANT, OK 74701	47-5439413	501(C)(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPOR
NEW WAY HOMES 1040 MYSTERY SPOT ROAD SANTA CRUZ, CA 95065	47-4091853	501(C)(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, ST. JOHN'S HOUS
NEW WAY HOMES 189 WALNUT AVE. SANTA CRUZ, CA 95060	47-4091853	501(C)(3)	100,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, ST. JOHN'S HOUS
CELEBRITY ADVENTURES 11201 N TATUM BLVD, STE 300 PHOENIX, AZ 85028	47-3454437	501(C)(3)	100,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPOR
ESPERANZA DEL VALLE 925 46TH AVE, # 108 CAPITOLA, CA 95010	47-2040811	501(C )(3)	30,000.	0.		ARTS, HISTORY,	GENERAL OPERATING, SUMME INSTITUTE YOUTH DANCE PROGRAM
MONTEREY BAY FISHERIES TRUST 101 COOPER STREET SANTA CRUZ, CA 95060	47-1978379	501(C)(3)	11,000.	0.		ENVIRONMENT	GENERAL OPERATING, SEAFOOD DISTRIBUTION VIA SECOND HARVEST
BRUCE W. WOOLPERT ALGEBRA ACADEMY 350 TECHNOLOGY DRIVE WATSONVILLE, CA 95076	47-1116673	501(C)(3)	25,000.	0.		EDUCATION/YOUTH	GENERAL OPERATING SUPPOR

Schedule I (Form 990) COUNT I							4-2000039 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	T
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DIGITAL NEST 349 MAIN STREET, SUITE 201 WATSONVILLE, CA 95076	46-5757256	501(C )(3)	90,066.	0.		EDUCATION/YOUTH	GENERAL OPERATING SUPPORT, EMERGING JEDI AWARD
MOTION PACIFIC DANCE 131 FRONT ST, STE E SANTA CRUZ, CA 95060	46-5251353	501(C )(3)	20,100.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT
SANTA CRUZ SHAKESPEARE 501 UPPER PARK ROAD SANTA CRUZ, CA 95065	46-4635444	501(C )(3)	430,595.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPORT, CAPITAL CAMPAIGN
ACTIVITIES4ALL 534 CEREZE STREET WATSONVILLE, CA 95076	46-4487567	501(C )(3)	25,250.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT
SALUD Y CARIO 1723 GREY SEAL RD SANTA CRUZ, CA 95062	46-1924115	501(C )(3)	43,250.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, GIRLS PROGRAMMING
SANTA CRUZ CHILDREN'S MUSEUM OF DISCOVERY - PO BOX 1903 - SOQUEL, CA 95073	46-1699711	501(C )(3)	11,000.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, LOW-INCOME MEMBERSHIP ASSISTANCE
SOCIAL GOOD FUND PO BOX 5473 RICHMOND, CA 94805	46-1323531	501(C )(3)	21,250.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
VETS 4 VETS SANTA CRUZ 842 FRONT STREET SANTA CRUZ, CA 95060	45-3697584	501(C )(3)	20,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
JERRY LOYOLA FOUNDATION 12935 ROSE COURT WATSONVILLE, CA 95076	45-2160940	501(C )(3)	7,500.	0.		HUMAN SERVICES	TO SUPPORT BASIC NEEDS OF FAMILIES FACING CANCER

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		74-2000039 Page 1
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THE CLIMATE CENTER  1275 - 4TH STREET, #191  SANTA ROSA, CA 95404	45-0485495	501(C )(3)	6,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
KALAMAZOO COLLEGE 1200 ACADEMY STREET KALAMAZOO, MI 49006	38-1358014	501(C )(3)	100,000.	0.		EDUCATION/YOUTH	4TH INSTALLMENT OF \$1M LEGACY GRANT
SANTA CRUZ LOCAL 877 CEDAR STREET, SUITE 150 SANTA CRUZ, CA 95060	37-2064285	501(C )(3)	104,100.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, MATCHING GRANTS
SAVE THE WAVES COALITION 849 ALMAR AVENUE, SUITE C, #163 SANTA CRUZ, CA 95060	36-4515216	501(C )(3)	10,500.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
INTERNATIONAL ROTARY FOUNDATION 1560 SHERMAN AVE EVANSTON, IL 60201	36-3245072	501(C )(3)	12,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, TOY & BLANKET DRIVE
PLANNED PARENTHOOD ILLINOIS 17 N STATE STREET SUITE 500 CHICAGO, IL 60602	36-2170901	501(C )(3)	6,000.	0.		HEALTH	TO SUPPORT SERVICES INDIGENT CLIENTS FROM OUT-OF-STATE
CENTER FOR PRODUCE SAFETY 1100 MAIN ST, STE 210 WOODLAND, CA 95695	35-2489134	501(C )(3)	20,000.	0.		ENVIRONMENT	FUNDRAISING CAMPAIGN
AMAH MUTSUN LAND TRUST 2460 17TH AVENUE #1019 SANTA CRUZ, CA 95062	32-0447436	501(C )(3)	103,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, PURCHASE OF A TRUCK
KARIMU INTERNATIONAL HELP FOUNDATION - 75260 VISTA CORONA - PALM DESERT, CA 92211	32-0227956	501(C )(3)	40,250.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, TANZANIAN MEDICAL CLINICS

