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.

Department of the Treasury Internal Revenue Service

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

A For the 2022 calendar year, or tax year beginning and ending									
B C	heck if	COMMUNITY FOUNDATION SANTA C		D Employer identification number					
	Addres change Name					220			
	_change □Initial	<u> </u>		94-28080					
	_return _Final _return/	Number and street (or P.0. box if mail is not delivered to street 7807 SOQUEL DRIVE	eet address)	Room/suite	E Telephone numb 831-662-	-2000			
	termin ated	City or town, state or province, country, and ZIP or foreign	gn postal code		G Gross receipts \$	40,392,988.			
	Ameno return	AF105, CA 93003			H(a) Is this a group				
	Application pendir	F Name and address of principal officer: SADINE DC	IKES		for subordinates? Yes X No				
		SAME AS C ABOVE			H(b) Are all subordinates				
		empt status: X 501(c)(3) 501(c) () (insert n	no.) 4947(a)(1)	or 527	-t	a list. See instructions			
	Vebsit				H(c) Group exempti				
		organization: X Corporation Trust Association	Other	L Year	of formation: 1982	M State of legal domicile: CA			
Pa	rt I	Summary	ПО Т	ромошн	DILLI ANDIID	DV TO MAKE			
ě		Briefly describe the organization's mission or most significant							
anc		SANTA CRUZ COUNTY A BETTER PLAC							
Activities & Governance	_	Check this box if the organization discontinued its organization discontinued its organization discontinued its organization.			_	1 40			
90		Number of voting members of the governing body (Part VI, line	,		<u>3</u>				
8		Number of independent voting members of the governing bod Total number of individuals employed in calendar year 2022 (F							
ties		Total number of individuals employed in calendar year 2022 (F							
ţivi		Total number of volunteers (estimate in necessary) Total unrelated business revenue from Part VIII, column (C), lir							
Ac		Net unrelated business taxable income from Form 990-T, Part							
		Net unrelated business taxable income nonn onn soo 1,1 are	1, 1110 11		Prior Year	Current Year			
_	8	Contributions and grants (Part VIII, line 1h)			43,844,243.	37,442,344.			
Revenue		B ' (D 1) (III I' O)			76,415.				
)ve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			6,995,910.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, a			1,189,437.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, co			52,106,005.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3			24,179,944.				
		5 5 11 5 1 75 1 75 1 75 1			0.	 			
s	15	Salaries, other compensation, employee benefits (Part IX, colu			2,306,927.	2,560,368.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.			
be	b	Total fundraising expenses (Part IX, column (D), line 25)	329,78	83.					
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			1,858,630.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A	A), line 25)		28,345,501.				
		Revenue less expenses. Subtract line 18 from line 12			23,760,504.	3,776,510.			
or	20 21 22				ginning of Current Year				
sets	20	Total assets (Part X, line 16)		2	01,628,792.				
ot As	21	Total liabilities (Part X, line 26)			4,473,032.				
	22			1	97,155,760.	161,727,340.			
	rt II	Signature Block							
	•	ties of perjury, I declare that I have examined this return, including ac				ny knowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than officer) is based of SDukes.	n all information of wh	nich preparer					
۵.		Signature of officer			Nov 15, 2023 Date	·			
Sigr		-							
Here SABINE DUKES, CHIEF FINANCE & OPERATING OFFICER Type or print name and title									
			-:	Tr	Date Check	PTIN			
Paid		Print/Type preparer's name KEVIN T. WILSON Preparer's s			Nov 15, 2023 if self-empl				
	arer		3 16:03 PST)			94-3108253			
Prep Use		Firm's name NOVOGRADAC & COMPANY LL Firm's address 2033 N. MAIN STREET, SU		Firm's EIN) T J T U G G J J				
J36	Jilly	WALNUT CREEK, CA 94596	71D 400		Phone no 9 3	25-949-4300			
May	tho IE	S discuss this return with the preparer shown above? See ins	tructions		I i lione no. 2	X Yes No			

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROMOTE PHILANTHROPY TO MAKE SANTA CRUZ COUNTY A BETTER PLACE TO
	LIVE, NOW AND IN THE FUTURE.
	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?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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 \$35,720,438. including grants of \$33,082,165.) (Revenue \$\$
	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 \$
4c	(Code:) (Expenses \$) (Revenue \$)
	/ (Note like to
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 35,720,438.
	Form 990 (2022)

COMMUNITY FOUNDATION SANTA CRUZ

Form 990 (2022) 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)?		37	
	If "Yes," complete Schedule A	1	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			ا
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			l
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	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	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	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			ا
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			,,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	3		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	25	
15		15	х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13	21	
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	 		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 ''		+
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	···		
	,	19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

Form 990 (2022) Part IV Checklist of Required Schedules (continued) Yes No 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 Х 22 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 Х 23 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 Х Schedule K. If "No," go to line 25a 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х 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 Х 25b 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% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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 Х 27 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 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 Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 50 **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2022)
Part V Sta Statements Regarding Other IRS Filings and Tax Compliance (continued)

22 in the number of employees reported on Form W3. Transmittal of Wage and Tax Stataments. 12				Yes	No			
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X X 5 If Yes, "has it filed a Form 990-T for this yea?" If Yes' to line 3b, provide an explanation on Schedule 0 3c	2 a							
38 Dit the organization have unrelated business gross income of \$1,000 or more during the year? 59 If "Yes," has it filed a Form 990-T for this year? # "Yo" to filin 30, provide an explanation on Schedule 0 40 At any time during the calinedar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country leuch as a bank account, securities account, or other financial account()? 50 If "Yes," the the name of the foreign country 50 Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 50 Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 51 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 52 Was the organization shew annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions are press statement that such contributions or gifts were not tax deductible? 53 Vas the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(c). 54 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions under section 170(c). 55 Ut "Yes," indicate the number of Forms 8282 filed during the year 56 Ut "Yes," indicate the number of Forms 8282 filed during the year 57 Ut the organization make any taxtible of the page of services provided? 58 Sponsoring organization make any taxtible distributions under section 49687 59 Sponsoring organization make any taxtible distributions under section 49687 50 Did the organization make any taxtible distributions under section 49687 51		, , , , , , , , , , , , , , , , , , , ,	_	37				
b If "Yes," fall at Error 896.T for this year? If "No' to fine 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry? 4a	_	•		X	37			
4a Al any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). b if 'ves,' enter the name of the foreign country securities account, or other financial accounts (FBAR). 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 6a If 'ves' to line be a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6b If 'ves' to line be a or 5b, did the organization the firm 888617 (see the property of the organization shelt in the property of the property of the property of the organization shelt in the property of the property of the property of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a charitable contributions? 6b Verse,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a charitable contribution and partly for goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(c). 8d If 'ves,' did the organization notify the donor of the value of the goods or services provided? 7c If If 'ves,' includate the number of Forms 8282? 7d If 'ves,' includate the number of Forms 8282? liked during the year 9d If the organization received a contribution of qualified intellectual property did the organization file of the promise state of the forms 8290 are required? 1b If the organization received a contribution of a property did the organization file a Form 1098 C? 8 Sponsoring organizations maintaining donor advised funds. Did a chorn advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a chorn advised fund maintained by the sponsoring organizations make any taxabided stributions under section								
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes, in either the name of the foreign country See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prolibited tax shelter transaction at any time during the tax year? 5b Dd any standile party notify the organization file Form 8898-17? 6c If Yes' to line Sa or Sb, did the organization file Form 8898-17? 6d Does the organization and party to a prolibited tax shelter transaction? 5c If Yes' to line Sa or Sb, did the organization file Form 8898-17? 6d Does the organization and party to a prolibited be shelt and the organization solicit any contributions that were not tax deductible as charitable contributions? 6d If Yes', did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Organizations that may receive deductible contributions under section 170(c). 8d If If Yes', did the organization notify the donor of the value of the goods or services provided? 7d If If Yes', did the organization notify the donor of the value of the goods or services provided? 7d If If Yes', did the organization notify the donor of the value of the goods or services provided? 7d If Yes', did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If If If Yes', did the organization received a contribution of care, boats, airplanes, or other vehicles, did the organization file a form 1098-07 7d If the organization received a contribution of care, boats, airplanes, or other vehicles, did the organization file a form 1098-07 7d If If Yes', did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9d Ordanization is licensed to issue qualified health plans in more than one state? 11a Gross income from methes or shareholders 12b Gross recei			36					
b if "Yes," enter the name of the foreign country So was the organization in grequimenents for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). So was the organization a party to a prohibited tax shelter transaction? So if "Yes" to line Sa or Sb, did the organization file from 888617 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that we en or tax edeutibles of schaffable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles of a charitable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). a lid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles or the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). a lid the organization notity the donor of the value of the goods or services provided? 7 If a lid the organization notity the donor of the value of the goods or services provided? 7 If a lid the organization notity the donor of the value of the goods or services provided? 7 If a lid the organization notity the donor of the value of the goods or services provided? 7 If a lid the organization notity the donor of the value of the goods or services provided? 7 If a lid the organization received a contribution of care, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a chore advised fund maintained by the sponsoring organizations make any taxabilided infelectual query leading to the property of the property of the	4a		1		v			
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5a Ms the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line Sa or Sb, did the organization file Form 8886-17? 5c As Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles? 5c A P'es," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 6c A Visual to the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 6c A Visual that may receive deductible contributions under section 170(c). 6c A Visual that may receive deductible contributions under section 170(c). 6c A Visual that may receive deductible contributions under section 170(c). 6c A Visual that may receive deductible contribution or the value of the goods or services provided? 7c A Visual to the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8882? 7c A Visual to the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8882? 7d If the organization received an orthrothion of cushing the year? 7d If the organization received an contribution of qualified intellectual property, did the organization file Form 8889 as required? 7d If the organization received an contribution of cushing and the file organization file Form 8889 as required? 7d If the organization received an contribution of cushing and the file organization file Form 8880 as expression of gorganization make a distribution with the organization file Form 8880 as expression of gorganization received an contribution of cushing the year? 8 Sponsoring organization received an contribution of cush, both as the contribution of cushing	D	· · · · · · · · · · · · · · · · · · ·						
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5	52		52		x			
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles as charitable contributions? 6b If "Yes," fide the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 88827. 8 Organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, of the organization file Form 8899 as required? 10 If the organization received a contribution of cases, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations exceeds on contribution of cases, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations exceeds business holdings at any time during the year? 9 Sponsoring organizations excess business holdings at any time during the year? 9 Sponsoring organizations exceeds business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4968? 9 Sponsoring organization make any taxable distributions under section 4968 to a file of the sponsoring organization make any taxable distributions of the sponsoring organization file file and the sponsoring organization ma					_			
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Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see 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? 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? 18 Enter the amount of reserves the organization is required to maintain by the states in which the organization which the organization or necesser tax on payment (s) and institution or schedule O. 18 Enter the amount of reserves the organization is required to maintain by the states in which the organization or schedule O. 18 Enter the amount of reserves the amount of reserves on hand 19	13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see 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? 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? 18 In the imposition of an excise tax under section 4951, 4952 or 4953? 19 In the imposition of an excise tax under section 4951, 4952 or 4953?		· · · · · · · · · · · · · · · · · · ·						
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Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 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?			4					
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15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see 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? 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? 18 X X X If "Yes," see the instructions and file Form 4720, Schedule N. If "Yes," complete Form 4720, Schedule O. If "Yes," co					_ A			
excess parachute payment(s) during the year? 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? 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? 18 X 19 X 10 X 11 X 12 X 13 X 14 X			14b	+	-			
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? 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? 18 Yes," see the instructions and file Form 4720, Schedule N. 19 X 10 X 11 X 12 X	15		4-		y			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 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? 18 Y 19 Y 10 Y 11 X 12 Y 13 Y 14 Y 15 Y 16 X 17 Y 17 Y 18 Y 19 Y 19 Y 10 Y 10 Y 11 Y 12 Y 13 Y 14 Y 15 Y 16 Y 17 Y 18 Y 18 Y 19 Y 19 Y 10 Y 11 Y 12 Y 13 Y 14 Y 15 Y 16 Y 17 Y 18 Y 18 Y 19 Y 19 Y 10 Y 10 Y 11 Y 12 Y 13 Y 14 Y 15 Y 16 Y 17 Y 18 Y 18 Y 19 Y 19 Y 10 Y 10 Y 11 Y 12 Y 13 Y 14 Y 15 Y 16 Y 17 Y 18 Y			15					
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	16		16		x			
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?	10	•	10					
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	"		17					
		If "Yes," complete Form 6069.	- 17					

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.

	to mile ea, es, et res selent, describe are encurricaries, processes, et changes en esticado et es es mila actionic.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		I	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
_	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	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	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	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	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
b	Other officers or key employees of the organization	15b	X	
	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
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	l 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			

Form 990 (2022) COUNTY

94-2808039

Page **7**

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)	I	IIIZA	((ірсп	Said	(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		nne	Reportable	Reportable	Estimated		
	hours per	box	pox, unless person is both an officer and a director/trustee)			s both	an	compensation	compensation	amount of
	week			u a u	II CCIO	1711 431		from	from related	other
	(list any hours for	ndividual trustee or director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	9e 0r	stee			nsateo		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	эш ре		1099-NEC)	,	and related
	below	vidual	Institutional trustee	er	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) SUSAN TRUE	40.00								_	
CEO				Х				254,176.	0.	24,600.
(2) TIM CARSON	0.00								_	
PROGRAM DIRECTOR - RWMF	40.00					Х		154,988.	0.	22,429.
(3) SAM LEASK	40.00								_	
PHILANTHROPIC SERVICES DIRECTOR						Х		146,500.	0.	30,324.
(4) SUSAN FARRAR	40.00								_	
CHIEF OPERATING & FINANCIAL OFFICER	1.00						X	133,847.	0.	19,068.
(5) SHUMAN-BRYANT, HILARY	0.00							100 55		46.065
DONOR SERVICES DIRECTOR	40.00					Х		129,667.	0.	16,865.
(6) SABINE DUKES	40.00	-						0.004	•	11 100
CHIEF OPERATING & FINANCIAL OFFICER	1.00			X				97,931.	0.	11,489.
(7) JULIE HAFF	1.00								0	0
PRESIDENT	1 00	Х		Х				0.	0.	0.
(8) TREVOR STRUDLEY	1.00	3,7		37					0	0
VICE PRESIDENT	1 00	Х		Х				0.	0.	0.
(9) JIM WEISENSTEIN	1.00	37		37				_	0	0
TREASURER	1 00	Х		Х				0.	0.	0.
(10) CHRIS MURPHY	1.00	Х						0.	0.	0
SECRETARY	1.00	Λ						0.	0.	0.
(11) GINA CASTANEDA BOARD MEMBER	1.00	Х						0.	0.	0.
(12) DAVID DOOLIN	1.00	Λ				\vdash		0.	0.	<u> </u>
BOARD MEMBER	1.00	Х						0.	0.	0.
(13) MARIA ELENA DE LA GARZA	1.00	Λ						0.	0.	<u></u>
BOARD MEMBER	1.00	Х						0.	0.	0.
(14) LILIANA 'LILI' DIAZ	1.00								0.	<u></u>
BOARD MEMBER	1.00	Х						0.	0.	0.
(15) LAWRENCE 'LARRY' DONATONI	1.00	21						•		<u></u>
BOARD MEMBER	1.00	х						0.	0.	0.
(16) DOUG FISCHER	1.00							•	•	
BOARD MEMBER	1.00	х						0.	0.	0.
(17) ROGELIO PONCE	1.00							, , , , , , , , , , , , , , , , , , ,		
BOARD MEMBER		х						0.	0.	0.
	l		\vdash						•	000