Schedule I (Form 990) COUNT I							74-2000033 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	
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HAPPY VALLEY ELEMENTARY SCHOOL							
PARENT CLUB - 3125 BRANCIFORTE DR						EDUCATION/YOUTH	GENERAL OPERATING SUPPORT
- SANTA CRUZ, CA 95065	31-1777497	501(C )(3)	7,500.	0.		DEVELOPMENT	SCHOOL PARENT CLUB
THE SANTA CRUZ HUB FOR SUSTAINABLE							
LIVING - 703 PACIFIC AVE - SANTA CRUZ, CA 95060	31-1748056	501(C)(3)	15,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
COMMON CAUSE EDUCATION FUND 805 15TH ST NW, STE 800							
WASHINGTON, DC 20005	31-1705370	501(C)(3)	5,500.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
CASA DE LA CULTURA CENTER 225 SALINAS RD, 4A						ARTS, HISTORY,	GENERAL OPERATING SUPPORT, EMPLOYEE
WATSONVILLE, CA 95076	30-0586010	501(C)(3)	24,510.	0.		AND CULTURE	DONATION/SERVICE MATCH
WILDLIFE CONSERVATION NETWORK 209 MISSISSIPPI STREET							TICKETS TO JANE GOODALL
SAN FRANCISCO, CA 94107	30-0108469	501(C )(3)	9,750.	0.		ENVIRONMENT	90TH BIRTHDAY EVENT
UNCHAINED PO BOX 441	07.5500745	F04 (G ) (2)	5 750				
SOQUEL, CA 95073	27-5502745	501(C )(3)	5,750.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
JUNIOR ACHIEVEMENT WORLDWIDE 745 ATLANTIC AVENUE							
BOSTON, MA 02111	27-3666259	501(C )(3)	20,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
POSITIVE DISCIPLINE COMMUNITY RESOURCES - PO BOX 5365 - SANTA						EDUCATION/YOUTH	GENERAL OPERATING
CRUZ, CA 96063	27-1364795	501(C)(3)	17,350.	0.		DEVELOPMENT	SUPPORT, EVENT SUPPORT
PEACE OF MIND DOG RESCUE PO BOX 51554 PACIFIC GROVE, CA 93950	27-1154816		11,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
	1 2, 1131310	55210 /10/	1 11,000.	· · ·	1		PERIOD OF ENGLISHED BOTTOKI

Schedule I (Form 990) COUNT I	A : - t - D		and Davis - H - O		adula I (Farres 000) D		74-2000039 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	eaule i (Form 990), Pa l	ιπ 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
TEEN KITCHEN PROJECT PO BOX 1853 SOQUEL, CA 95073	27-0524692	501(C )(3)	121,750.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT, NEW KITCHEN EQUIPMENT
FARM DISCOVERY AT LIVE EARTH PO BOX 3490 FREEDOM, CA 95019	26-3728160	501(C )(3)	15,250.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT, 2024 FALL AGE
FINDING SOPHIA 2841 PORTER STREET SUITE C SOQUEL, CA 95073	26-2667700	501(C )(3)	10,562.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, MEXICO PROJECT
NEXT GENERATION SCHOLARS 1018 E STREET SAN RAFAEL, CA 94901	26-1110584	501(C )(3)	50,000.	0.		EDUCATION/YOUTH	GENERAL OPERATING SUPPORT, KICKBALL MATCH
YOUNG LADIES GRAND INSTITUTE - SANTA CRUZ #95 - 222 HIGHLAND AVE - SANTA CRUZ, CA 95060	23-7514541	501(C )(3)	10,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPO
SANTA CRUZ COMMUNITY HEALTH 125 WATER STREET A2 SANTA CRUZ, CA 95060	23-7428303	501(C )(3)	367,673.	0.		HEALTH	GENERAL OPERATING SUPPORT, ADOLESCENT OPIOID USE DISORDER
UC SANTA CRUZ FOUNDATION  UC SANTA CRUZ OFFICE OF SPONSORED  PROJECTS, 1156 HIGH STREET, MS:  OSP - SAN	23-7394590	501(C )(3)	400,000.	0.		EDUCATION/YOUTH	GENERAL OPERATING, HUMANITIES INSTITUTE, ARBORETUM, SEYMOUR MARIN CENTER
COMMUNITY FOUNDATION OF THE OZARKS P.O. BOX 8960 SPRINGFIELD, MO 65801	23-7290968	501(C)(3)	6,500.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT
MOUNTAIN PARKS FOUNDATION 525 NORTH BIG TREES PARK ROAD FELTON, CA 95018	23-7275572	501(C )(3)	10,750.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT, 2024 BELONGING PROGRAMS