COUNTY 94-2808039 Form 990 (2022) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) Position Average Reportable Reportable Name and title Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC/ from the lighest compensated related (W-2/1099-MISC/ nstitutional truste 1099-NEC) organization organizations ey employee 1099-NEC) and related below organizations line) (18) KIRK SCHMIDT 1.00 BOARD MEMBER Х 0. 0. 0. (19) SANDY SKEES 1.00 X 0. BOARD MEMBER 0 . 0. 1.00 (20) PIRET HARMON SECRETARY X 0 0. 0. (21) KIRK SCHMIDT 0.00 BOARD MEMBER 1.00 X 0. 0. (22) SIERRA RYAN 0.00BOARD MEMBER 1.00 Х 0. 0. 0. 0.00 (23) LISA LURIE BOARD MEMBER 1.00 Х 0. 0. 0. (24) JAMES C. THOMPSON 0.00 1.00 Х 0. 0. 0. BOARD MEMBER (25) KEVIN HEUER 0.00 BOARD MEMBER 1.00 Х 0. 0. 0. 917,109. 124,775. 1b Subtotal 0. c Total from continuation sheets to Part VII, Section A 0. 0. 917.109. 0. 124 d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on Х line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation NONE

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Form 990 (2022) COUNTY
Part VIII Statement of Revenue

		Check if Schedule O c	ontains a	response (or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		1b					
ي ق		Fundraising events		1c					
fts,		Related organizations		1d					
ija Bij									
ons,		Government grants (contri		1e					
utio Jer (T	All other contributions, gifts,		I I	37 112 311				
를 된		similar amounts not included		1f	37,442,344. 8,796,987.				
out	_	Noncash contributions included in I	ines 1a-1f	1g \$	0,730,307.	27 442 244			
O g	n	Total. Add lines 1a-1f			D O. d.	37,442,344.			
					Business Code	020 015	020 045		
<u>c</u>	2 a	FOUNDATION SERVICES			541900	232,017.	· · · · · · · · · · · · · · · · · · ·		
erv	b	INTEREST INCOME - PR	RI.		900099	61,568.	61,568.		
ı S.	С								
ran 3ev	d								
Program Service Revenue	е								
<u>م</u>	f	All other program service	evenue .						
	g	Total. Add lines 2a-2f				293,585.			
	3	Investment income (includ	ing divide	ends, intere	st, and				
		other similar amounts)				2,531,136.		-451.	2531587.
	4	Income from investment o	f tax-exer	npt bond p	roceeds				
	5	Royalties							
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6с						
	d	Net rental income or (loss)							
	7 a	Gross amount from sales of	(i) S	Securities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
ē		and sales expenses	7b						
Revenue	С		7c						
ev.		Net gain or (loss)			•				
her F		Gross income from fundraisir							
용	-	including \$	-	of					
		contributions reported on		_					
		Part IV, line 18	•						
	h	Less: direct expenses							
		Net income or (loss) from t			l.				
		Gross income from gamine		-					
	Ju	Part IV, line 19	_						
	h	Less: direct expenses							
		Net income or (loss) from							
		Gross sales of inventory, le							
	10 a			I					
	h	and allowances		I					
		Less: cost of goods sold							
$\overline{}$	C	Net income or (loss) from s	oai c s UI II	iveritory	Business Code				
sn	44 -	OTHER INCOME			900099	125,923.	125,923.		
eo en	11 a				50005	123,323.	123,323.		
Miscellaneous Revenue	b								
sce Be	C								
Ξ̈́	d	All other revenue				125 022			
		Total Add lines 11a-11d				125,923.	410 E00	A E 1	2521505
	12	Total revenue. See instruction	IIS			40,392,988.	419,508.	-451.	2531587.

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

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp			пріете соіитп (А).	
	Check if Schedule O contains a respor	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	33,082,165.	33,082,165.		
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	917,109.	917,109.		
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		1,088,749.	585,221.	309,252.	194,276.
7	Other salaries and wages Pension plan accruals and contributions (include	±,000,7±J•	303,221•	305,252.	174,410•
8	•				
_	section 401(k) and 403(b) employer contributions)	554,510.	100 010	100 063	11 620
9	Other employee benefits	334,310.	408,918.	100,963.	44,629.
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal	12112	100 000		
С	Accounting	134,400.	100,326.	21,533.	12,541.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	20,052.		3,213.	1,871. 24,638.
13	Office expenses	264,047.	197,104.	42,305.	24,638.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	40,529.	30,254.	6,493.	3,782.
		34,083.		5,461.	3,180.
20		54,005	23,3326	3, 401.	3,100.
21	Payments to affiliates Depreciation, depletion, and amortization	275,878.	205,936.	44,200.	25,742.
22		42,899.	32,023.	6,873.	4,003.
23	Insurance	44,033.	34,043.	0,013.	4,003.
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 0.)	160 057	100 070	25 064	15 101
а	REPAIRS & MAINTENANCE	162,057.	120,972.	25,964.	15,121.
b					
С					
d					
е	All other expenses	0.6.6.6.1.	25 522 :::		222
25	Total functional expenses . Add lines 1 through 24e	36,616,478.	35,720,438.	566,257.	329,783.
26	$\ensuremath{\textbf{\textit{Joint costs}}}.$ Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
				·	Form 990 (2022)

Unsecured notes and loans payable to unrelated third parties

Net assets without donor restrictions

Net assets with donor restrictions

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

COUNTY 94-2808039 Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 4,622,165. 3,995,820. 1 Cash - non-interest-bearing Savings and temporary cash investments 2 340,136. 601,359. Pledges and grants receivable, net 3 3 1,978. 4 Accounts receivable, net Loans and other receivables from 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 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Inventories for sale or use 8 34,402. 64,075. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 12,877,333. basis. Complete Part VI of Schedule D ______ 10a b Less: accumulated depreciation 10b 3,472,384. 9,599,638. 9,404,949. 10c 179,524,037. 160,815,738. Investments - publicly traded securities 11 11 2,960,680. 2,605,696. Investments - other securities. See Part IV, line 11 12 12 3,455,937. Investments - program-related. See Part IV, line 11 2,674,625. 13 13 0. 14 Intangible assets 14 2,497,476. 3,978,258. Other assets. See Part IV, line 11 15 15 201,628,792. 185,548,177. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 834,154. 677,982. 17 Accounts payable and accrued expenses 17 1,163,195. 18 1,607,443. 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 17,740,498. Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 907,529. 883,638. Secured mortgages and notes payable to unrelated third parties 23 23

> 185,548,177. Form **990** (2022)

> 161,727,340.

2,911,276.

23,820,837.

161,727,340.

24

25

26

27

29

30

31

32

33

1,568,154.

4,473,032.

197,155,760.

197,155,760.

201,628,792.

Liabilities

Net Assets or Fund Balances

24

27

29

30 31

32

33

of Schedule D

Total liabilities. Add lines 17 through 25

and complete lines 27, 28, 32, and 33.

and complete lines 29 through 33.

Total liabilities and net assets/fund balances

Organizations that follow FASB ASC 958, check here

Organizations that do not follow FASB ASC 958, check here

Form	990 (2022) COUNTY	94-	28080	39	Pag	_{ge} 12	
Pai	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		392			
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3		776			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	197,				
5	Net unrealized gains (losses) on investments	5	-19,	677	,79	<u> 92.</u>	
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	-19,	527	,13	<u> 38.</u>	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				_		
	column (B)) rt XII Financial Statements and Reporting	10	161,	727	, 34	<u> 10.</u>	
Pa	rt XIII 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		— 1				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	_	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	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						
	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 Scho	edule O.					
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	ed audit	t				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	<u> </u>		
				Form 9	990 (2022)	

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

Open to Public Inspection

Employer identification number

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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

94-2808039 Page 2

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

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

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	18883395.	19201613.	34426217.	43844243.	38299935.	<u> 154655403</u>
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	18883395.	19201613.	34426217.	43844243.	38299935.	154655403
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						34289571.
6	Public support. Subtract line 5 from line 4.						120365832
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	18883395.	19201613.	34426217.	43844243.	38299935.	<u> 154655403</u>
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3337002.	2979407.	2651914.	3222860.	2753366.	14944549.
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.)	24,555.	16,463.	239,992.	1189437.		
11	Total support. Add lines 7 through 10						171196322
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						<u></u>
	tion C. Computation of Publi						TO 21
	Public support percentage for 2022 (I					14	70.31 %
	Public support percentage from 2021					15	73.30 %
16a	6a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization **\bar{X}\$ b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
b							
47-	and stop here. The organization qualifies as a publicly supported organization						
1/a	7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
						_	
L	meets the facts-and-circumstances to	· ·	•	,			
a	10% -facts-and-circumstances test	-					10% UI
	more, and if the organization meets the				-		
10	organization meets the facts-and-circ				•		
10	Private foundation. If the organization	ni did fiot check a i	oux on line 13, 16	a, 100, 17a, 01 170	, check this box a	nu see mstructions	·

COUNTY Schedule A (Form 990) 2022 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.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	, ,	, ,	, ,	, ,	, ,	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	•		•	•	. , . ,	on,
0	check this box and stop here	- O D					
	tion C. Computation of Publi					T T	
	Public support percentage for 2022 (I		•	column (f))		15	<u>%</u>
	Public support percentage from 2021					16	%
	tion D. Computation of Inves					ΤΤ	
17	Investment income percentage for 20	•	_ ``			17	%
		zuz i Schedule A.	Part III, line 1/			18	<u>%</u>
18	Investment income percentage from 2	•		and Discount # 1 1 12	AF in marking the Co	0.0 4 /0.0/	7:
18 19a	33 1/3% support tests - 2022. If the	organization did r					7 is not
18 19a	33 1/3% support tests - 2022. If the more than 33 1/3%, check this box ar	organization did r	organization quali	fies as a publicly s	supported organiza	ation	
18 19a b	33 1/3% support tests - 2022. If the	organization did r nd stop here. The organization did r	organization quali not check a box on	fies as a publicly s line 14 or line 19a	supported organiza a, and line 16 is mo	ntion ore than 33 1/3%, a	and

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
3.5		
9b		
9с		
10a		
405		
10b ule A (Forn	n 990)	2022

Pa	rt IV Supporting Organizations (continued)			<u> </u>
	tri capporting organizations (continued)		Yes	No
44	Healtha arganization accounted a gift or contribution from any of the following persons?		162	NO
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	110		
L		11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44.		
<u>Sac</u>	detail in Part VI. tion B. Type I Supporting Organizations	11c		
360	tion B. Type i Supporting Organizations		1	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
		2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
3				
	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	_		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance)	struction	′	
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.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Schedule A (Form 990) 2022

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations mu		·						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or								
	collection of gross income or for management, conservation, or								
	maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
а	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
С	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,								
	see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Sect	ion C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-function	nally integrated	Type III supporting orga	nization (see					

Schedule A (Form 990) 2022

instructions).

Schedule A (Form 990) 2022

c Excess from 2020d Excess from 2021e Excess from 2022

COMMUNITY FOUNDATION SANTA CRUZ

94-280<u>8039 Page 8</u> COUNTY Schedule A (Form 990) 2022 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.)

232028 12-09-22 Schedule A (Form 990) 2022

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	166	440
2	Aggregate value of contributions to (during year)	31,904,000.	73,635,306.
3	Aggregate value of grants from (during year)	925,413.	
4	Aggregate value at end of year	72,409,519.	295,266,670.
5	Did the organization inform all donors and donor advisors in wi		
	are the organization's property, subject to the organization's ex	cclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpos	e conferring
Pai	t II Conservation Easements. Complete if the orga	nization answered "Yes" on Form 990), Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	(check all that apply)	
	Preservation of land for public use (for example, recreation	on or education) Preservation	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic struc	ture included in (a)	2c
d	Number of conservation easements included in (c) acquired aff	er July 25,2006, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	ne organization during the tax
	year		
4	Number of states where property subject to conservation ease	ment is located	_
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements it h	olds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conser	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial state	ments that describes the
Dai	organization's accounting for conservation easements. † III Organizations Maintaining Collections of A	Art Historical Treasures or (Other Similar Assets
rai	Complete if the organization answered "Yes" on Form 9	-	other ominar Assets.
12	If the organization elected, as permitted under FASB ASC 958,		and halance sheet works
Ia	of art, historical treasures, or other similar assets held for publi		
	service, provide in Part XIII the text of the footnote to its finance		•
h	If the organization elected, as permitted under FASB ASC 958,		
D	art, historical treasures, or other similar assets held for public e	•	
	•	Allibrion, education, or research in id	Therance of public service,
	provide the following amounts relating to these items:		¢
	(i) Revenue included on Form 990, Part VIII, line 1		
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treas		
2			nai yairi, provide
_	the following amounts required to be reported under FASB AS		¢
	Revenue included on Form 990, Part VIII, line 1		\$

Sche	dule D (Form 990) 2022 COUNTY						808039 Page 2
Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	easures, or Ot	her Sir	nilar Asse	ts _(continued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that mal	ce signific	cant use of its	3
	collection items (check all that apply):						
а	Public exhibition	d	Loan or exc	hange program			
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	llections and explain	how they further th	ne organization's	exempt p	ourpose in Pa	t XIII.
5	During the year, did the organization solicit or	receive donations of	of art, historical trea	sures, or other sin	nilar asse	ets	
	to be sold to raise funds rather than to be ma						Yes No
Par	t IV Escrow and Custodial Arrang		ete if the organization	on answered "Yes	on Forn	n 990, Part IV	, line 9, or
	reported an amount on Form 990, Par	t X, line 21.					
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	s or other assets	not includ	ded _	
	on Form 990, Part X?					L	Yes X No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:		_		
					L		Amount
С	Beginning balance					1c	
	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance				L	1f	
	Did the organization include an amount on Fo				•	L	X Yes No
	If "Yes," explain the arrangement in Part XIII.						X
Par	t V Endowment Funds. Complete in			1		hraa waara baa	(/a) Four years book
		(a) Current year	(b) Prior year	(c) Two years ba			(e) Four years back
1a	Beginning of year balance	80,531,080.	69,330,387.			60,250,553	
b	Contributions	1,668,264. -8,966,414.	6,193,315.	· · · · · · · · · · · · · · · · · · ·		326,998	
С.	Net investment earnings, gains, and losses		9,969,586.			10,321,770	
d	Grants or scholarships	2,890,558.	3,666,882.	1,902,71	9.	2,497,740	2,203,004.
е	Other expenditures for facilities						
	and programs	1,160,532.	1,295,325.	946,58	1	993,135	. 998,309.
	Administrative expenses	69,181,840.	80,531,080.	†		67,408,446	-
g	End of year balance			•	<u>'• </u>	07,400,440	. 00,230,333.
2	Provide the estimated percentage of the curr	• 0 0 0 0		II) rieid as.			
a	Board designated or quasi-endowment Permanent endowment 80.2100	%	_%				
b	Term endowment 19.7900						
C	The percentages on lines 2a, 2b, and 2c shou	-					
32	Are there endowment funds not in the posses		tion that are held a	nd administered f	or the		
oa	organization by:	ssion of the organiza	tion that are ned a	na administered i	or tine		Yes No
	(i) Unrelated organizations						
	(ii) Related organizations						·
b	If "Yes" on line 3a(ii), are the related organiza						·
4	Describe in Part XIII the intended uses of the						[00]]
	t VI Land, Buildings, and Equipm		William Tarias.				
	Complete if the organization answered	l "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Pai	t X, line ⁻	10.	
	Description of property	(a) Cost or o	ther (b) Cos	t or other (c) Accum	nulated	(d) Book value
	1 17	basis (investr	` , , , , , , , , , , , , , , , , , , ,	(other)	depreci	I	. ,
1a	Land	2,785,0		3,604.			3,868,604.
b	Buildings				2,240	,607.	5,102,470.
	Leasehold improvements				-		•
d	Equipment		1,34	8,154.	L,038	3,672.	309,482.
_ е	Other			7,498.	193	3,105.	124,393.
	. Add lines 1a through 1e. (Column (d) must ea		•	•			9,404,949.