Schedule I (Form 990) COUNTY						9	4-2808039 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.)	
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ENCOMPASS COMMUNITY SERVICES							
380 ENCINAL STREET, SUITE 200							SI SE PUEDE, ZERO
SANTA CRUZ, CA 95060	23-7275290	501(C)(3)	132,448.	0.		HEALTH	OVERDOSE
,			, -	-			
TRUST FOR PUBLIC LAND							GENERAL OPERATING SUPPORT
23 GEARY STREET SUITE 1000							TPL CALINIA AND NORTHERN
SAN FRANCISCO, CA 94108	23-7222333	501(C )(3)	111,500.	0.		ENVIRONMENT	ROCKIES
ASSOCIATION OF BLACK FOUNDATION							
EXECUTIVES, INC. (ABFE) - 55							
EXCHANGE PLACE, SUITE 401 - NEW						EDUCATION/YOUTH	
YORK, NY 10005	23-7156531	501(C)(3)	32,825.	0.		DEVELOPMENT	RACIAL EQUITY TRAININGS
OREGON HEALTH AND SCIENCE							
UNIVERSITY FOUNDATION - 2020 SW							L
4TH AVENUE, SUITE 900 - PORTLAND,	02 5002114	F01/6 \/2\					TO SUPPORT THE PATIENT
OR 97201	23-7083114	501(C )(3)	7,000.	0.		HEALTH	AND FAMILY EMERGENCY FUND
OXFAM AMERICA							
226 CAUSEWAY ST, 5TH FLOOR							
BOSTON, MA 02114	23-7069110	501(C)(3)	14,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
·			,				
FRIENDS OF THE WATSONVILLE PUBLIC							
LIBRARIES - 275 MAIN STREET SUITE						ARTS, HISTORY,	
100 - WATSONVILLE, CA 95076	23-7066840	501(C)(3)	14,156.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
SOCIETY FOR CALIFORNIA ARCHAEOLOGY						G0100017017	
PO BOX 2582	22 7012005	F01/G \/3\	21 500	_		COMMUNITY	CONTRACT OFFICE OFFICE OF THE CONTRACT OF THE
GRANITE BAY, CA 95746	23-7013095	501(C )(3)	21,500.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
VANGUARD CHARITABLE ENDOWMENT							
PROGRAM - PO BOX 9509 - WARWICK,						COMMUNITY	THE BURKE BORINA VANGUARD
RI 02889	23-2888152	501(C)(3)	208,008.	0.		DEVELOPMENT	CHARITABLE ACCOUNT
		.,.,,-,		••			
USET FOUNDATION							
PO BOX 355						COMMUNITY	TO SUPPORT THE PATHWAY TO
GLADSTONE, NJ 07934	22-1668879	501(C)(3)	30,000.	0.		DEVELOPMENT	THE PODIUM

Schedule I (Form 990) COUNT I							Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	T
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WATSONVILLE LAW CENTER							
315 MAIN STREET, SUITE 207						COMMUNITY	
WATSONVILLE, CA 95076	20-8157214	501(C)(3)	37,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
·			,				
CEIBA PUBLIC SCHOOLS FOUNDATION							
215 LOCUST STREET						EDUCATION/YOUTH	
WATSONVILLE, CA 95076	20-5155858	501(C)(3)	25,000.	0.		DEVELOPMENT	AGENCY PAYOUT REQUEST
GIRLS INCORPORATED OF THE CENTRAL							GENERAL OPERATING
COAST - 318 CAYUGA ST, STE 206 -	20 5040200	E01/G \/3\	70 250	0		EDUCATION/YOUTH	SUPPORT, GIRLS IN FOSTER
SALINAS, CA 93901	20-5040398	501(C )(3)	78,250.	0.		DEVELOPMENT	CARE, SCHOLARSHIP FUND
WILDAID, INC							
220 MONTGOMERY STREET STE 1200							
SAN FRANCISCO, CA 94104	20-3644441	501(C)(3)	50,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
,							
COASTAL KIDS HOME CARE							
427 PAJARO ST. SUITE 1-3							
SALINAS, CA 93901	20-2549984	501(C )(3)	10,000.	0.		HEALTH	GENERAL OPERATING SUPPORT
LOS ANGELES BALLET							
11755 EXPOSITION BLVD						ARTS, HISTORY,	
LOS ANGELES, CA 90064	20-1819852	501(C )(3)	10,000.	0.		AND CULTURE	GENERAL OPERATING SUPPORT
61VIII 61VII 60VIVIIV 7171610VIVI							
SANTA CRUZ COUNTY FAIRGROUNDS						ADMG HITGMODY	
FOUNDATION - PO BOX 1806 -	20-0385058	E01/G \/2\	40.450	0.		ARTS, HISTORY, AND CULTURE	GENERAL OPERATING SUPPORT
FREEDOM, CA 95019	20-0363036	501(C )(3)	40,450.	0.		AND COLTORE	GENERAL OPERATING SUPPORT
WILD FARM ALLIANCE							
PO BOX 2570							
WATSONVILLE, CA 95077	20-0195670	501(C )(3)	7,500.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
AMERICAN CIVIL LIBERTIES UNION			1	-			
FOUNDATION - GIFT PROCESSING							
DEPARTMENT, 125 BROAD STREET 18TH						COMMUNITY	
FL - NEW YORK, NY 10004	13-6213516	501(C )(3)	13,250.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							04-2808039 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	art II.)	I
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INTERNATIONAL RESCUE COMMITTEE							
P.O. BOX 6068							GENERAL OPERATING
ALBERT LEA, MN 56007	13-5660870	501(C )(3)	23,000.	0.		HUMAN SERVICES	SUPPORT, GAZA AID
SHARSHERET							
1086 TEANECK RD, STE 2G	12 4100500	501 ( 7 ) ( 2 )	10.000	•			
TEANECK, NJ 07666	13-4198529	501(C )(3)	10,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
BRENNAN CENTER FOR JUSTICE							
120 BROADWAY, NO. 1750 NEW YORK, NY 10271	13-3839293	501/C \((3)	7,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
NEW TORK, NI 102/1	13-3039293	501(C )(3)	7,000.	0.		HOMAN SERVICES	GENERAL OFERATING SUFFOR
DOCTORS WITHOUT BORDERS USA							GENERAL OPERATING
40 RECTOR STREET 16TH FLOOR							SUPPORT, RELIEF EFTS IN
NEW YORK, NY 10006	13-3433452	501(C )(3)	20,000.	0.		HEALTH	SUDAN AND GAZA
ILW TORK, NT TOOO	13 3433432	301(0 )(3)	20,000.	••		1111111111	SOUTH THE GREET
MADRE							
26 BROADWAY FLOOR 3						COMMUNITY	
NEW YORK, NY 10004	13-3280194	501(C)(3)	7,000.	0.		DEVELOPMENT	GENERAL OPERATING SUPPORT
		, , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PLANNED PARENTHOOD FEDERATION OF							
AMERICA - 123 WILLIAM STREET, 10TH							
FLOOR - NEW YORK, NY 10038	13-1644147	501(C)(3)	21,000.	0.		HEALTH	GENERAL OPERATING SUPPORT
NATIONAL AUDUBON SOCIETY/AUDUBON			,				
CALIFORNIA SOCIETY - 1901 HARRISON							
STREET, SUITE 1450 - OAKLAND, CA							
94612	13-1624102	501(C)(3)	23,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPOR
FRACTURED ATLAS							
248 W. 35TH ST, 10TH FL						EDUCATION/YOUTH	CURATED BY THE SEA
NEW YORK, NY 10001	11-3451703	501(C )(3)	27,814.	0.		DEVELOPMENT	PROGRAM SUPPORT
GAVE THE CHILDREN THE TAXABLE TO THE							THE GUIDDONE OF WESTER'S
SAVE THE CHILDREN FEDERATION INC							IN SUPPORT OF NIGER'S
501 KINGS HIGHWAY EAST, STE 400	06 0506465	E01/G \/3\		_			GREEN SCHOOLS SPONSORSHIE
FAIRFIELD, CT 06825	06-0726487	501(C )(3)	6,946.	0.		HUMAN SERVICES	PROJECT

Part II Continuation of Grants and Other	Assistance to De	mostic Organization	s and Domostic Go	vornments (Sch	adula I (Form 990) Pa		74-2808039 Page
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THE GIVING BACK FUND 500 COMMERCIAL STREET, SUITE 4R						COMMUNITY	
BOSTON, MA 02109	04-3367888	501(C )(3)	10,000.	0.		DEVELOPMENT	WORK TO OWN PROJECT
PEACE DEVELOPMENT FUND PO BOX 1280 AMHERST, MA 01004	04-2738794	501(C )(3)	6,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
HEALTH IMPROVEMENT PARTNERSHIP OF SANTA CRUZ COUNTY (HIPSCC) - 343 SOQUEL AVE #343 - SANTA CRUZ, CA			,				MAT-ADVISORY GROUP, ADOLESCENT AND YOUNG ADULT LEARNING
95062	01-0826156	501(C )(3)	218,917.	0.		HEALTH	COLLABORATIVE
GEFFEN PLAYHOUSE 10886 LE CONTE AVENUE LOS ANGELES, CA 90024	95-4492653	501(C )(3)	15,000.	0.		ARTS, HISTORY,	GENERAL OPERATING SUPPOR
LOS ANGELES COUNTY MUSEUM OF ART (LACMA) - 5908 WILSHIRE BLVD - LOS						ARTS, HISTORY,	
ANGELES, CA 90036	95-2264067	501(C)(3)	12,500.	0.		AND CULTURE	GENERAL OPERATING SUPPOR
COMMUNITY INITIATIVES 1000 BROADWAY, SUITE 480 OAKLAND, CA 94607	94-3255070	501(C )(3)	15,800.	0.			REGENERATION/REGENERACION - PAJARO VALLEY CLIMATE ACTION
CRISIS INTERVENTION SERVICES DBA SIERRA COMMUNITY HOUSE - 948 INCLINE WAY - INCLINE VILLAGE, NV			50.000				
89451	94-2985554	501(C )(3)	50,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPOR
WEST VALLEY COMMUNITY SERVICES 10104 VISTA DRIVE CUPERTINO, CA 95014	94-2211685	501(C )(3)	10,000.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPOR
BOYS & GIRLS CLUBS OF BENTON AND FRANKLIN COUNTIES - 2110 W HENRY			,	0.			CAPITAL CAMPAIGN OR THE CLUBS NEW LOCATION IN
STREET - PASCO, WA 99301	91-1673327	501(C )(3)	100,000.	0.		DEVELOPMENT	PROSSER ,WA