	COMMUNITY F	OUNDATION SAN'		
	(Form 990) 2022 COUNTY		94	-2808039 Page
Part VII				
	Complete if the organization answered "Yes"			
	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
. ,	al derivatives			
	held equity interests			
(3) Other				
(A)				
(B) (C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
	Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	a) must equal Form 000 Part V and (P) line 12.)			
Part IX	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
	Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	-	Description	, ,	(b) Book value
(1)		•		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X	Other Liabilities.	are Farmer 000. Doublish lines	11 11 Coo Forms 000 Port V line 05	
	Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
<u>1.</u>	(1)			(b) Book value
	eral income taxes ARITABLE GIFT ANNUITY L	ΤΔΒΤΙ.ΤͲΥ		648,690.
	ARITABLE GIFT ANNUITI L			2,262,586
(4)	ZMIIADDD INODI DIADIDII			2,202,300
(5)				
(6)				
(7)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 X

(8) (9)

Schedule	COMMUNITY FOUNDATION SANTA COUNTY COUNTY	CRUZ	i	94-	2808039 _{Page} 4
Part XI	Reconciliation of Revenue per Audited Financial Statemen	nts Wit	h Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 Tota	al revenue, gains, and other support per audited financial statements			1	21,210,109.
2 Am	ounts included on line 1 but not on Form 990, Part VIII, line 12:				
	unrealized gains (losses) on investments	2a	<u>-19,182,879.</u>	_	
b Dor	nated services and use of facilities	2b		_	
c Rec	coveries of prior year grants	2c		_	
d Oth	er (Describe in Part XIII.)	2d			
e Add	d lines 2a through 2d			2e	-19,182,879.
	otract line 2e from line 1			3	40,392,988.
	ounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Inve	estment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b Oth	er (Describe in Part XIII.)	4b		_	_
	d lines 4a and 4b			4c	0.
5 Tota	al revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		· · · · · · · · · · · · · · · · · · ·	5	40,392,988.
Part X	_	nts W	ith Expenses per I	Returi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 Tota	al expenses and losses per audited financial statements			1	36,616,478.
2 Am	ounts included on line 1 but not on Form 990, Part IX, line 25:				
a Dor	nated services and use of facilities	2a		_	
b Pric	or year adjustments	2b		_	
c Oth	er losses	2c		_	
d Oth	er (Describe in Part XIII.)	2d			_
e Add	d lines 2a through 2d			2e	0.
3 Sub	otract line 2e from line 1			3	36,616,478.
4 Am	ounts included on Form 990, Part IX, line 25, but not on line 1:				
a Inve	estment expenses not included on Form 990, Part VIII, line 7b	4a			
b Oth	er (Describe in Part XIII.)	4b			
c Add	d lines 4a and 4b			4c	0.
	al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	36,616,478.
Part X	III Supplemental Information.				
Provide th	ne descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V, lines	1b and 2b; Part V, line	ا; Part ک	X, line 2; Part XI,
ines 2d a	nd 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional inf	ormation.		
PART	IV, LINE 2B:				
THE F	OUNDATION RECEIVES AND DISTRIBUTES ASSET	S FO	R THE BENEFI	т о:	F VARIOUS
OTHER	NOT-FOR-PROFIT ORGANIZATIONS UNDER CERT.	AIN	DONOR FUND A	GRE	EMENTS.
ч энч	OUNDATION ACCEPTS A CONTRIBUTION FROM A	DONO	R AND AGREES	 : то	TRANSFER
A POR	TION OF THE RETURN ON INVESTMENT OF THOS	E AS	SETS, SUBJEC	<u>'T T</u>	O THE
FOUND	ATION'S SENDING POLICY, TO ANOTHER ENTIT	Y TH	AT IS SPECIF	'IED	BY THE
DONOR	. THE FOUNDATION HOLDS SUCH FUNDS AS DES	IGNA	TED FUNDS.		
	W I THE 0				
PART	X, LINE 2:				
THE P	REPARATION OF CONSOLIDATED FINANCIAL STA	TEME	NTS IN ACCOR	DAN	CE WITH

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA

REQUIRES THE FOUNDATION AND SUBSIDIARIES TO REPORT INFORMATION REGARDING

Part XIII Supplemental Information (continued) ITS EXPOSURE TO VARIOUS TAX POSITIONS TAKEN BY THE FOUNDATION AND SUBSIDIARIES. MANAGEMENT HAS DETERMINED WHETHER ANY TAX POSITIONS HAVE MET THE RECOGNITION THRESHOLD AND HAS MEASURED THE FOUNDATION'S EXPOSURE TO THOSE TAX POSITIONS. MANAGEMENT BELIEVES THAT THE FOUNDATION AND SUBSIDIARIES HAVE ADEQUATELY ADDRESSED ALL RELEVANT TAX POSITIONS AND THAT THERE ARE NO UNRECORDED TAX LIABILITIES. FEDERAL TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS THREE YEARS OF TAX RETURNS FILED. CALIFORNIA TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS FOUR YEARS OF TAX RETURNS FILED. ANY INTEREST OR PENALTIES ASSESSED TO THE FOUNDATION ARE RECORDED IN OPERATING EXPENSES. NO INTEREST OR PENALTIES FROM FEDERAL OR STATE TAX AUTHORITIES WERE RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. PART V, LINE 4: ENDOWMENT FUNDS ARE INTENDED TO SUPPORT GRANTMAKING AND SCHOLARSHIPS FOR ORGANIZATIONS AND INDIVIDUALS TO CREATE A LASTING IMPACT AND MAKE SANTA CRUZ COUNTY THRIVE FOR ALL WHO CALL IT HOME, NOW AND IN THE FUTURE.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection

Employer identification number

COMMUNITY FOUND	יאשד או מאו	TITA CDITA				
COUNTY	ATION SAI	NIA CRUZ			94-280803	₹ 9
	rmation on A	ctivities Out	side the United States. Comple	ete if the organ		
Form 990, Part I			Comple	oto ii tilo organ	nzacion anowored	100 011
		n maintain record	ds to substantiate the amount of its gra	nts and other	assistance,	
the grantees' eligibility	for the grants or a	assistance, and t	the selection criteria used to award the	grants or assis	stance?	Yes X No
	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance outs	side the
United States.	ho following Dort	. L lina 2 tabla as	on he duplicated if additional appear is n	andad)		
3 Activities per Region. (1 (a) Region	(b) Number of	(c) Number of	an be duplicated if additional space is n (d) Activities conducted in the region		vity listed in (d)	(f) Total
() 0	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	independent	gram services, investments, grants to		specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
			HUMAN SERVICES, COMMUNITY			
			DEVELOPMENT, ENVIRONMENT			
NORTH AMERICA	0	0	AND HEALTH			943,187.
	1					
2 a Subtatal	0	0				943,187.
3 a Subtotal b Total from continuation						313,107.
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				943,187.

Part II

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	HUMAN SERVICES	52,823.	WIRE	0.		
		NORTH AMERICA	COMMUNITY DEVELOPMENT	55,516.	WIRE	0.		
			EDUCATION/YOUTH DEVELOPMENT	154,958.	WIRE	0.		
		NORTH AMERICA	ENVIRONMENT	537,890.	WIRE	0.		
				,				
		NORTH AMERICA	HEALTH	142,000.	WIRE	0.		
			Lecognized as charities by the for counsel has provided a sect					9

3 Enter total number of other organizations or entities

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

Schedule F (Form 990) 2022 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see 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 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 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 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 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? <i>If</i> "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

COUNTY

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

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

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

COMMUNITY FOUNDATION SANTA CRUZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

COUNTY							94-2808039
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	on
criteria used to award the grants or assis	tance?						Yes X No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I	_				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$		· · · · · · · · · · · · · · · · · · ·	· ·		(f) Method of		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	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
A CHILLIANT DO A A A A A							
ACTIVITIES4ALL 534 CEREZE STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
WATSONVILLE, CA 95076	46-4487567	E01/G \/3\	27,750.	0.		DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
WAISONVILLE, CA 93076	40-440/30/	501(C)(3)	27,750.	0.		DEVELOPMENT	SUPPORT
AGRICULTURAL HISTORY PROJECT							FOR GENERAL OPERATING
PO BOX 1181						ARTS, HISTORY,	SUPPORT AND DONATION
WATSONVILLE, CA 95077-1181	77-0165945	501(C)(3)	38,964.	0.		AND CULTURE	MATCH
MIIIBORVILLII, OII 33077 IIGI	77 0103313	301(0)(3)	30,301.	•		+	FOR PROGRAMS, SERVICES
AGRI-CULTURE							AND SCHOLARSHIPS THAT
141 MONTE VISTA AVENUE							SUPPORT AGRICULTURAL
WATSONVILLE, CA 95076-3271	77-0212413	501(C)(3)	37,611.	0.		ENVIRONMENT	EDUCATION
ALZHEIMER'S ASSOCIATION OF			,				
NORTHERN CALIFORNIA AND NORTHERN							
NEVADA - 550 WATER STREET, STE L-2							FOR GENERAL OPERATING
- SANTA CRUZ, CA 95060	13-3039601	501(C)(3)	10,000.	0.		HUMAN SERVICES	SUPPORT
AMAH MUTSUN LAND TRUST							FOR GENERAL OPERATING
2460 17TH AVENUE #1019	20 0445426	501/6 \/2\	0 000 050	•			SUPPORT, PURCHASING
SANTA CRUZ, CA 95062	32-0447436	501(C)(3)	2,020,050.	0.		ENVIRONMENT	PROPERTY
AMERICAN CANCER SOCIETY - SILICON							TO SUPPORT PROGRAMS AND
VALLEY/CENTRAL COAST REGION - 747							SERVICES IN SANTA CRUZ
CAMDEN AVENUE, SUITE B - CAMPBELL,	12 1700401	E01/G \/3\	E 405	•		HEAT MH	COUNTY OPERATED BY
CA 95008	13-1788491		5,405.	0.		HEALTH	AMERICAN CANCER SOCIETY
2 Enter total number of section 501(c)(3) ar	•	-	e line 1 table				

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 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	
AMERICAN CIVIL LIBERTIES UNION								
FOUNDATION - GIFT PROCESSING								
DEPARTMENT, 125 BROAD STREET 18TH				_		COMMUNITY	FOR GENERAL OPERATING	
FL - NEW YORK, NY 10004-2400	13-6213516	501(C)(3)	7,750.	0.		DEVELOPMENT	SUPPORT	
MEDICAN ON THE CIVING POINTMETON							FOR GENERAL OPERATING	
AMERICAN ONLINE GIVING FOUNDATION						COMMUNITY	SUPPORT, DONATION MATCH AND RECOGNITION OF	
INC - 40 EAST MAIN STREET, SUITE 887 - NEWARK, DE 19711	81-0739440	501/C \/3\	1,156,306.	0.		DEVELOPMENT	VOLUNTEERS' SERVICE HOURS	
007 - NEWARK, DE 19711	81-0/39440	501(C)(3)	1,130,300.	0.		DEVELOPMENT	VOLUNIEERS SERVICE HOURS	
AMERICAN RED CROSS OF THE CENTRAL							TO SUPPORT THE PROGRAMS	
COAST - PO BOX AR - CARMEL, CA						EDUCATION/YOUTH	AND SERVICES IN SANTA	
93921	53-0196605	501(C)(3)	9,166.	0.		DEVELOPMENT	CRUZ COUNTY	
			, , , , , ,				TO SUPPORT BOTSHABLEO	
ANGEL STRONG							CHILDREN'S AIDS VILLAGE	
9112 EAST VERDE GROVE VIEW, STE 105							PROGRAMS, SERVICES,	
SCOTTSDALE, AZ 85255	84-2271008	501(C)(3)	5,700.	0.		HUMAN SERVICES	EVENTS, AND LEGAL NEEDS	
ARIZONA STATE UNIVERSITY								
FOUNDATION - FINANCIAL SERVICES,								
P.O. BOX 2260 - TEMPE, AZ						EDUCATION/YOUTH	TO SUPPORT SCHOLARSHIP	
85280-2260	86-6051042	501(C)(3)	10,000.	0.		DEVELOPMENT	FUNDS	
AROMAS SAN JUAN BAUTISTA COMMUNITY								
SCHOOLS FOUNDATION - 2300 SAN JUAN							FOR GENERAL OPERATING	
HIGHWAY - SAN JUAN BAUTISTA, CA						EDUCATION/YOUTH	SUPPORT AND TO SUPPORT	
95045-9557	77-0431330	501(C)(3)	5,500.	0.		DEVELOPMENT	SCHOLARSHIP FUNDS	
							L	
ARTS COUNCIL SANTA CRUZ COUNTY							FOR GENERAL SUPPORT, OPEN	
1070 RIVER STREET	04 2600140	E01/G \/2\	135 000			ARTS, HISTORY,	STUDIOS, MARIPOSA ARTS,	
SANTA CRUZ, CA 95060	94-2600140	DUI(C)(3)	135,000.	0.		AND CULTURE	AND ARTS EDUCATION	
ASPIRE PUBLIC SCHOOLS								
1001 22ND AVE, SUITE 100						EDUCATION/YOUTH		
OAKLAND, CA 94606	94-3311088	501(C)(3)	30,000.	0.		DEVELOPMENT	TO SUPPORT SHINING STARS	
, 611 7 2 3 3 3			1 22,300.	•			TO SUPPORT THE WORK OF	
ASSIST INTERNATIONAL, INC.							CAMINUL FELIX IN ROMANIA	
800 S STOCKTON AVE							AND PROVIDE SUPPORT TO	
RIPON, CA 95366	77-0243475	501(C)(3)	11,000.	0.		HUMAN SERVICES	ROMANIAN REFUGEES	
	1			·		1		

Schedule I (Form 990) COON I I							74-2000039 Page
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF FAITH COMMUNITIES OF SANTA CRUZ COUNTY - 532 CENTER STREET - SANTA CRUZ, CA 95060	81-3652622	501(C)(3)	25,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, AFC SHELTERING SERVICES AND THE SAFE SPACES PROGRAM
AUDUBON CALIFORNIA SOCIETY 220 MONTGOMERY STREET, SYE 1000 SAN FRANCISCO, CA 94104	13-1624102	501(C)(3)	23,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
AZTECAS YOUTH SOCCER ACADEMY PO BOX 1028 WATSONVILLE, CA 95076	77-0269322	501(C)(3)	27,750.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
BELLARMINE COLLEGE PREPARATORY 960 WEST HEDDING STREET, DEVELOPMENT OFFICE - SAN JOSE, CA 95126	94-1160938	501(C)(3)	110,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR CAPITAL CAMPAIGN AND SCHOLARSHIP SUPPORT
BIRCHBARK FOUNDATION 101 COOPER STREET SANTA CRUZ, CA 95060-4526	81-2531220	501(C)(3)	24,138.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
BLACK SURF SANTA CRUZ 101 COOPER ST, STE 223 SANTA CRUZ, CA 95060	87-4556850	501(C)(3)	35,250.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT, ALLIES GIVING CIRCLE
BONNY DOON COMMUNITY SCHOOL FOUNDATION - PO BOX 8089 - SANTA CRUZ, CA 95061-8089	77-0412170	501(C)(3)	10,540.	0.		EDUCATION/YOUTH	TO SUPPORT LEARNING AND ACADEMIC EXCELLENCE IN BONNY DOON
BONNY DOON UNION ELEMENTARY SCHOOL DISTRICT - 1492 PINE FLAT ROAD - SANTA CRUZ, CA 95060	94-2521545	501(C)(3)	36,353.	0.		EDUCATION/YOUTH	FOR COUNSELING FOR BONNY DOON ELEMENTARY STUDENTS AND STAFF
BOULDER CREEK RECREATION AND PARK DISTRICT - PO BOX 325 - BOULDER CREEK, CA 95006	94-1693488	501(C)(3)	5,700.	0.		HUMAN SERVICES	TO SUPPORT STAFFING OF THE BOULDER CREEK COMMUNITY TOOLSHED FOR FIRE SURVIVORS