Schedule I (Form 990) COUNTY				. (2.1	l.   -   /F 000` P		74-2808039 Page 1
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	<b>overnments</b> (Sche	eaule I (Form 990), Pa I	ırt II.)	T
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FOUNDATION FOR AMERICA'S PUBLIC LANDS - 1203 K ST NW - WASHINGTON, DC 20005	88-1553091	501(C)(3)	20,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
THE PEOPLE'S LAND FUND WATSONVILLE LLC - 1428 FRANKLIN STREET - OAKLAND, CA 94612	87-3208070	501(C)(3)	61,310.	0.		ENVIRONMENT	TO SUPPORT AGRICULTURAL LAND OWNERSHIP FARMERS OF COLOR
Y360 PO BOX 26479 COLORADO SPRINGS, CO 80936	84-1300954	501(C)(3)	6,000.	0.		HUMAN SERVICES	TO SUPPORT THE MINISTRY OF ENOC PUEYES
WATER FOR PEOPLE 7100 E BELLEVIEW AVE, SUITE 310 GREENWOOD VILLAGE, CO 80111	84-1166148	501(C)(3)	6,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
SAN LUIS OBISPO COUNTY VETERAN SERVICES COLLABORATION - PO BOX 14014 - SN LUIS OBISPO, CA 93406	82-3188207	501(C )(3)	7,099.	0.		HUMAN SERVICES	A GRANT CASTLELOCK PARTNERSHIP
AMERICAN ONLINE GIVING FOUNDATION INC - 40 EAST MAIN STREET, SUITE 887 - NEWARK, DE 19711	81-0739440	501(C )(3)	2,808,979.	0.		COMMUNITY DEVELOPMENT	GENERAL OPERATING SUPPORT, RECOGNITION OF EMPLOYEE SERVICE HOURS
CSUMB FOUNDATION UNIVERSITY DEVELOPMENT, 100 CAMPUS CENTER-AVC BLDG 97 - SEASIDE, CA 93955	80-0494808	501(C )(3)	50,000.	0.		EDUCATION/YOUTH DEVELOPMENT	GREENHOUSE AND DEMONSTRATION FARM AT CSUMB
SOUTHEASTERN FOUNDATION, INC. 425 W UNIVERSITY BLVD DURANT, OK 74701	73-0765384	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	CHUKWA BRIDGE PROJECT SOUTHEASTERN OKLAHOMA STATE UNIVERSITY
METROPOLITAN MINISTRIES, INC. 2002 N FLORIDA AVE TAMPA, FL 33602	59-1477007	501(C )(3)	10,000.	0.		HUMAN SERVICES	HURRICANES HELENE AND MILTON RELIEF

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 valuation non-cash assistance organization or government if applicable cash grant noncash or assistance (book, FMV, assistance appraisal, other) SANIBEL-CAPTIVA CONSERVATION FOUNDATION INC - PO BOX 839 -COMMUNITY SANIBEL, FL 33957 59-1205087 501(C)(3) 6,000 0. DEVELOPMENT GENERAL OPERATING SUPPORT INSTITUTE FOR JUSTICE 901 N GLEBE RD, #900 COMMUNITY ARLINGTON, VA 22203 52-1744337 501(C)(3) 0 DEVELOPMENT 10,000 GENERAL OPERATING SUPPORT HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036 52-1481896 501(C)(3) 9,300 0. HUMAN SERVICES GENERAL OPERATING SUPPORT READING IS FUNDAMENTAL INC BOOK PROJECT WITH 750 FIRST ST NE, SUITE 920 EDUCATION/YOUTH ELEMENTARY STUDENTS IN CA WASHINGTON, DC 20002 52-0976257 501(C)(3) 0 DEVELOPMENT 80,530 AND OR CALMATTERS 1017 L STREET #261 COMMUNITY SACRAMENTO, CA 95814 47-2474086 501(C)(3) 10,000 0. DEVELOPMENT GENERAL OPERATING SUPPORT EMERGENCY ASSISTANCE FOUNDATION. INC - PO BOX 850001 - ORLANDO, FL 45-1813056 501(C)(3) 32885 100,000 0. HUMAN SERVICES EMERGENCY ASSISTANCE FUND LAND DANCERS GENERAL OPERATING 22400 SKYLINE BLVD APT 25 ARTS, HISTORY, SUPPORT, FUNDS REBUILDING DECK LA HONDA, CA 94020 39-2064581 501(C)(3) 14 100 0. AND CULTURE WORLD CENTRAL KITCHEN GENERAL OPERATING 200 MASSACHUSETTS AVE 7TH FLOOR SUPPORT, RELIEF EFTS IN WASHINGTON, DC 20001 27-3521132 501(C)(3) 17,250, 0. HUMAN SERVICES UKRAINE AND GAZA BOYS AND GIRLS CLUB OF RED RIVER VALLEY OKLAHOMA - 415 NORTH 5TH EDUCATION/YOUTH AVE - DURANT, OK 74701 27-2922456 501(C)(3) 0. DEVELOPMENT 10 000 GENERAL OPERATING SUPPORT

Schedule I (Form 990) COUNTY							14-2808039 Page 1
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urt II.)	T
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PASATIEMPO HISTORICAL FOUNDATION 20 CLUBHOUSE RD SANTA CRUZ, CA 95060	27-0762396	501(C)(3)	7,500.	0.		ARTS, HISTORY,	TO SUPPORT CONSTRUCTION OF HOLLINS AND MACKENZIE STATUES
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	23-7432162	501(C)(3)	15,000.	0.		EDUCATION/YOUTH DEVELOPMENT	GENERAL OPERATING SUPPORT
THE UC HASTINGS FOUNDATION  UC HASTINGS FOUNDATION, 200  MCALLISTER STREET - SAN FRANCISCO,  CA 94102	23-7135898	501(C )(3)	31,789.	0.		HUMAN SERVICES	JUDGE ROBERT H. SCHNACKE AWARD PROGRAM
CAL POLY FOUNDATION 1 GRAND AVENUE SAN LUIS OBISPO, CA 93407	20-4927897	501(C)(3)	505,000.	0.		EDUCATION/YOUTH	THOMAS MACKIN FUND, CAL POLY FARM STORE, CENTER FOR INNOVATION AND ENTREPRENEURSHIP
AMERICAN CANCER SOCIETY - SILICON VALLEY/CENTRAL COAST REGION - 747 CAMDEN AVENUE, SUITE B - CAMPBELL, CA 95008	13-1788491	501(C)(3)	5,462.	0.		HUMAN SERVICES	TO SUPPORT PROGRAMS AND SERVICES IN SANTA CRUZ COUNTY
THE TRUSTEES OF RESERVATIONS DEVELOPMENT OFFICE, 200 HIGH STREET BOSTON, MA 02110	04-2105780	501(C )(3)	75,000.	0.		ENVIRONMENT	NAUMKEAG WOODLAND WALK
GROUNDWORKS COLLABORATIVE PO BOX 370 BRATTLEBORO, VT 05302	03-0267404	501(C )(3)	7,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
TRUCKEE TRAILS FOUNDATION PO BOX 1751 TRUCKEE, CA 96106	01-0601303	501(C )(3)	25,000.	0.		ENVIRONMENT	GENERAL OPERATING SUPPORT
COUNTY OF SANTA CRUZ/PROBATION DEPARTMENT/AZTECAS - P.O. BOX 1028 - WATSONVILLE, CA 95076	00-000000	501(C )(3)	60,500.	0.		EDUCATION/YOUTH	AZTECAS SOCCER PROGRAM

Page 1

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
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HOLY CROSS CHURCH FOOD PANTRY							
210 HIGH STREET							
SANTA CRUZ, CA 95060	00-000000	501(C )(3)	7,000.	0.		HUMAN SERVICES	GENERAL OPERATING SUPPORT
LIVE OAK SCHOOL DISTRICT 984-1BOSTWICK LANE SANTA CRUZ, CA 95062	00-000000	501(C)(3)	5,775.	0.		EDUCATION/YOUTH	4TH/5TH GRADE-LEVEL SC SYMPHONY YOUTH CONCERT FIELD TRIPS
			·				
LOMA PRIETA JOINT UNION SCHOOL  DISTRICT - 23800 SUMMIT ROAD - LOS GATOS, CA 95033	00-000000	501(C )(3)	10,949.	0.		EDUCATION/YOUTH DEVELOPMENT	ACADEMIC EXCELLENCE IN LOMA PRIETA.
PAJARO VALLEY UNIFIED SCHOOL DISTRICT - 294 GREEN VALLEY ROAD - WATSONVILLE, CA 95076	00-000000	501(C )(3)	120,305.	0.		EDUCATION/YOUTH DEVELOPMENT	MAR VISTA ELEM, RAISING A READER, STARLIGHT CULINARY FUND
SAN LORENZO VALLEY WATER DISTRICT - FOR GRANTS - 13060 HIGHWAY 9 - BOULDER CREEK, CA 95006	00-000000	501(C)(3)	11,708.	0.		ENVIRONMENT	ANNUAL HABITAT MANAGEMENT AND MONITORING AT THE OLYMPIA WATERSHED
SOQUEL UNION ELEMENTARY SCHOOL DISTRICT - 620 MONTEREY AVE - CAPITOLA, CA 95010	00-000000	501(C )(3)	7,109.	0.		EDUCATION/YOUTH DEVELOPMENT	MOBILE LIBRARY CARTS MAIN STREET ELEMENTARY LIBRARY
UC REGENTS-UCSC ARBORETUM 1156 HIGH STREET, MAIL STOP - ARBOR SANTA CRUZ, CA 95064	00-000000	501(C )(3)	73,279.	0.		ARTS, HISTORY, AND CULTURE	TO SUPPORT THE UCSC ARBORETUM
UNIVERSITY OF CALIFORNIA, BERKELEY FOUNDATION - UNIVERSITY OF							
CALIFORNIA-COLLEGE OF LETTERS AND SCIENCE, 101DURANT HALL, MC -	00-000000	501(C)(3)	6,000.	0.		EDUCATION/YOUTH DEVELOPMENT	ALEX FILIPPENKO, LICK OBSERVATORY
GLOBE INTERNATIONAL MINISTRIES PO BOX 3040 PENSACOLA, FL 32516	00-000000	501(C )(3)	12,000.	0.		HUMAN SERVICES	TO SUPPORT THE MINISTRY OF BARRON FREITAS

Schedule I (Form 990) (Rev. 12-2024) COUNTY

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV   Supplemental Information. Provide the information rec	quired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
ART I, LINE 2: HE FOUNDATION CONDUCTS A THOROUGH	DIJE DILI	GENCE PROC	ESS IN REV	TEWING AND	
ONITORING ALL GRANTS APPROVED AND					
IRECTORS. STAFF REVIEWS ALL REQUE					
RGANIZATION IS ELIGIBLE TO RECEIV	E A GRANT	FROM THE	FOUNDATION	UNDER THE	
RS GUIDELINES FOR CHARITIES AND N	ONPROFITS	. DURING T	HIS INITIA	L SCREENING,	
HE APPLICANT'S FINANCIAL INFORMAT	ION, GOVE	RNANCE AND	PROGRAMS .	ARE	
EVIEWED, AND A DETERMINATION IS M	ADE IF TH	E PROPOSAL	IS CONSIS	TENT WITH	
HE FOUNDATION'S INTEREST AREAS AN	D STRATEG	IC PRIORIT	TIES. A BOA	RD-APPOINTED	
ROGRAM COMMITTEE, COMPOSED OF BOA	RD MEMBER	S AND OTHE	ER COMMUNIT	Y	
OLUNTEERS, REVIEWS ELIGIBLE REQUE	STS AND R	ECOMMENDS	AWARDS BAS	ED ON	
VAILABLE FUNDS AFTER SELECTED IN-	PERSON SI	TE VISITS	AND A MORE	THOROUGH	
EVIEW OF EACH ORGANIZATION'S ELIG	IBILITY A	ND PROPOSE	D USE OF F	UNDS. THESE	
RANT RECOMMENDATIONS ARE THEN REV	IEWED AND	VOTED ON	BY THE FUL	L BOARD.	
RANTS RECOMMENDED BY DONOR-ADVISOR					
OUNDATION SIMILARLY RECEIVE THE S.					
CREENING, BUT DO NOT GO TO THE PR					
OWEVER, REVIEWED AND APPROVED BY					

## COMMUNITY FOUNDATION SANTA CRUZ

COUNTY 94-2808039 Page 2 Schedule I (Form 990) Part IV | Supplemental Information 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.