Schedule I (Form 990) COUNTY							74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	_
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF SANTA CRUZ COUNTY - 543 CENTER STREET - SANTA CRUZ, CA 95060	94-6129075	501(C)(3)	21,500.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
BOYS & GIRLS CLUBS OF BENTON AND FRANKLIN COUNTIES - 2110 W HENRY STREET - PASCO, WA 99301	91-1673327	501(C)(3)	25,000.	0.		EDUCATION/YOUTH	TO RAISE FUNDS FOR A NEW CLUB TO SERVE 250 CHILDREN AND YOUNG ADULTS IN PROSSER, WA
BOYS AND GIRLS CLUBS OF GREATER OXNARD AND PORT HUENEME - 1900 WEST 5TH STREET - OXNARD, CA 93030	95-1785162	501(C)(3)	37,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT AND OPENING NYELAND ACRES CLUB ON SATURDAYS THROUGH 2022
BRADY CENTER TO PREVENT GUN VIOLENCE - 840 FIRST ST NE #400 - WASHINGTON, DC 20002	52-1285097	501(C)(3)	21,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND EVENTS
BRAVE TRAILS 2717 S ROBERSTON BLVD, SUITE C LOS ANGELES, CA 90034	46-4530883	501(C)(3)	6,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036-2103	53-0196577	501(C)(3)	250,000.	0.		ENVIRONMENT	FOR OFFICE OF CLIMATE SCORING
BROWN UNIVERSITY 164 ANGELL STREET, BOX 1877 PROVIDENCE, RI 02912	05-0258809	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR CLASS OF 2002 20TH REUNION GIFT
BRUCE W. WOOLPERT ALGEBRA ACADEMY 350 TECHNOLOGY DRIVE WATSONVILLE, CA 95076-2488	47-1116673	501(C)(3)	150,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
CABRILLO COLLEGE FOUNDATION 6500 SOQUEL DRIVE APTOS, CA 95003-3119	94-6121953	501(C)(3)	369,104.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, PLUS CAP, WES, SCHOLARSHIPS, EMERGENCY GRANTS & MORE

Schedule I (Form 990)

(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
CALIFORNIA AGRICULTURAL LEADERSHIP							
FOUNDATION - PO BOX 479 - SALINAS,						EDUCATION/YOUTH	TO SUPPORT 2022 AG
CA 93902-0479	94-6069269	501(C)(3)	36,667.	0.		DEVELOPMENT	LEADERSHIP FELLOWSHIP
CALIFORNIA COUNCIL OF LAND TRUSTS							
1017 L ST. #664						COMMUNITY	FOR CALIFORNIA ONWARD
SACRAMENTO, CA 95814-3805	01-0826246	501(C)(3)	114,000.	0.		DEVELOPMENT	INITIATIVE
CALIFORNIA FARM LINK							
335 SPRECKELS DRIVE, SUITE F							FOR GENERAL OPERATING
APTOS, CA 95003	94-3332630	501(C)(3)	150,000.	0.		ENVIRONMENT	SUPPORT
CALIFORNIA FILM & CULTURAL CENTER							
PO BOX 381						ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061	86-2813940	501(C)(3)	13,500.	0.		AND CULTURE	SUPPORT
CALIFORNIA STRAWBERRY GROWERS							TO SPONSOR THE CALIFORN
SCHOLARSHIP FUND - PO BOX 269 -						EDUCATION/YOUTH	STRAWBERRY COMMISSION'S
WATSONVILLE, CA 95077-0269	77-0411386	501(C)(3)	15,000.	0.		DEVELOPMENT	2022 SCHOLARSHIPS
CALIFORNIA WILDERNESS COALITION -							
CALWILD - 4900 SHATTUCK AVE,							FOR GENERAL OPERATING
#22627 - OAKLAND, CA 94609	51-0183228	501(C)(3)	6,000.	0.		ENVIRONMENT	SUPPORT
CALM							
1236 CHAPALA STREET							FOR GENERAL OPERATING
SANTA BARBARA, CA 93101	23-7097910	501(C)(3)	15,000.	0.		HUMAN SERVICES	SUPPORT
CASA DE LA CULTURA CENTER							FOR GENERAL OPERATING
225 SALINAS RD, 4A							SUPPORT AND MATCHING FOR
WATSONVILLE, CA 95076	30-0586010	501(C)(3)	57,200.	0.		HUMAN SERVICES	VOLUNTEERS' SERVICE HOU
,			,				FOR GENERAL OPERATING
CASA OF SANTA CRUZ COUNTY							SUPPORT, RECRUIT
813 FREEDOM BLVD							VOLUNTEERS, SPONSOR
WATSONVILLE, CA 95076-3803	77-0305354	501(C)(3)	125,309.	0.		HUMAN SERVICES	IMAGINE FUNDRAISER

Schedule I (Form 990) COUNTY	A : - t - D				adula I (Farm 000) Da		74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	s and Domestic Go	vernments (Sch	edule i (Form 990), Pa I	art II.) 	I
(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
							FOR GENERAL OPERATING
CATHOLIC CHARITIES DIOCESE OF							SUPPORT, TO SUPPORT CZU
MONTEREY - 922 HILBY AVENUE, SUITE							FIRE VICTIMS AND THEIR
C - SEASIDE, CA 93955	77-0042961	501(C)(3)	1,310,000.	0.		HUMAN SERVICES	RELATED EXPENSES
CATO INSTITUTE							
1000 MASSACHUSETTS AVE NW						EDUCATION/YOUTH	FOR GENERAL OPERATING
WASHINGTON, DC 20001	23-7432162	501(C)(3)	10,000.	0.		DEVELOPMENT	SUPPORT
·							DONATION MATCHING AS PART
CEBUDV NUCLEO SAN FRANCISCO							OF COMPANYS 2022 BIG DAY
17 CARLSON AVE						COMMUNITY	OF GIVING MATCH
SAN ANSELMO, CA 94960	15-0412429	501(C)(3)	6,489.	0.		DEVELOPMENT	OPPORTUNITY
CEDARS-SINAI MEDICAL CENTER							
GIFT ADMINISTRATION 8700 BEVERLY							
BLVD, SUITE 2416 - LOS ANGELES, CA							FOR GENERAL OPERATING
90048	95-1644600	501(C)(3)	13,000.	0.		HEALTH	SUPPORT
							FOR GENERAL OPERATING
CENTER FOR FARMWORKER FAMILIES							SUPPORT, HELP FARMWORKER
PO BOX 957							FAMILIES IN SANTA CRUZ
FELTON, CA 95018	90-0800339	501(C)(3)	117,090.	0.		HUMAN SERVICES	AND PAJARO VALLEY
CENTER FOR PRODUCE SAFETY							TO SUPPORT CENTER FOR
1100 MAIN ST, STE 210							PRODUCE SAFETYS 2022
WOODLAND, CA 95695	35-2489134	501(C)(3)	20,000.	0.		ENVIRONMENT	FUNDRAISING CAMPAIGN
			, ,	-			FOR GENERAL OPERATING
CENTRAL COAST YMCA							SUPPORT, SPONSOR THE YMCA
600 CAMINO EL ESTERO						EDUCATION/YOUTH	PAJARO PARK SUMMER CAMP
MONTEREY, CA 93940	77-0202335	501(C)(3)	72,500.	0.		DEVELOPMENT	IN 2022
CENTRAL HOME SUPPLY							
180 EL PUEBLO RD.							FOR CZU FIRE REBUILD
SCOTTS VALLEY, CA 95066	77-0202335	501(C)(3)	8,774.	0.		HUMAN SERVICES	EQUIPMENT AND MATERIALS
CENTRAL VALLEY STEEL							
STRUCTURES, LLC - 3210 W DAKOTA							TO REBUILD EQUIPMENT AND
AVE FRESNO, CA 93722	84-2055689	501(C)(3)	5,341.	0.		HUMAN SERVICES	MATERIALS
		, , ,			l .	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
CENTRO DE INTEGRACIN JUVENIL DE							
ZAMORA A.C/ZAMORA YOUTH							
INTEGRATION CENTER A.C AVE						EDUCATION/YOUTH	FOR PREVENTION OF
SANTIAGO 457, VALENCIA, 59610		501(C)(3)	15,100.	0.		DEVELOPMENT	ADDICTION IN ADOLESCENTS
CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE - 180 WOZ WAY - SAN JOSE, CA 95110	94-2870828	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
CITY OF WATSONVILLE ENVIRONMENTAL SCIENCE WORKSHOP - 120 2ND ST - WATSONVILLE, CA 95076	77-0395654	501(C)(3)	30,000.	0.		EDUCATION/YOUTH	FOR PROGRAMS, SATELLITE WORKSHOP SITES, AND GENERAL OPERATIONS
COACHELLA VALLEY RESCUE MISSION 47470 VAN BUREN INDIO, CA 92201	95-2684844	501(C)(3)	20,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
COASTAL COMMUNITY FOUNDATION 162 SOUTH RANCHO SANTA FE ROAD, SUI ENCINITAS, CA 92024	33-0216692	501(C)(3)	7,000.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT THE SOLANA BEACH FUND, SUPPORT MARKETING AND OUTREACH
COASTAL KIDS HOME CARE 1172 SOUTH MAIN STREET, #125 SALINAS, CA 93901	20-2549984	501(C)(3)	30,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT
COLGATE UNIVERSITY 13 OAK DRIVE HAMILTON, NY 13346	15-0532078	501(C)(3)	6,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR CLASS OF 1972 50TH REUNION
COMMUNITIES ORGANIZED FOR RELATIONAL POWER IN ACTION - 95 ALTA VISTA AVENUE - WATSONVILLE, CA 95076	77-0557460	501(C)(3)	20,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING
COMMUNITY ACTION BOARD OF SANTA CRUZ COUNTY (CAB) - 406 MAIN STREET SUITE 207 - WATSONVILLE, CA 95076-4639	94-2523780		394,317.	0.		HUMAN SERVICES	FOR GENERAL OPERATING

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	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
COMMUNITY AGROECOLOGY NETWORK PO BOX 7653 SANTA CRUZ, CA 95061-7653	75-3003372	501(C)(3)	5,250.	0.		ENVIRONMENT	FOR HIRING A GROWING JUSTICE YOUTH APPRENTICE
2.2.2.2. 0.1.02, 0.1. 30002 ,000	7.5 5555572	001(0)(0)	7,255.	•			
COMMUNITY ARTS & EMPOWERMENT 240 MAPLE AVENUE WATSONVILLE, CA 95076-4815	83-4528109	501(C)(3)	45,000.	0.		ARTS, HISTORY,	FOR WATSONVILLE BRILLANTE
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076-4356	94-2460211	501(C)(3)	384,629.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, MEALS ON WHEELS, FOOD FROM THE HEART, MCR, CZU FIRE RELIEF
MIIBONVIIIII, CII 33070 4330	34 2400211	301(6)(3)	304,023.	<u> </u>		HOMEN BERVICES	TO SPONSOR EL MERCADO
COMMUNITY HEALTH TRUST OF THE PAJARO VALLEY - 85 NIELSON STREET							HEALTHY FARMERS' MARKET IN RAMSEY PARK IN
- WATSONVILLE, CA 95076	94-1149702	501(C)(3)	15,000.	0.		HEALTH	WATSONVILLE, CALIFORNIA
CONSERVATION RESEARCH AND EDUCATION OPPORTUNITIES - 6044							EOD GENERAL OPERATING
1ST AVENUE NW - SEATTLE, WA 98107-2007	20-3574087	501(C)(3)	100,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT AND PROGRAMS
CORNELL UNIVERSITY 130 EAST SENECA STREET ITHACA, NY 14850	15-0532082		25,000.	0.		EDUCATION/YOUTH	FOR ADVANCED EV CHARGING RESEARCH
CORRALITOS WOMAN'S CLUB PO BOX 997 FREEDOM, CA 95019	94-6090638	501(C)(3)	10,000.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT CAPITAL IMPROVEMENTS TO THE CLUB
CRUZ ROJA MEXICANA EJERCITO MACIONAL NO. 1032 POLANCO	34 0030030		,				TO PURCHASE AND EQUIP AMBULANCE THAT SERVES RESIDENTS OF SAN QUINTIN
MEXICO		501(C)(3)	103,000.	0.		HEALTH	REGION OF BAJA, CA
CRUZIO 877 CEDAR STREET SUITE 150						COMMUNITY	FOR REIMBURSEMENT
SANTA CRUZ, CA 95060-3938	77-0459330	501(C)(3)	279,224.	0.		DEVELOPMENT	REQUESTS

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CSUMB FOUNDATION							TO FUND ENDOWED POSITION
UNIVERSITY DEVELOPMENT, 100 CAMPUS							IN NEW AGRIBUSINESS
CENTER-AVC BLDG 97 - SEASIDE, CA						EDUCATION/YOUTH	SUPPLY CHAIN MANAGEMENT
93955	80-0494808	501(C)(3)	250,000.	0.		DEVELOPMENT	PROGRAM AT CSUMB
CURIODYSSEY AT COYOTE POINT 1651 COYOTE POINT DR SAN MATEO, CA 94401	94-1262434	501(C)(3)	10,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING
		, , , ,					
DIENTES COMMUNITY DENTAL CARE 5300 SOQUEL AVENUE SUITE 103							FOR CAPITAL CAMPAIGN AT 1500 CAPITOLA ROAD AND
SANTA CRUZ, CA 95062-7806	77-0311752	501(C)(3)	47,500.	0.		HEALTH	GENERAL OPERATING SUPPORT
DIGITAL NEST							
1961 MAIN STREET # 221						EDUCATION/YOUTH	FOR GENERAL OPERATING
WATSONVILLE, CA 95076	46-5757256	501(C)(3)	127,347.	0.		DEVELOPMENT	SUPPORT
DIVERSITY CENTER PO BOX 8280 SANTA CRUZ, CA 95061-8280	77-0212967	501(C)(3)	65,850.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, EMERGING JEDI AWARDS
Simili Choz, on 35001 0200	,, 021230,	301(6)(3)	03,030.	•			iminos
DOCTORS WITHOUT BORDERS USA 40 RECTOR STREET, 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	10,350.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, UKRAINE RELIEF, AFGHANISTAN RELIEF
NEW TORK, NI 10000	13 3433432	301(6 7(37	10,550.	<u> </u>		IIBADIII	ALGUANISTAN KEDIEL
DOMINICAN HOSPITAL FOUNDATION							
1555 SOQUEL DRIVE							FOR GENERAL OPERATING
SANTA CRUZ, CA 95065-1705	94-2450442	501(C)(3)	83,000.	0.		HEALTH	SUPPORT
DOWNTOWN STREETS INC							
1671 THE ALAMEDA, #306							TO SUPPORT THE SANTA CRUZ
SAN JOSE, CA 95126	20-5242330	501(C)(3)	28,500.	0.		HUMAN SERVICES	DOWNTOWN STREETS TEAM
·							SUPPORT BIKE SMART
ECOLOGY ACTION							PROGRAMS, ENVIRONMENTAL
877 CEDAR STREET, SUITE 240							WORK AND SAFE ROUTES TO
SANTA CRUZ, CA 95060	94-2584236	501(C)(3)	27,627.	0.		ENVIRONMENT	SCHOOL PROGRAMS

Schedule I (Form 990) COUNTY Part II Continuation of Grants and Other	Assistance to Do	mostic Organizations	and Domostic Go	wornmonts (Sch	edule I (Form 990) Pa		74-2808039 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL SISTEMA SANTA CRUZ 235 SOUTH BRANCIFORTE AVENUE SANTA CRUZ, CA 95062	84-4998415	501(C)(3)	45,497.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
EL SISTEMA USA-SALINAS INC. 820 PARK ROW #672 SALINAS, CA 93901	27-2306206	501(C)(3)	10,000.	0.		ARTS, HISTORY,	TO SPONSOR THE 2022 YOSA
ELKHORN SLOUGH FOUNDATION PO BOX 267 MOSS LANDING, CA 95039-0267	94-2823247	501(C)(3)	539,185.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
EMERGENCY ASSISTANCE FOUNDATION, INC - PO BOX 850001 - ORLANDO, FL 32885-9884	45-1813056	501(C)(3)	45,000.	0.		HUMAN SERVICES	TO SUPPORT IMMEDIATE RESPONSE PROGRAM FOR HURRICANE IAN
ENCOMPASS COMMUNITY SERVICES 380 ENCINAL STREET, SUITE 200 SANTA CRUZ, CA 95060	23-7275290	501(C)(3)	50,250.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, CLINICS & OUTREACH, SI SE PUEDE BEHAVIORAL HEALTH CENTER
EPISCOPAL CHURCH OF ST. JOHN THE BAPTIST - 125 CANTERBURY DRIVE - APTOS, CA 95003	94-1629317	501(C)(3)	7,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
ESCUELAS SUSTENTABLES A.C AV. COYOACN NO. 1622 MEXICO		501(C)(3)	528,600.	0.		ENVIRONMENT	TO SUPPORT CREATION AND RENOVATION OF SCHOOLS/PARKS IN MICHOACN, PUEBLA,
ESPERANZA COMMUNITY FARMS 8 ESTRELLAS CIRCLE SALINAS, CA 93905	92-0412067	501(C)(3)	12,250.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
ESPERANZA DEL VALLE 925 46TH AVE, #108 CAPITOLA, CA 95010	47-2040811	501(C)(3)	12,500.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT

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ESTRELLAS DE ESPERANZA							
14 CHAPPELL LOOP						ARTS, HISTORY,	FOR GENERAL OPERATING
FREEDOM, CA 95019	94-1149702	501(C)(3)	30,000.	0.		AND CULTURE	SUPPORT
FAMILIES IN TRANSITION, INC. 406 MAIN STREET SUITE 326 WATSONVILLE, CA 95076	77-0327992	501(C)(3)	65,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, RESTORING CREDIT & OPPORTUNITY PROGRAM
FAMILY SERVICE AGENCY OF THE CENTRAL COAST - 104 WALNUT AVENUE SUITE 208 - SANTA CRUZ, CA 95060-3929	94-1716354	501(C)(3)	40,361.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, SURVIVORS HEALING CENTER, WOMENCARE & PAJARO VALLEY
FARM DISCOVERY AT LIVE EARTH							
PO BOX 3490						EDUCATION/YOUTH	FOR GENERAL OPERATING
FREEDOM, CA 95019-3490	26-3728160	501(C)(3)	16,047.	0.		DEVELOPMENT	SUPPORT
FEEDING AMERICA 161 NORTH CLARK STREET, SUITE 700 CHICAGO, IL 60601	36-3673599	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR THE FAST FORWARD MOVEMENT PARTICIPATING IN TEAM FEED
FELTON COMMUNITY CLUB PO BOX 763 FELTON, CA 95018-0763	77-0029617	501(C)(3)	13,370.	0.		HEALTH	FOR VACCINE POP UP CLINICS AND OUTREACH, COVID VACCINE AND SUPPORT
FIRE SAFE COUNCIL OF SANTA CRUZ COUNTY - 820 BAY AVENUE, SUITE 136 - CAPITOLA, CA 95010	81-4178571		20,000.	0.		ENVIRONMENT	FOR ADMINISTRATIVE SUPPORT AND PROGRAM COORDINATION
FOOD BANK OF CONTRA COSTA AND SOLANO - 4010 NELSON AVE - CONCORD, CA 94520	94-2418054		10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
FOOD BANK OF SANTA BARBARA COUNTY 490 W FOSTER RD SANTA MARIA, CA 93455	77-0169214	501(C)(3)	15,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT

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FOOD SHARE, INC.							
4156 SOUTHBANK ROAD						COMMUNITY	FOR GENERAL OPERATING
OXNARD, CA 93036	77-0018162	501(C)(3)	15,000.	0.		DEVELOPMENT	SUPPORT
,			, ,	-			
FOOD WHAT?!							
1156 HIGH ST						EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95064	81-2590280	501(C)(3)	49,750.	0.		DEVELOPMENT	SUPPORT
							TO RENOVATE PRIMARY
FOUNDATION SANADY							SCHOOL, IMPLEMENT
9 AVENUE KHALID BNOU LOUALID, AIN S							EDUCATIONAL PROJECT IN
MEXICO		501(C)(3)	52,823.	0.		HUMAN SERVICES	VILLE OF TOUNF, MOROCCO
							TO SUPPORT FLORAL COUNTY
FRIENDS OF SANTA CRUZ COUNTY PARKS							PARK, 2022 JUNIOR GUARDS
870 17TH AVENUE, SUITE 2							PROGRAM, WILLOWBROOK
SANTA CRUZ, CA 95062-4166	77-0209249	501(C)(3)	39,924.	0.		ENVIRONMENT	COUNTY PARK
FRIENDS OF SANTA CRUZ STATE PARKS							
1543 PACIFIC AVENUE, SUITE 206							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060-3903	51-0183410	501(C)(3)	16,103.	0.		ENVIRONMENT	SUPPORT
	01 0100110	561(5)(5)	10,100.	•			
FRIENDS OF THE RAIL & TRAIL							FOR GENERAL OPERATING
PO BOX 1652							SUPPORT, FOR FRIENDS OF
CAPITOLA, CA 95060-1625	46-1323531	501(C)(3)	30,500.	0.		ENVIRONMENT	THE RAIL & TRAIL
FRIENDS OF THE RIVER FOUNDATION							
1418 20TH ST, STE 100							FOR GENERAL OPERATING
SACRAMENTO, CA 95811	94-2400210	501(C)(3)	6,250.	0.		ENVIRONMENT	SUPPORT
							FOR GENERAL OPERATING
FRIENDS OF THE SANTA CRUZ PUBLIC							SUPPORT AND SPECIAL
LIBRARIES - PO BOX 8472 - SANTA						EDUCATION/YOUTH	LIBRARY PROGRAMS AT SANTA
CRUZ, CA 95061-8472	94-2612557	501(C)(3)	18,478.	0.		DEVELOPMENT	CRUZ PUBLIC LIBRARIES
							TO SUPPORT THE MISSION
FRIENDS OF THE WATSONVILLE PUBLIC						DDUGA MITON (WOVE	AND PROGRAMS OF THE
LIBRARIES - 275 MAIN STREET SUITE	22 7066040	E01/G \/3\	14 276	_		EDUCATION/YOUTH	FRIENDS OF THE
100 - WATSONVILLE, CA 95076-5133	23-7066840	DOT(C)(3)	14,376.	0.		DEVELOPMENT	WATSONVILLE PUBLIC

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FRIENDS OF WATSONVILLE PARKS AND COMMUNITY SERVICE - PO BOX 462 - WATSONVILLE, CA 95077-2013	46-4409013	501(C)(3)	17,000.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT NERDVILLE MINI-CON 2022, HOLIDAY LIGHTS, AND WATSONVILLE STRAWBERRY FEST BOOTH
FUNDACIN VER BIEN PARA APRENDER MEJOR A.C #1425 EDIFICIO ANEXO - MEXICO		501(C)(3)	39,000.	0.		HEALTH	TO IMPROVE ACCESS TO VISUAL HEALTH CAMPAIGN IN TLAXCALA AND JALISCO
GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST - DEVELOPMENT DEPARTMENT, 1500 PALMA DRIVE SUITE 110 - VENTURA, CA 93003-6451	94-1567162	501(C)(3)	12,941.	0.		EDUCATION/YOUTH	TO SUPPORT THE SCOUTING PROGRAMS IN THE MONTEREY BAY AREA
GIRLS INCORPORATED OF THE CENTRAL COAST - 318 CAYUGA ST, STE 206 - SALINAS, CA 93901	20-5040398	501(C)(3)	72,250.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PL, STE A BOULDER, CO 80301	84-1612422	501(C)(3)	6,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
GLOBALGIVING FOUNDATION 1 THOMAS CIRCLE NW WASHINGTON, DC 20005-5802	30-0108263	501(C)(3)	30,500.	0.		HUMAN SERVICES	FOR THE UKRAINE CRISIS RELIEF FUND
GLOBE INTERNATIONAL MINISTRIES PO BOX 3040 PENSACOLA, FL 32516	23-7453583	501(C)(3)	6,000.	0.		HUMAN SERVICES	TO SUPPORT THE MINISTRY OF BARRON FREITAS
GOODENOUGH UNDERGROUND INC 6974 EMPIRE GRADE SANTA CRUZ, CA 95060	82-4508056	501(C)(3)	8,600.	0.		HUMAN SERVICES	TO REPAIR DAMAGE DONE IN FIRE AND DEBRIS REMOVAL TO WATER LINE BETWEEN ROAD AND PROPERTIES
GREY BEARS, INC. 2710 CHANTICLEER AVENUE SANTA CRUZ, CA 95065-1812	94-2298681	501(C)(3)	48,200.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT

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Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	T
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HABITAT AND WATERSHED CARETAKERS							
(HAWC) - 320 CAVE GULCH - SANTA						COMMUNITY	FOR HABITAT AND WATERSHE
CRUZ, CA 95060	52-2381905	501(C)(3)	20,000.	0.		DEVELOPMENT	CARETAKERS (HAWC)
HABITAT FOR HUMANITY MONTEREY BAY							TO SUPPORT THE PROGRAMS
108 MAGNOLIA STREET							OF HABITAT FOR HUMANITY
SANTA CRUZ, CA 95062	77-0206356	501(C)(3)	32,661.	0.		HUMAN SERVICES	IN SANTA CRUZ COUNTY
,			,				FOR GENERAL OPERATING
HAPPY VALLEY ELEMENTARY SCHOOL							SUPPORT, TO SUPPORT
3125 BRANCIFORTE DRIVE						EDUCATION/YOUTH	CULTURAL AND ARTS
SANTA CRUZ, CA 95065-9661	94-6002633	501(C)(3)	42,643.	0.		DEVELOPMENT	PROGRAMS AND ACADEMIC
UADEMBLI GOLLEGE EQUIDATION							anonaonauth of mue 2022
HARTNELL COLLEGE FOUNDATION 411 CENTRAL AVENUE						EDUCATION/YOUTH	SPONSORSHIP OF THE 2022 CELEBRATION OF THE ARTS
SALINAS, CA 93901	94-2781664	501(C)(3)	10,000.	0.		DEVELOPMENT	AT HARTNELL COLLEGE EVEN
biblinis, ch 33301	34 2701004	301(0)(3)	10,000.	· ·		DEVELOT MENT	III IMMINUUU COULIGII IIVIM
HEALTH PROJECTS CENTER							
9000 SOQUEL AVENUE SUITE 103							FOR GENERAL OPERATING
SANTA CRUZ, CA 95062-2097	94-2713281	501(C)(3)	23,000.	0.		HEALTH	SUPPORT
HOMEBOY INDUSTRIES							
130 W BRUNO ST						COMMUNITY	FOR GENERAL OPERATING
LOS ANGELES, CA 90012	95-4800735	501(C)(3)	15,000.	0.		DEVELOPMENT	SUPPORT
HOMELESS GARDEN PROJECT							
PO BOX 617						COMMUNITY	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061-0617	77-0475165	501(C)(3)	19,000.	0.		DEVELOPMENT	SUPPORT
HOOVER INSTITUTION - STANFORD							
UNIVERSITY - OFFICE OF							
DEVELOPMENT, 434 GALVEZ MALL,						EDUCATION/YOUTH	FOR GENERAL OPERATING
STANFORD UNIVERSITY - STANFORD, CA	94-1156365	501(C)(3)	125,000.	0.		DEVELOPMENT	SUPPORT
HOSPICE OF SANTA CRUZ COUNTY							
940 DISC DRIVE							FOR GENERAL OPERATING
SCOTTS VALLEY, CA 95066-4544	94-2497618	501(C)(3)	144,498.	0.		HEALTH	SUPPORT

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HOUSING MATTERS 115-B CORAL STREET	77 0126702	E01/G)/2)	149 000	0		HIMAN CEDVICEC	FOR GENERAL OPERATING SUPPORT, REBELE FAMILY SHELTER PROGRAM AND
SANTA CRUZ, CA 95060-2143	77-0126783	501(C)(3)	148,000.	0.		HUMAN SERVICES	MODULAR HOUSING PROJECT
HOUSING SANTA CRUZ COUNTY 132 VAN NESS AVENUE SANTA CRUZ, CA 95060	47-4091853	501(C)(3)	24,250.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
IMMIGRANT LEGAL SERVICES OF THE CENTRAL COAST - 15 E BEACH ST, STE 202 - WATSONVILLE, CA 95076	61-1807874	501(C)(3)	5,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
INDEXICAL 1050 RIVER STREET UNIT 119 SANTA CRUZ, CA 95060-1768	83-2217815	501(C)(3)	15,000.	0.		ARTS, HISTORY, AND CULTURE	AGENCY FLEX FUND DISBURSEMENT REQUEST
INSTITUTE FOR JUSTICE 901 N GLEBE RD, #900 ARLINGTON, VA 22203	52-1744337	501(C)(3)	7,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
INSTITUTE FOR SECURITY AND TECHNOLOGY - 5800 HARBORD DRIVE - OAKLAND, CA 94611-3123	47-5677755	501(C)(3)	10,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
INSTITUTE FOR SHIPBOARD EDUCATION/SEMESTER AT SEA - PO BOX 842945 - DALLAS, TX 75284-2945	95-3075415	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT THE GAYLEN LITTLE FAMILY GAP YEAR AND FIRST GENERATION STUDENT SCHOLARSHIP FUN
INTERNATIONAL COMMITTEE OF THE RED CROSS - 801 2ND AVENUE - NEW YORK, NY 10017	98-6001029	501(C)(3)	33,350.	0.		HUMAN SERVICES	TO SUPPORT RED CROSS IN UKRAINE, FOR THE UKRAINIAN RELIEF EFFORT
INTERNATIONAL COMMUNITY FOUNDATION 2505 N AVENUE NATIONAL CITY, CA 91950	33-0457858	501(C)(3)	80,548.	0.		COMMUNITY DEVELOPMENT	FOR NO MAS BASURA IN LA VENTANA, BAJA CALIFORNI SUR, MEXICO

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INTERNATIONAL MENTAL HEALTH							
CONSULTING, INC - 602 TOWHEE LANE							
- CHESAPEAKE, VA 23323	82-2270159	501(C)(3)	25,000.	0.		HEALTH	FOR UKRAINE RELIEF
							FOR GENERAL OPERATING
JACOB'S HEART CHILDREN'S CANCER							SUPPORT, EMERGING JEDI
SUPPORT SERVICES - 680 WEST BEACH							AWARDS, ADOPT-A-FAMILY
STREET - WATSONVILLE, CA 95076	68-0413822	501(C)(3)	46,690.	0.		HEALTH	XMAS PROGRAM
JEWEL THEATRE COMPANY						ADMG HITGMODY	TOD GENERAL OPERATING
PO BOX 1080	22 2016070	E01/G \/2\	11 100			ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061-1080	22-3916870	501(C)(3)	11,108.	0.		AND CULTURE	SUPPORT
JUNIOR ACHIEVEMENT WORLDWIDE							
745 ATLANTIC AVENUE						COMMUNITY	FOR GENERAL OPERATING
BOSTON, MA 02111	27-3666259	501(C)(3)	15,000.	0.		DEVELOPMENT	SUPPORT
			<u> </u>				
KALAMAZOO COLLEGE							
1200 ACADEMY STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
KALAMAZOO, MI 49006	38-1358014	501(C)(3)	100,000.	0.		DEVELOPMENT	SUPPORT
							TO SUPPORT STRAWBERRY
KANBE'S MARKETS							FLATS FOREVER PROJECT
3119 TERRACE STREET							COSTS, SPONSORSHIP OF
KANSAS CITY, MO 64111	81-1505292	501(C)(3)	23,100.	0.		HUMAN SERVICES	KANBE'S FEST 2022
							FOR GENERAL OPERATING
KARIMU INTERNATIONAL HELP							SUPPORT, ADDITIONAL WATER
FOUNDATION - PO BOX 38 -							ACCESS POINTS FOR THE
IDYLLWILD, CA 92549	32-0227956	501(C)(3)	10,250.	0.		HUMAN SERVICES	ARRI COMMUNITY
WIDDOWED BEENDOWED TWO ISSUED							
KIDPOWER TEENPOWER FULLPOWER						TIDUGA TITOM (MOTTHE	TOD GENERAL OPERATOR
PO BOX 1212	77 0006710	E01/G \/2\	27.000			EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95061-1212	77-0226712	DUI(C)(3)	27,000.	0.		DEVELOPMENT	SUPPORT FOR PHASE II FULL STREAM
KIDSTREAM							
3100 E. PONDEROSA DRIVE						ADMG HIGMODY	AHEAD! CAPITAL CAMPAIGN TO RAISE FUNDS TO OPEN
CAMARILLO, CA 93010	81-3055601	501(C)(3)	25,000.	0.		ARTS, HISTORY, AND CULTURE	CHILDRENS MUSEUM
CIMINITUDO, CA 73010	1 01 2022001	20116 1131	23,000.	<u> </u>	l	TAD COLLOKE	CHILDRENS MUSEUM

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Part II Continuation of Grants and Other	· Assistance to Dor	nestic Organizations	s and Domestic Go	vernments (Sch	eaule I (Form 990), Pa T	art II.)	T
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KITCHEN TABLE ADVISORS							
405 14TH STREET SUITE 164							FOR GENERAL OPERATING
OAKLAND, CA 94612-2705	91-2166435	501(C)(3)	10,000.	0.		HUMAN SERVICES	SUPPORT
KUUMBWA JAZZ CENTER							FOR GENERAL OPERATING
320 CEDAR STREET, SUITE 2						ARTS, HISTORY,	SUPPORT, SUPPORT KUUMBWA
SANTA CRUZ, CA 95060-4362	51-0159252	501(C)(3)	28,781.	0.		AND CULTURE	JAZZ HONOR BAND
I A GRUG VARIOUS PROMUGNION							
LA CRUZ HABITAT PROTECTION PROJECT, INC 75 WOOD STREET -							FOR GENERAL OPERATING
KEENE, NH 03431-3504	20-8448752	501(C)(3)	6,000.	0.		ENVIRONMENT	SUPPORT
			, -	-			
LADERA RECREATION DISTRICT							TO SUPPORT THE
150 ANDETA WAY						COMMUNITY	RECONSTRUCTION OF THE
PORTOLA VALLEY, CA 94028	32-0276019	501(C)(3)	10,000.	0.		DEVELOPMENT	BABY/TODDLER POOL
LAND TRUST OF SANTA CRUZ COUNTY							
617 WATER STREET							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060-4148	94-2431856	501(C)(3)	693,034.	0.		ENVIRONMENT	SUPPORT
LANDWATCH MONTEREY COUNTY							TOD GENERAL OPERATING
PO BOX 1876 SALINAS, CA 93902-1876	91-1862145	501(C)(3)	5,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
DALINAD, CA 73702 1070	J1 1002143	301(0)(3)	3,300.	<u> </u>		ENVIRONMENT	FOR REBUILD EQUIPMENT AND
LAST CHANCE COMMUNITY CENTER							MATERIALS, DISTRIBUTION
PO BOX 127						COMMUNITY	TO LAST CHANCE ROAD
DAVENPORT, CA 95017	94-2808039	501(C)(3)	95,000.	0.		DEVELOPMENT	ASSOCIATION
THE LAD GOTENGE PROGRAM							
LIFE LAB SCIENCE PROGRAM 1156 HIGH STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
SANTA CRUZ, CA 95064-1077	94-2778848	501(C)(3)	45,000.	0.		DEVELOPMENT	SUPPORT
	1	- , , - ,		-			
LIVE OAK EDUCATION FOUNDATION							
1651 SHIRLEY LANE						EDUCATION/YOUTH	FOR GOOD COMMUNITY IMPACT
SANTA CRUZ, CA 95062	46-5400905	501(C)(3)	7,500.	0.		DEVELOPMENT	GRANT FOR Q3 2022

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LIVE OAK SCHOOL DISTRICT 984-1BOSTWICK LANE SANTA CRUZ, CA 95062	13-4148824	501(C)(3)	30,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT OF LIVE OAK CRADLE TO CAREER
LOMA PRIETA JOINT UNION SCHOOL DISTRICT - 23800 SUMMIT ROAD - LOS GATOS, CA 95033-4054	37-2064285	501(C)(3)	8,231.	0.		EDUCATION/YOUTH	TO ENABLE RICH LEARNING EXPERIENCES AND ACADEMIC EXCELLENCE IN LOMA PRIETA
LOS ANGELES COUNTY MUSEUM OF ART (LACMA) - 5908 WILSHIRE BLVD - LOS ANGELES, CA 90036	95-2264067	501(C)(3)	48,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
LOS ANGELES LGBT CENTER 1118 N. MCCADDEN PLACE LOS ANGELES, CA 90038	95-3567895	501(C)(3)	13,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING
MENTORS DRIVING CHANGE FOR BOYS, MEN, AND DADS - PO BOX 1585 - FREEDOM, CA 95019-1585	82-2506285	501(C)(3)	13,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING
MID-COUNTY SENIOR CENTER 829 BAY AVENUE CAPITOLA, CA 95010	94-1711616	501(C)(3)	10,000.	0.		HUMAN SERVICES	TO SUPPORT CAPITAL IMPROVEMENTS TO THE CENTER
MONARCH SERVICES 233 EAST LAKE AVENUE WATSONVILLE, CA 95076-4716	94-2462783	501(C)(3)	41,993.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624-0355	81-0369262	501(C)(3)	25,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
MORELAND NOTRE DAME SCHOOL 133 BRENNAN STREET WATSONVILLE, CA 95076	94-1347045	501(C)(3)	18,079.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, EVENTS, SCHOLARSHIPS

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Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa I	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT MADONNA CENTER/ADVAITA							
HANUMAN FELLOWSHIP - 445 SUMMIT						COMMUNITY	TO GENERAL FUND FOR BRUSH
ROAD - WATSONVILLE, CA 95076	51-0174679	501(C)(3)	7,500.	0.		DEVELOPMENT	BANDIT CHIPPER
MOUNTAIN PARKS FOUNDATION							FOR GENERAL OPERATING
525 NORTH BIG TREES PARK ROAD							SUPPORT, THE BIG BASIN
FELTON, CA 95018	23-7275572	501(C)(3)	6,749.	0.		ENVIRONMENT	ORAL HISTORY PROJECT
MOUNTAINS 2 SEA							
1245 EUREKA CANYON ROAD						EDUCATION/YOUTH	FOR GENERAL OPERATING
WATSONVILLE, CA 95076-0151	83-0697842	501(C)(3)	24,500.	0.		DEVELOPMENT	SUPPORT
MUSEUM OF ART AND HISTORY AT THE			,				
MCPHERSON CENTER (SANTA CRUZ							
MUSEUM OF ART AND - 705 FRONT						ARTS, HISTORY,	FOR GENERAL OPERATING
STREET - SANTA CRUZ, CA 95060	94-2718861	501(C)(3)	192,671.	0.		AND CULTURE	SUPPORT
MUSIC IN MAY							
P.O. BOX 2451						ARTS, HISTORY,	ANNUAL DONATION OF
SANTA CRUZ, CA 95063	81-4148441	501(C)(3)	10,000.	0.		AND CULTURE	\$10,000
NAMI SANTA CRUZ COUNTY 542 OCEAN STREET, SUITE F							FOR GENERAL OPERATING SUPPORT, SUSTAIN AND GROW
SANTA CRUZ, CA 95060	77-0002878	501(C)(3)	34,350.	0.		HEALTH	MENTAL HEALTH CAMPAIGN
binini choz, dii 3000	77 0002070	301(0)(3)	31,330.	•			
NATIONAL CONFLICT RESOLUTION							TO SUPPORT A PATH FORWARD
CENTER - 530 B STREET, STE 1700 -						COMMUNITY	IN THE COMMUNITY AND THE
SAN DIEGO, CA 92101	33-0433314	501(C)(3)	10,000.	0.		DEVELOPMENT	PEACEMAKER AWARDS
NATIONAL PARK FOUNDATION							
1500 K STREET NW, SUITE 700							FOR GENERAL OPERATING
WASHINGTON, DC 20005	52-1086761	501(C)(3)	10,000.	0.		ENVIRONMENT	SUPPORT
•		-	, , ,				
NATURE CONSERVANCY							
4245 NORTH FAIRFAX DRIVE SUITE 100	F2 02:255	504 (5.) (5.		_			FOR GENERAL OPERATING
ARLINGTON, VA 22203	53-0242652	DUI(C)(3)	28,500.	0.		ENVIRONMENT	SUPPORT

Schedule I (Form 990) COUNTY						9	04-2808039 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.)	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
NEXT GENERATION SCHOLARS							
1018 E STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
SAN RAFAEL, CA 94901	26-1110584	501(C)(3)	55,000.	0.		DEVELOPMENT	SUPPORT AND PROGRAMS
NPH USA (FORMELY FRIENDS OF THE							
ORPHANS) - 134 NORTH LA SALLE							
STREET, SUITE 500 - CHICAGO, IL							FOR GENERAL OPERATING
60602-1036	65-1229309	501(C)(3)	50,000.	0.		HUMAN SERVICES	SUPPORT
NUCLEAR THREAT INITIATIVE							EOD GENERAL ODERAMING
1776 EYE STREET, N.W, STE 600 WASHINGTON, DC 20006	52-2289435	501/C \/3\	30,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
WASHINGTON, DC 20000	32 2203433	501(6 /(5/	30,000.	· ·		ENVIRONMENT	DOLLOKI
OASIS IN BAJA INC							
817 GEORGEBORO COURT							TO SUPPORT CHILDREN AND
BRENTWOOD, TN 37027	84-3339981	501(C)(3)	23,000.	0.		HUMAN SERVICES	YOUNG ADULTS IN BAJA CA
OHIO BIRD SANCTUARY							
3774 ORWEILER ROAD				_			FOR THE OBS WINGS
MANSFIELD, OH 44903	34-1691325	501(C)(3)	300,000.	0.		ENVIRONMENT	CAMPAIGN
O'NEILL SEA ODYSSEY							
2222 EAST CLIFF DRIVE SUITE 222							FOR GENERAL OPERATING
SANTA CRUZ, CA 95062-4739	77-0464784	501(C)(3)	43,823.	0.		ENVIRONMENT	SUPPORT
•			, ,	-			
OVEREATERS ANONYMOUS							
PO BOX 44727							FOR GENERAL OPERATING
RIO RANCHO, NM 87174-4727	23-7016806	501(C)(3)	6,000.	0.		HEALTH	SUPPORT, TRANSLATIONS
OXFAM AMERICA							
226 CAUSEWAY ST, 5TH FLOOR	22 7060110	E01(G)(2)	10.000	_		HIMAN GERVICES	FOR GENERAL OPERATING
BOSTON, MA 02114	23-7069110	DUI(C)(3)	10,000.	0.		HUMAN SERVICES	SUPPORT
OXNARD UNITED SOCCER CLUB							
3700 DALLAS DRIVE						EDUCATION/YOUTH	FOR GENERAL OPERATING
OXNARD, CA 93033	36-4663382	501(C)(3)	14,997.	0.		DEVELOPMENT	SUPPORT

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	ırt II.) T	T
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PACHAMAMA ALLIANCE							FOR GENERAL OPERATING
P.O. BOX 29191							SUPPORT AND AMAZON SACRE
SAN FRANCISCO, CA 94129	94-3249793	501(C)(3)	11,000.	0.		ENVIRONMENT	HEADWATERS INITIATIVE
PACIFIC ELEMENTARY SCHOOL							FOR COUNSELING FOR
PO BOX H						EDUCATION/YOUTH	PACIFIC ELEMENTARY
DAVENPORT, CA 95017	32-0453360	501(C)(3)	36,353.	0.		DEVELOPMENT	STUDENTS AND STAFF
DIVERSIONE, OIL 35017	32 0133300	501(6)(5)	30,333.	••		DEVELOTIENT.	FOR GENERAL OPERATING
PAJARO VALLEY ARTS							SUPPORT, OUTREACH,
37 SUDDEN STREET						ARTS, HISTORY,	EXHIBITS & ARTISTS, ALMA
WATSONVILLE, CA 95076-4322	77-0107201	501(C)(3)	49,250.	0.		AND CULTURE	SAGRADA EVENT
PAJARO VALLEY HEALTHCARE DISTRICT	77 0207202	002(0)(0)	13,200.	•			
PROJECT - 23 EAST BEACH STREET							TO SUPPORT THE
SUITE 214 - WATSONVILLE, CA							WATSONVILLE COMMUNITY
95076-4642	87-2323474	501(C)(3)	7,509,167.	0.		HEALTH	HOSPITAL ACQUISITION
30076 1012	07 2020171	002(0)(0)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			FOR GENERAL OPERATING
PAJARO VALLEY HISTORICAL							SUPPORT, SUPPORT
ASSOCIATION - PO BOX 623 -						ARTS, HISTORY,	MAINTENANCE OF THE
WATSONVILLE, CA 95077-0623	94-1663161	501(C)(3)	45,259.	0.		AND CULTURE	HISTORIC BOCKIUS-ORR
		, , , , ,	12,232				
PAJARO VALLEY LOAVES AND FISHES							FOR GENERAL OPERATING
150 SECOND STREET							SUPPORT, 2022 EMPTY BOWL
WATSONVILLE, CA 95076-4922	77-0319247	501(C)(3)	54,190.	0.		HUMAN SERVICES	, FUNDRAISING
PAJARO VALLEY PREVENTION AND			1	-			FOR GENERAL OPERATING
STUDENT ASSISTANCE, INC 335							SUPPORT, PROGRAMS,
EAST LAKE AVENUE - WATSONVILLE, CA						EDUCATION/YOUTH	CAMPAIGN, AND WELLNESS
95076	77-0269322	501(C)(3)	35,750.	0.		DEVELOPMENT	CENTER CELEBRATION
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
PAJARO VALLEY SHELTER SERVICES							
115 BRENNAN STREET							FOR GENERAL OPERATING
WATSONVILLE, CA 95076-4304	94-1393418	501(C)(3)	114,630.	0.		HUMAN SERVICES	SUPPORT
_							
PAJARO VALLEY UNIFIED SCHOOL							FOR STARLIGHT ELEMENTARY
DISTRICT - 294 GREEN VALLEY ROAD -							RAISING A READER, &
WATSONVILLE, CA 95076	77-8375541	501(C)(3)	80,867.	0.		DEVELOPMENT	SCHOLARSHIPS

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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PAJARO VALLEY YOUTH SOCCER CLUB PO BOX 3242 FREEDOM, CA 95019-3242	77-0420362	501(C)(3)	135,583.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
PEACE DEVELOPMENT FUND PO BOX 1280 AMHERST, MA 01004-1280	04-2738794	501(C)(3)	6,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING
PENINSULA OPEN SPACE TRUST 222 HIGH STREET PALO ALTO, CA 94301	94-2392007	501(C)(3)	7,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
PLANET WOMEN 9720 COPPERTOP LOOP NE, STE1104 BAINBRIDGE ISLAND, WA 98110-3690	27-0726824	501(C)(3)	250,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAM STREET, 10TH FLOOR - NEW YORK, NY 10038	13-1644147	501(C)(3)	28,105.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD ILLINOIS DEVELOPMENT DEPARTMENT, P.O. BOX 73 CHICAGO, IL 60673	36-2170901	501(C)(3)	20,105.	0.		HEALTH	TO SUPPORT SERVICES FOR INDIGENT OUT-OF-STATE CLIENTS
PLANNED PARENTHOOD MAR MONTE 1691 THE ALAMEDA SAN JOSE, CA 95126	94-1583439	501(C)(3)	43,355.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, FOR SERVICES IN SANTA CRUZ COUNTY
POSITIVE DISCIPLINE COMMUNITY RESOURCES - PO BOX 5365 - SANTA CRUZ, CA 96063	27-1364795	501(c)(3)	54,500.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
PROGRAMA ADOPTE UN TALENTO A.C. (PAUTA) - UNIVERSITY EXTERIOR CIRCUIT S/N CUIDAD UNIVERSITARIA COYOACAN, CP 04510, BUI - MEXICO		501(C)(3)	77,858.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR PAUTA SCIENCE CLUBS TO PROMOTE PLANETARY HEALTH IN SECONDARY EDUCATION