## **SCHEDULE J** (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

**Open to Public** Inspection

OMB No. 1545-0047

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Pa	art I 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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	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.			
	Compensation committee Written employment contract			
	Independent compensation consultant     X   Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
	The organization?	5a		X
b	Any related organization?	5b		
_	If "Yes" on line 5a or 5b, describe in Part III.			
6				
	contingent on the net earnings of:			v
	The organization?	6a		X
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		i

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

Schedule J (Form 990) (Rev. 12-2024)

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	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	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)	291,937.	0.	0.	18,000.	12,365.	322,302.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SABINE DUKES	(i)	224,500.	0.	0.	13,500.	21,373.	259,373.	0.
CHIEF OPERATING & FINANCE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TIM CARSON	(i)	165,183.	0.	0.	9,911.	10,913.	186,007.	0.
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) HILARY SHUMAN-BRYANT	(i)	165,667.	0.	0.	9,460.	9,643.	184,770.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ALEXANDRA URBICK	(i)	161,667.	0.	0.	9,700.	8,299.	179,666.	0.
CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

**2024** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30. Attach to Form 990.

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

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Pai	rt I   Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	s
1	Art - Works of art			, , , , , , , , , , , , , , , , , , ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8								
9	Intellectual property Securities - Publicly traded	X	6	8,282,462.	FMV			
10	Securities - Closely held stock	- 21	ľ	0,202,402.	1110			
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( )							
26	Other ()							
27	Other ()							
28	Other (							
29	Number of Forms 8283 received by the organization	ation during	the tax year for co	ontributions	•			
	for which the organization completed Form 828	-	•					
	·		•				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted on Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of the							
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	olicy that re	equires the review of	of any nonstandard contribu	tions?	31	Х	
32a	Does the organization hire or use third parties o	r related or	ganizations to solid	cit, process, or sell noncash				
	contributions?		_	· ·		32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	lumn (c) for	r a type of property	for which column (a) is che	cked,			
	describe in Part II							

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

#### COMMUNITY FOUNDATION SANTA CRUZ

94-2808039 Schedule M (Form 990) 2024 COUNTY Page 2 **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete Part II this part for any additional information. SCHEDULE M, PART I, COLUMN (B): THE FOUNDATION IS REPORTING THE NUMBER OF ITEMS CONTRIBUTED (DEFINED AS EACH SEPARATE GIFT) IN SCHEDULE M, PART I, COLUMN (B).

#### SCHEDULE O (Form 990)

(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

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

AND STAFF ARE ANNUALLY VOLUNTEER COMMITTEE MEMBERS, ALL BOARD MEMBER, REQUIRED TO PROVIDE A LIST OF NONPROFIT AND PROFESSIONAL PHILANTHROPIC ORGANIZATIONS WITH WHICH THEY HAVE RELATIONSHIPS, AS WELL AS ANY RELATIONSHIPS IMMEDIATE FAMILY MEMBERS. THEY MUST  $\mathsf{OF}$ 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 DISCUSSION FROMDECISION MAKING THAT INVOLVES THE PARTIES IN QUESTION. THIS INCLUDES THE DISCUSSION OR DECISION OF ANY AND ALL GRANT PROPOSALS AS  ${\tt WELL}$ AS THE SELECTION OR CONTRACTING OF VENDORS OR SERVICE PROVIDERS. TO MONITOR SCHEDULE OF BOARD MEMBER TO DO SO, Α CONFLICTS IS INCLUDED EVERY BOARD PACKET FOR REFERENCE

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

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

Schedule O (Form 990) 2024 Page 2

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number 94-2808039

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 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.

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number 94-2808039

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

FOR THE CEO, AN ANNUAL PERFORMANCE EVALUATION IS ONE OF THE MAJOR RESPONSIBILITIES OF THE BOARD OF DIRECTORS. THE BOARD HAS ADOPTED EVALUATION PROCEDURES ESTABLISHED BY THE COUNCIL ON FOUNDATIONS AS PART OF ITS COMMUNITY FOUNDATIONS NATIONAL STANDARDS THAT PROVIDES FOR A CONSISTENT, FAIR, SUPPORTIVE AND WELL-DOCUMENTED PROCESS.

SPECIFIC STEPS IN THE CEO EVALUATION PROCESS INCLUDE A REVIEW AND DISCUSSION OF A SELF-PERFORMANCE EVALUATION AND DEVELOPMENT PLAN WITH PRIOR YEAR'S GOALS AND OBJECTIVES; AN EXECUTIVE SESSION OF THE BOARD TO DISCUSS ANY ISSUES OR CONCERNS AND TO SET NEW GOALS AND OBJECTIVES FOR THE FOLLOWING YEAR; A BOARD SESSION WITH THE CEO PRESENT FOR AN OVERALL ASSESSMENT AND GOAL SETTING, AS WELL AS DISCUSSION OF SALARY COMPENSATION BASED ON A REVIEW OF COMPARABLE SALARIES FOR OTHER COMMUNITY FOUNDATIONS OF OUR SIZE; AND, FINALLY, A SUMMARY OF THE ASSESSMENT, PLAN AND ANY SALARY INCREASE TO BE SIGNED BY BOTH THE CEO AND BOARD PRESIDENT.