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	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
QUEER YOUTH TASK FORCE PO BOX 8280, C/O DIVERSITY CENTER SANTA CRUZ, CA 95061-8280	77-0212967	501(C)(3)	13,750.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR THE QUEER YOUTH TASK FORCE AND SAFE SCHOOLS PROJECT, STUDENT SUMMIT STAFFING EXPENSES
RANCHO CIELO YOUTH CAMPUS P.O. BOX 6948 SALINAS, CA 93912	77-0555859	501(C)(3)	18,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, SPONSOR 12TH ANNUAL CULINARY ROUND-UP EVENT
RANK THE VOTE 872 MASSACHUSETTS AVENUE, SUITE 1-6 CAMBRIDGE, MA 02139	84-4007566	501(C)(3)	200,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
REDWOOD ROOFING REPAIR 1840 41ST AVE, SUITE 205 CAPITOLA, CA 95010	20-8240450	501(C)(3)	18,575.	0.		HUMAN SERVICES	FOR FIRE DAMAGE REPAIRS
RESURRECTION CATHOLIC COMMUNITY PO BOX 87 APTOS, CA 95001-0087	74-1307828	501(C)(3)	5,500.	0.		HUMAN SERVICES	FOR RESURRECTION ASSISTANCE MINISTRY, FUND TRANSPORTATION OF KIDS TO VISIT DAD IN PRISON
RETHINK IDENTITY MEDICINE ETHICS INC - 8 THE GREEN - DOVER, DE 19901-3618	83-3053400	501(C)(3)	30,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
RICE UNIVERSITY OFFICE OF DEVELOPMENT MS-81, P.O. B HOUSTON, TX 77251-1892	74-1109620	501(C)(3)	180,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
ROAD RUNNERS OF AMERICA-TAMPA BAY RUNNERS - PO BOX 290372 - TAMPA BAY, FL 33687	59-2130553	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	TO SPONSOR THE 2023 DRISCOLL'S STRAWBERRY CLASSIC ROAD RACE HOSTED BY TAMPA BAY RUNNERS
ROCKY MOUNTAIN BIOLOGICAL LABORATORY - PO BOX 519 - CRESTED BUTTE, CO 81224	84-6050523	501(C)(3)	219,704.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, SUPPORT GRAD FELLOWSHIP IN ECOLOGY & EVOLUTION OF PLANTS

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Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa r	art II.) T	1
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ROTARY CLUB OF SANTA CRUZ SUNRISE FOUNDATION - PO BOX 7026 - SANTA CRUZ, CA 95061-7026	81-0619851	501(C)(3)	16,447.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, SUPPORT PROGRAMS, DONATION MATCH
CR02, CA 33001 7020	01 0013031	501(6 7(37	10,447.	0.		DEVELOTMENT	FROGRAMS, BONATION MATCH
ROTARY FOUNDATION OF ROTARY INTERNATIONAL - 1560 SHERMAN AVE - EVANSTON, IL 60201	36-3245072	501(C)(3)	26,000.	0.		HUMAN SERVICES	FOR UKRAINE DISASTER RESPONSE FUND, SUPPORT FOR ANNUAL SHARE FUND
SAINT SIMON PARISH SCHOOL DEVELOPMENT OFFICE, 1840 GRANT ROAD LOS ALTOS, CA 94024	94-2734503	501(C)(3)	50,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT THE STEM
SALUD PARA LA GENTE 195 AVIATION WAY, STE 200 WATSONVILLE, CA 95076	94-2705747	501(C)(3)	30,000.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, SUNDAY HEALTH CLINIC HOURS & THE STEM BUILDING
SALUD Y CARIO 1723 GREY SEAL RD SANTA CRUZ, CA 95062	46-1924115	501(C)(3)	53,500.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
SALVATION ARMY SANTA CRUZ CORPS 721 LAUREL STREET SANTA CRUZ, CA 95060	94-1156347	501(C)(3)	6,553.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND PROGRAMS
SALVATION ARMY WATSONVILLE 214 UNION STREET WATSONVILLE, CA 95076	95-3082788	501(C)(3)	29,123.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
SAN JUAN HOME & SCHOOL CLUB ATTN: COMMUNITY TRACK, 100 NYLAND DRIVE - SAN JUAN BAUTISTA, CA 95045	20-4143944	501 (C) (3)	10,000.	0.		EDUCATION/YOUTH	FOR RUNNING TRACK
SAN LORENZO VALLEY WATER DISTRICT 13060 HIGHWAY 9			,				TO SUPPORT ANNUAL HABITAT MANAGEMENT AND MONITORING WITHIN THE OLYMPIA
BOULDER CREEK, CA 95006	20-4143944	501(C)(3)	9,428.	0.		ENVIRONMENT	WATERSHED HABITAT

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
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SANTA BARBARA EDUCATION FOUNDATION 1528 CHAPALA STREET, SUITE 308 SANTA BARBARA, CA 93101	77-0071544	501(C)(3)	35,000.	0.		EDUCATION/YOUTH DEVELOPMENT	TO SUPPORT SBUSD MUSIC EDUCATION WITH THE BRAVO PROGRAM
SANTA CLARA UNIVERSITY 500 EL CAMINO REAL SANTA CLARA, CA 95053	94-1156617	501(C)(3)	10,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR SANTA CLARA FUND
SANTA CRUZ ART LEAGUE 526 BROADWAY SANTA CRUZ, CA 95060	94-1561380	501(C)(3)	30,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ BARRIOS UNIDOS 1817 SOQUEL AVENUE SANTA CRUZ, CA 95060	77-0333450	501(C)(3)	10,250.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ CHORALE PO BOX 272 SANTA CRUZ, CA 95061-0272	77-0131960	501(C)(3)	11,250.	0.		ARTS, HISTORY, AND CULTURE	FOR OPERATING SUPPORT, TO SUPPORT INDEPENDENT CHORAL GROUP
SANTA CRUZ COMMUNITY HEALTH CENTERS - 125 WATER STREET A2 - SANTA CRUZ, CA 95060-2786	23-7428303	501(C)(3)	1,920,645.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT, VACCINE POP UP CLINICS AND OUTREACH WITH CRADLE 2 CAREER
SANTA CRUZ COUNTY ANIMAL SHELTER 2200 7TH AVENUE SANTA CRUZ, CA 95062	90-0039494	501(C)(3)	16,848.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, PROGRAMS, EDUCATION
SANTA CRUZ COUNTY ANIMAL SHELTER FOUNDATION - 2200 7TH AVENUE - SANTA CRUZ, CA 95060	51-0439604	501(C)(3)	6,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ COUNTY BLACK HEALTH MATTERS INITIATIVE - 612 OCEAN ST - SANTA CRUZ, CA 95060	90-0826298	501(C)(3)	33,500.	0.		HEALTH	FOR GENERAL OPERATING SUPPORT

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Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
20-0385058	501(C)(3)	115,233.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT
77-0385016	501(C)(3)	312,248.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, ACQUISITION AND OPERATIONS
77-0427628	501(C)(3)	6,500.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT AND DARA HORN FUNDRAISER
37-2064285	501(C)(3)	98,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
94-1573507	501(C)(3)	6,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR FINANCIAL AID AND SCHOLARSHIPS
77-0457425	501(C)(3)	12,362.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
94-2427733	501(C)(3)	53,000.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT, WATSONVILLE FACILITY PLANS
46-4635444	501(C)(3)	23,289.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT, DONATION MATCH
						TO HELP SENIOR CITIZENS CARE FOR THEIR PETS AND FOR GENERAL OPERATING
	(b) EIN 20-0385058 77-0385016 77-0427628 37-2064285 94-1573507 77-0457425	(b) EIN (c) IRC section	(b) EIN (c) IRC section if applicable (d) Amount of cash grant 20-0385058 501(C)(3) 115,233. 77-0385016 501(C)(3) 312,248. 77-0427628 501(C)(3) 6,500. 37-2064285 501(C)(3) 98,000. 94-1573507 501(C)(3) 6,000. 77-0457425 501(C)(3) 12,362.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (e) Concash assist	(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) 20-0385058 501(C)(3) 115,233. 0. 77-0385016 501(C)(3) 312,248. 0. 37-20427628 501(C)(3) 6,500. 0. 37-2064285 501(C)(3) 98,000. 0. 94-1573507 501(C)(3) 12,362. 0. 94-2427733 501(C)(3) 53,000. 0.	If applicable Cash grant Cash grant

(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 TODDLER CARE CENTER 1738 16TH AVENUE SANTA CRUZ, CA 95062	94-2457539	501(C)(3)	11,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT
SANTA CRUZ WALDORF SCHOOL 2190 EMPIRE GRADE SANTA CRUZ, CA 95060-9702	94-2365874	501(C)(3)	35,000.	0.		EDUCATION/YOUTH	FOR SPRING FORWARD CAMPAIGN 2022, CAPITAL CAMPAIGN
SANTA CRUZ WELCOMING NETWORK 311 DARWIN STREET SANTA CRUZ, CA 95060	31-1748056	501(C)(3)	12,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
SAVE OUR SHORES 345 LAKE AVENUE, SUITE A SANTA CRUZ, CA 95062-4600	94-2745941	501(C)(3)	28,452.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
SAVE THE CHILDREN FEDERATION INC 501 KINGS HIGHWAY EAST, STE 400 FAIRFIELD, CT 06825	06-0726487	501(C)(3)	161,761.	0.		HUMAN SERVICES	TO SUPPORT SUMMERBOOST KIM SON SCHOOL, IT LEARNING ROOM, & MORE
SAVE THE MUSIC FOUNDATION P.O. BOX 2096 NEW YORK, NY 10108	13-6089816	501(C)(3)	25,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
SAVE THE REDWOODS LEAGUE 111 SUTTER STREET, 11TH FLOOR SAN FRANCISCO, CA 94104-3814	94-0843915	501(C)(3)	13,500.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, TO SAVE REDWOO LAND
SC EQUITY COLLAB 111 SUTTER STREET, 11TH FLOOR SAN FRANCISCO, CA 94104-3814	38-4029749	501(C)(3)	13,500.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY - 800 OHLONE PARKWAY - WATSONVILLE, CA 95076-7005	77-0326685	501(C)(3)	319,557.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT, THE COMMUNITY KITCHEN PROGRAM, HOLID. FOOD AND FUND DRIVE

Schedule I (Form 990) COUNTY				- 10 :	111/5 222\ =		74-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	urt II.) T	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
SEMPERVIRENS FUND							FOR GENERAL OPERATING
951 MARINERS ISLAND BLVD SUITE 300						COMMUNITY	SUPPORT, THE JONES GULCH
SAN MATEO, CA 94404-1560	94-2155097	501(C)(3)	9,000.	0.		DEVELOPMENT	CAMPAIGN
SENDEROS							
840 NORTH BRANCIFORTE AVE						ARTS, HISTORY,	FOR GENERAL OPERATING
SANTA CRUZ, CA 95062	80-0893412	501(C)(3)	97,500.	0.		AND CULTURE	SUPPORT
SENECA FAMILY OF AGENCIES						a 0.10 a 0.11 a 0.11	
SENECA CENTRAL COAST HEADQUARTERS,	04 2071761	E01/G \/2\	10.000			COMMUNITY	FOR GABILAN CHAPTER
SALINAS, CA 93908 SENIOR LEGAL SERVICES OF SANTA	94-2971761	DUI(C)(3)	10,000.	0.		DEVELOPMENT	KINSHIP CENTER FOR GENERAL OPERATING
CRUZ AND SAN BENITO COUNTIES - 317							SUPPORT, THE 50TH
SOQUEL AVENUE - SANTA CRUZ, CA							ANNIVERSARY GALA PROGRAM
95062	94-2280258	501(C)(3)	30,300.	0.		HUMAN SERVICES	FUNDRAISER.
33002	34 2200230	501(6 /(5/	30,300.	· ·		HOMAN SERVICES	FUNDRAISER.
SENIOR NETWORK SERVICES							
1777-A CAPITOLA ROAD							FOR GENERAL OPERATING
SANTA CRUZ, CA 95062	94-2259716	501(C)(3)	30,500.	0.		HUMAN SERVICES	SUPPORT
SEVEN FIFTY NINE CLUB INC							L
PO BOX 264				_			FOR CENTAURUS HIGH SCHOOL
LAFAYETTE, CO 80026-0264	84-0967054	501(C)(3)	10,000.	0.		DEVELOPMENT	BAND PROGRAMS
SHERMAN AND BOONE							
1260 41ST AVENUE, SUITE O							FOR EIGHT MONTHS OF
CAPITOLA, CA 95010	94-2325912	501(C)(3)	7,345.	0.		HUMAN SERVICES	RENTAL SUPPORT
·			,				FOR SHORELINE MIDDLE
SHORELINE MIDDLE SCHOOL							SCHOOL'S GSA CLUB
855 17TH AVENUE						EDUCATION/YOUTH	ACTIVITIES, DC/NY SPRING
SANTA CRUZ, CA 95062	91-1556631	501(C)(3)	8,900.	0.		DEVELOPMENT	BREAK TRIP SCHOLARSHIP
SIENA HOUSE							FOR GENERAL OPERATING
108 HIGH STREET		501/6 \/33		_			SUPPORT, FUNDRAISER,
SANTA CRUZ, CA 95060-3711	77-0518866	pnT(G)(3)	26,880.	0.		HEALTH	YOUTH SERVICES

Schedule I (Form 990) COUNTY				. (2.1			74-2808039 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	art II.)	Ī
(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
SOCIETY OF ST. VINCENT DE PAUL-							
COUNCIL OF SANTA CRUZ COUNTY -							
1146 SOQUEL AVE, #4103 - SANTA							FOR GENERAL OPERATING
CRUZ, CA 95062	94-2500194	501(C)(3)	20,000.	0.		HUMAN SERVICES	SUPPORT
ST. ANTHONY FOUNDATION 150 GOLDEN GATE AVENUE	04 1512140	E04 (G.) (2)	05.050				FOR GENERAL OPERATING
SAN FRANCISCO, CA 94102-3899	94-1513140	501(C)(3)	25,079.	0.		HUMAN SERVICES	SUPPORT
ST. FRANCIS SOUP KITCHEN 205 MORA STREET SANTA CRUZ, CA 95060	94-2880883	501(C)(3)	30,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING
,							
ST. JUDE CHILDREN'S RESEARCH							
HOSPITAL - 501 ST JUDE PLACE -							FOR GENERAL OPERATING
MEMPHIS, TN 38105	62-0646012	501(C)(3)	10,500.	0.		HEALTH	SUPPORT
STANFORD UNIVERSITY							SUPPORT THE CANCER DISCOVERY FUND, FUND FOR
PO BOX 20466							UNDERGRADUATE EDUCATION,
STANFORD, CA 94309	94-1156365	501(C)(3)	10,300.	0.		ENVIRONMENT	& MORE
STANFORD UNIVERSITY-SCHOOL OF							
ENGINEERING - DEVELOPMENT							
SERVICES, PO BOX 20466 - STANFORD,						EDUCATION/YOUTH	FOR GENERAL OPERATING
CA 94309-0466	94-1156365	501(C)(3)	15,000.	0.		DEVELOPMENT	SUPPORT
STANFORD UNIVERSITY-SCHOOL OF							SUPPORT RESEARCH OF
MEDICINE - DEVELOPMENT SERVICES,							DEPARTMENT OF ORTHOPAEDIC
PO BOX 20466 - STANFORD, CA 94309	94-1156365	501(C)(3)	300,000.	0.		HEALTH	SURGERY
,			1				TO SUPPORT THE SOIL
SUSTAINABLE CONSERVATION							HEALTH AND GROUNDWATER
98 BATTERY ST, STE 302							QUALITY COLLABORATIVE
SAN FRANCISCO, CA 94111	94-3232437	501(C)(3)	62,500.	0.		ENVIRONMENT	PROJECT
SUTTER CARE AT HOME - SANTA CRUZ			1				TO SUPPORT THE MISSION
(HOME HEALTH)/VISITING NURSE							AND ACTIVITIES OF
ASSOCIATION OF SAN - SUTTER							VISITING NURSE
VISITING NURSE ASSOC. & HOSPICE	94-1622036	501(C)(3)	12,920.	0.		HEALTH	ASSOCIATION OF SANTA CRUZ