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

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

FORM 990, PART XII, LINE 2C:

PRIOR YEAR.

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.

				-	_							
THE	FOUNDA	TION	HAS A	N AUDI'	r com	MITTEE	THAT	ASSUMES	RESE	PONSIBILIT	Y FOR	
OVE	RSIGHT (	OF TH	E AUD	IT OF :	ITS F	INANCIA	AL STA	TEMENTS	AND	SELECTION	OF AN	
INDE	PENDEN	T ACC	OUNTA	NT AND	THIS	PROCES	SS HAS	REMAIN	ED CC	NSISTENT	WITH	

432212 01-29-25 Schedule O (Form 990) 2024

#### SCHEDULE R (Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Name of the organization

### **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.

COMMUNITY FOUNDATION SANTA CRUZ

Open to Public Inspection

**Employer identification number** 

94-2808039

OMB No. 1545-0047

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (f) (a) (b) (c) (d) (e) Direct controlling Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets of disregarded entity entity foreign country) NLMJ BORINA LAND LLC - 46-3734949 HOLDING TITLE TO 7807 SOQUEL DRIVE AGRICULTURAL LAND; LEASING COMMUNITY FOUNDATION APTOS CA 95003 AGRICULTURAL LAND CALIFORNIA 269 515 3 062 957 SANTA CRUZ COUNTY YPN PHILANTHROPIES, LLC 7807 SOOUEL DRIVE COMMUNITY FOUNDATION USE INCOME GENERATED BY APTOS, CA 95003 PROPERTY TO FUND CHARITY CALIFORNIA 0. 1,330,145. SANTA CRUZ COUNTY 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 Part II organizations during the tax year. (a) (e) (f) (b) (c) (d) (g) Section 512(b)(13) Name, address, and EIN Legal domicile (state or **Exempt Code** Public charity Direct controlling Primary activity controlled of related organization section status (if section entity foreign country) entity? 501(c)(3)) Yes No REGIONAL WATER MANAGEMENT FOUNDATION MANAGE THE INTEGRATED СОММІЛИТТУ 38-3763365, 7807 SOQUEL DRIVE, APTOS, CA REGIONAL WATER MGMT FOUNDATION SANTA 95003 PROGRAM-SANTA CRUZ COUNTRY CALIFORNIA 501(C)(3) LINE 12A, I Х

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

COUNTY

Schedule R (Form 990) (Rev. 1-2025)

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)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Diagrapartianata			General	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	<u> </u>
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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>(b)</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	I Section	
CHARITABLE REMAINDER TRUST (4)	CHARITABLE GIVING	CA	CFSCC					х	

Yes No

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	b Gift, grant, or capital contribution to related organization(s)						1b		_X_	
С	c Gift, grant, or capital contribution from related organization(s)							X		
d	d Loans or loan guarantees to or for related organization(s)						1d	X		
е	Loans or loan guarantees by related organization(s)						1e		X	
f	f Dividends from related organization(s)						1f		_X_	
g	g Sale of assets to related organization(s)								_X_	
h	h Purchase of assets from related organization(s)								X	
i	i Exchange of assets with related organization(s)								_X_	
j	j Lease of facilities, equipment, or other assets to related organization(s)								_X_	
k	k Lease of facilities, equipment, or other assets from related organization(s)						1k		_X_	
							11		X	
	m Performance of services or membership or fundraising solicitations by related organization(s)						1m		_X_	
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						1n	Х		
0	Sharing of paid employees with related organization(s)						10	Х		
р	p Reimbursement paid to related organization(s) for expenses						<b>1</b> p		_X_	
q Reimbursement paid by related organization(s) for expenses							1q	Х		
r	r Other transfer of cash or property to related organization(s)						1r		_X_	
s	s Other transfer of cash or property from related organization(s)						1s		_X_	
2	If the answer to any of the above is "Yes," see the instructions for information on who must comp	plete this	line, including covered re	elationship	os and transaction thresho	lds.				
	(a) Name of related organization  (b) Transaction type (a-s)  (c) Amount involved Method of determining amount involved						involved			
1) I	REGIONAL WATER MANAGEMENT FOUNDATION C		0.	воок	VALUE					
2) I	REGIONAL WATER MANAGEMENT FOUNDATION D		0.	воок	VALUE					
3)										
4)										
5)										
6)										
6)	163 10-23-24				Cabadu	le R (Form 9	100) (P	AV 1	2025)	
32 16	03 10-23-24				Schedu	ie n (FUIII) 8	ou) (H	ev. I-	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) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec 501(c)(3) orgs.?		(g) Share of end-of-year assets	Dispretion allocat	opor- ate ions?		(j) Genera manag partne	(k) Percentage ownership
		ocumiyy	Sections 512-514)	Yes No	inidonic	assess	Yes	No	(FOITH 1003)	Yes I	IO
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## COMMUNITY FOUNDATION SANTA CRUZ

Schedule R	(Form 990) (Rev. 1-2025) <b>COUNTY</b>	94-2808039	Page 5
Part VII	(Form 990) (Rev. 1-2025) COUNTY  Supplemental Information		
	Provide additional information for responses to questions on Schedule R. See instructions.		
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