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		74-2808039 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOE TRUCKEE COMMUNITY FOUNDATION PO BOX 366 TRUCKEE, CA 96160	68-0416404	501(C)(3)	1,100,000.	0.		EDUCATION/YOUTH	FOR GIVE BACK TAHOE WITH THE FUNDS DIRECTED TO TH SIERRA COMMUNITY HOUSE
TANNERY WORLD DANCE & CULTURAL CENTER - , #111 - SANTA CRUZ, CA 95060	90-0826298	501(C)(3)	48,500.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
TEACH 4 ALL MXICO, A.C. HAMBURGO 14 PB, COLONIA JUAREZ MEXICO		501(C)(3)	55,616.	0.		COMMUNITY DEVELOPMENT	TO SUPPORT TRAINING OF TEACHERS AT 11 PUBLIC SCHOOLS IN MICHOACN, TLAXCALA AND VERACRUZ
TEEN KITCHEN PROJECT PO BOX 1853 SOQUEL, CA 95073-1853	27-0524692	501(C)(3)	32,000.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
TEMPLE BETH EL JEWISH COMMUNITY CENTER - 3055 PORTER GULCH ROAD - APTOS, CA 95003-2703	94-6139655	501(C)(3)	50,552.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT
TERRA PENINSULAR, A.C C TERCERA 1282, ZONA CENTRO, 22800 MEXICO		501(C)(3)	9,290.	0.		ENVIRONMENT	TO SPONSOR COMMUNITY REFORESTATION END EDUCATION EVENTS SAN QUINTIN COMMUNITY MEMBER
THE 418 PROJECT 155 SOUTH RIVER STREET SANTA CRUZ, CA 95060-4504	77-0335796	501(C)(3)	28,000.	0.		ARTS, HISTORY, AND CULTURE	FOR GENERAL OPERATING SUPPORT
THE CALI PROJECT (COMMUNITY ALLIANCE FOR LIFELONG INDEPENDENCE) - 505 CORCORAN AVENUE - SANTA CRUZ, CA 95062	81-2182122	501(C)(3)	95,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
THE CLIMATE CENTER 1275 - 4TH STREET, #191 SANTA ROSA, CA 95404	45-0485495	501(C)(3)	6,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa		74-2000039 Page
(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
THE FBRICA 703 PACIFIC AVENUE SANTA CRUZ, CA 95060	31-1748056	501(C)(3)	20,000.	0.		ARTS, HISTORY,	FOR THE FBRICA'S COMMUNITY ENGAGED ART SERIES
THE SAFINA CENTER AT STONY BROOK UNIVERSITY - 80 NORTH COUNTRY RD - SETAUKET, NY 11733	61-1406022	501(C)(3)	10,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING
THE TECH MUSEUM OF INNOVATION 201 SOUTH MARKET STREET SAN JOSE, CA 95113-2008	94-2864660	501(C)(3)	12,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT
THE UC HASTINGS FOUNDATION UC HASTINGS FOUNDATION, 200 MCALLISTER STREET - SAN FRANCISCO, CA 94102	23-7135898	501(C)(3)	30,055.	0.		EDUCATION/YOUTH	TO SUPPORT THE JUDGE ROBERT H. SCHNACKE AWARD PROGRAM
TIDES CENTER P.O. BOX 889389 LOS ANGELES, CA 90088-9389	94-3213100	501(C)(3)	15,000.	0.		ENVIRONMENT	FOR CENTER FOR GENETICS AND SOCIETY, HEALTHY DEMOCRACY FUND, JUDGE ROBERT H SCHNACKE AWARD
TRUCKEE DONNER LAND TRUST PO BOX 8816 TRUCKEE, CA 96162	68-0245327	501(C)(3)	11,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
TRUST FOR PUBLIC LAND 101 MONTGOMERY STREET, SUITE 900 SAN FRANCISCO, CA 94104	23-7222333	501(C)(3)	60,000.	0.		ENVIRONMENT	TO SUPPORT THE NORTHERN ROCKIES PROGRAM AND WADDLE RANCH TRAIL
TUOLUMNE RIVER TRUST PO BOX 3727 SONORA, CA 95370-3727	94-2834151	501(C)(3)	6,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
UC REGENTS-UCSC ARBORETUM 1156 HIGH STREET, MAIL STOP - ARBOR SANTA CRUZ, CA 95064	94-2834151	501(C)(3)	74,452.	0.		ENVIRONMENT	TO SUPPORT THE UCSC ARBORETUM

Schedule I (Form 990) COUNTY						9	04-2808039 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UC SANTA CRUZ FOUNDATION UC SANTA CRUZ OFFICE OF SPONSORED PROJECTS, 1156 HIGH STREET, MS:						EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, LONG MARINE LAB, HUMANITIES INSTITUTE,
OSP - SAN	23-7394590	501(C)(3)	1,285,121.	0.		DEVELOPMENT	LIBRARY, & MORE
UNCHAINED PO BOX 441 SOQUEL, CA 95073-0441	27-5502745	501(C)(3)	15,000.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, GRAHAM HILL JUVIE PROGRAM
			22,7320				
UNITED FOOD BANK OF PLANT CITY 702 E ALSOBROOK ST, STE H PLANT CITY, FL 33563	59-3069728	501(C)(3)	15,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT
UNITED POLICYHOLDERS 381 BUSH STREET, 8TH FLOOR							FOR ROADMAP TO RECOVERY, LONG-TERM RECOVERY GROUP HELP, WRAP RESOURCE
SAN FRANCISCO, CA 94104	94-3162024	501(C)(3)	67,514.	0.		HUMAN SERVICES	CENTER
UNIVERSITY OF TULSA OFFICE OF UNIVERSITY ADVANCEMENT AND ALUMNI ENGAGEMENT, 800 SOUTH TUCKER DRI	73-0579298	501(C)(3)	329,556.	0.		EDUCATION/YOUTH	FOR SCHOLARSHIP FUNDING
UPWELL TURTLES 99 PACIFIC STREET, SUITE 375-E MONTEREY, CA 93940	82-1309235	501(C)(3)	20,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT
VALLEY CHURCHES UNITED 9400 HIGHWAY 9, PO BOX 367 BEN LOMOND, CA 95005-0367	77-0163322	501(C)(3)	25,500.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT AND VALLEY CHRISTMAS PROJECT
VALLEY OF THE SUN JCC 12701 NORTH SCOTTSDALE ROAD SCOTTSDALE, AZ 85254	86-0622258	501(C)(3)	10,000.	0.		HEALTH	FOR GENERAL OPERATING
VANGUARD CHARITABLE ENDOWMENT PROGRAM - PO BOX 9509 - WARWICK, RI 02889-9509	23-2888152		98,049.	0.		COMMUNITY DEVELOPMENT	FOR THE BURKE BORINA VANGUARD CHARITABLE ACCOUNT

(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
VENTANA WILDLIFE SOCIETY							
9699 BLUE LARKSPUR LANE, STE 105							FOR GENERAL OPERATING
MONTEREY, CA 93940	94-2795935	501(C)(3)	26,000.	0.		ENVIRONMENT	SUPPORT
VENTURES							
PO BOX 2375							FOR GENERAL OPERATING
WATSONVILLE, CA 95077	77-0247648	501(C)(3)	34,000.	0.		HUMAN SERVICES	SUPPORT
VETS 4 VETS SANTA CRUZ							
842 FRONT STREET							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	45-3697584	501(C)(3)	20,000.	0.		HUMAN SERVICES	SUPPORT
							TO SUPPORT LIFE SKILLS
VISIN MUNDIAL DE MXICO, A.C.							PROGRAMS FOR ADOLESCENT
CUIDAD DE MEXICO 11300						EDUCATION/YOUTH	IN AGRICULTURAL AREA AN
MEXICO		501(C)(3)	62,000.	0.		DEVELOPMENT	TLAXCALA, MEXICO
VISTA CENTER FOR THE BLIND AND							
VISUALLY IMPAIRED - 3315 MISSION							
DRIVE, SUITE B - SANTA CRUZ, CA						COMMUNITY	FOR GENERAL OPERATING
95065	94-1196206	501(C)(3)	5,500.	0.		DEVELOPMENT	SUPPORT
							FOR GENERAL OPERATING
VOLUNTEER CENTER OF SANTA CRUZ							SUPPORT, FOR THE LITERA
COUNTY - 1740 17TH AVENUE, SUITE 2							PROGRAM, PEI, EMERGING
- SANTA CRUZ, CA 95062	94-1702678	501(C)(3)	219,877.	0.		HUMAN SERVICES	JEDI AWARDS
WALLIS ANNENBERG CENTER FOR THE							
PERFORMING ARTS - 9390 N SANTA							
MONICA BLVD - BEVERLY HILLS, CA						ARTS, HISTORY,	FOR GENERAL OPERATING
90210	95-4467830	501(C)(3)	7,000.	0.		AND CULTURE	SUPPORT
WALNUT AVENUE FAMILY & WOMEN'S							
CENTER - 303 WALNUT AVENUE - SANTA							FOR GENERAL OPERATING
CRUZ, CA 95060	94-1186197	501(C)(3)	31,750.	0.		HUMAN SERVICES	SUPPORT
WATSONVILLE CAMPESINO APPRECIATION							
CARAVAN - 303 WALNUT AVENUE -							FOR GENERAL OPERATING
SANTA CRUZ, CA 95060	77-0357101	501(C)(3)	13,500.	0.		HUMAN SERVICES	SUPPORT

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	art II.)	T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
WATSONVILLE FILM FESTIVAL PO BOX 172 WATSONVILLE, CA 95077-0172	81-3138376	501(C)(3)	61,000.	0.		ARTS, HISTORY,	FOR GENERAL OPERATING SUPPORT	
WATSONVILLE HIGH SCHOOL 250 E BEACH ST WATSONVILLE, CA 95076	77-0008389	501(C)(3)	15,400.	0.		EDUCATION/YOUTH DEVELOPMENT	FOR SCHOLARSHIPS, 2022 SAGA CLUB ACTIVITIES	
WATSONVILLE HIGH SCHOOL FOUNDATION 17 HAWTHORNE AVENUE WATSONVILLE, CA 95076	77-0008389	501(C)(3)	10,632.	0.		EDUCATION/YOUTH	FOR GENERAL OPERATING SUPPORT, MISSION AND ACTIVITIES	
WATSONVILLE LAW CENTER 315 MAIN STREET, SUITE 207 WATSONVILLE, CA 95076	20-8157214	501(C)(3)	60,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT	
WATSONVILLE ROTARY FOUNDATION PO BOX 282 WATSONVILLE, CA 95077-0282	94-2577900	501(C)(3)	6,000.	0.		COMMUNITY DEVELOPMENT	FOR GENERAL OPERATING SUPPORT, CLAWS FOR A CAUSE FUNDRAISER	
WATSONVILLE WETLANDS WATCH 500 HARKINS SLOUGH ROAD WATSONVILLE, CA 95019-9453	77-0519882	501(C)(3)	64,155.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT, SUPPORT PROGRAMS, SERVICES, SCHOLARSHIPS AND STIPEND	
WEST VALLEY COMMUNITY SERVICES 10104 VISTA DRIVE CUPERTINO, CA 95014	94-2211685	501(C)(3)	10,000.	0.		HUMAN SERVICES	FOR GENERAL OPERATING SUPPORT	
WILDAID, INC 333 PINE STREET, STE 300 SAN FRANCISCO, CA 94104	20-3644441	501(C)(3)	50,000.	0.		ENVIRONMENT	FOR GENERAL OPERATING SUPPORT	
WORLD CENTRAL KITCHEN ATTN: DONOR SERVICES, 200 MASSACHUSETTS AVE 7TH FLOOR - WASHINGTON, DC 20001	27-3521132	501(C)(3)	31,100.	0.		HUMAN SERVICES	TO SUPPORT UKRAINE RELIE	

(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
WORLD UNION FOR PROGRESSIVE							
JUDAISM (WUPJ) - ONE WEST FOURTH							
STREET, SUITE 517A - NEW YORK, NY							TO HELP THE JEWISH PEOPLE
10012	13-1663143	501(C)(3)	8,000.	0.		HUMAN SERVICES	IN UKRAINE
WORLD WILDLIFE FUND							
1250 24TH ST NW, STE 1105							FOR GENERAL OPERATING
WASHINGTON, DC 20090-7180	52-1693387	501(C)(3)	50,000.	0.		ENVIRONMENT	SUPPORT
							TO SUPPORT THE MINISTRY
7 360							OF ENOC PUEYES, TO
PO BOX 26479							SUPPORT THE MINISTRY OF
COLORADO SPRINGS, CO 80936	84-1300954	501(C)(3)	12,000.	0.		HUMAN SERVICES	PATTI & MARCOS PUEYES
YOUNG LADIES GRAND INSTITUTE -							
SANTA CRUZ #95 - 222 HIGHLAND AVE						COMMUNITY	FOR GENERAL OPERATING
- SANTA CRUZ, CA 95060	23-7514541	501/C \/3\	10,000.	0.		DEVELOPMENT	SUPPORT
SANTA CROZ, CA 93000	23-7314341	301(0 /(3)	10,000.	0.		DEVELOPMENT	SUFFURI
YOUR FUTURE IS OUR BUSINESS							
399 ENCINAL STREET						EDUCATION/YOUTH	TO SUPPORT STUDENT
SANTA CRUZ, CA 95060-2132	77-0563559	501(C)(3)	10,000.	0.		DEVELOPMENT	INTERNSHIPS
YWCA OF WATSONVILLE							
340 EAST BEACH STREET						EDUCATION/YOUTH	FOR GENERAL OPERATING
WATSONVILLE, CA 95076	94-1212142	501(C)(3)	57,825.	0.		DEVELOPMENT	SUPPORT
TRUCKEE TRAILS FOUNDATION							
PO BOX 1751							
FRUCKEE, CA 96106	01-0601303	501(C)(3)	21,700.	0.		ENVIRONMENT	FOR WADDLE RANCH TRAIL
	01 0001000	7(0)	12,,,,,,				

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	Complete ii tile	organization answe	sied res offromis	90, Part IV, IIIIe 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
THE FOUNDATION CONDUCTS A THOROUGH	DUE DILI	GENCE PROC	ESS IN REV	IEWING AND	
MONITORING ALL GRANTS APPROVED AND	AWARDED	BY THE FOU	UNDATION'S	BOARD OF	
DIRECTORS. STAFF REVIEWS ALL REQUES	STS TO FI	RST ENSURE	THE APPLI	CANT	
ORGANIZATION IS ELIGIBLE TO RECEIVE	E A GRANT	FROM THE	FOUNDATION	UNDER THE	
IRS GUIDELINES FOR CHARITIES AND NO	NPROFITS	. DURING T	HIS INITIA	L SCREENING,	
THE APPLICANT'S FINANCIAL INFORMATI	ON, GOVE	RNANCE AND	PROGRAMS .	ARE	
REVIEWED, AND A DETERMINATION IS MA	ADE IF TH	E PROPOSAL	IS CONSIS	TENT WITH	
THE FOUNDATION'S INTEREST AREAS AND	STRATEG	IC PRIORIT	TIES. A BOA	RD-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 RECOMMENDED BY DONOR-ADVISORS FROM THEIR FUNDS HELD AT THE FOUNDATION SIMILARLY RECEIVE THE SAME DUE DILIGENCE IN THE INITIAL SCREENING, BUT DO NOT GO TO THE PROGRAM COMMITTEE FOR REVIEW. THEY ARE, HOWEVER, REVIEWED AND APPROVED BY THE BOARD. IN MONITORING THE USE OF GRANT FUNDS, THE FOUNDATION REQUIRES PERIODIC WRITTEN OR ORAL REPORTS AND/OR A FINAL REPORT (INCLUDING A FINANCIAL ACCOUNTING OF HOW THE GRANT WAS SPENT) FROM ALL GRANTEES, WITH THE EXCEPTION OF DONOR ADVISED GRANTS UNLESS SPECIFICALLY REQUESTED BY THE DONOR. FOUNDATION STAFF ALSO MAINTAINS REGULAR COMMUNICATION WITH GRANT RECIPIENTS, WHO ARE ENCOURAGED TO ALERT THE FOUNDATION ABOUT ANY SIGNIFICANT CHANGES OR ISSUES DURING THE GRANT PERIOD.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ESCUELAS SUSTENTABLES A.C

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT CREATION AND RENOVATION
OF SCHOOLS/PARKS IN MICHOACN, PUEBLA, JALISCO, MXICO

NAME OF ORGANIZATION OR GOVERNMENT:

FRIENDS OF THE WATSONVILLE PUBLIC LIBRARIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION AND PROGRAMS

OF THE FRIENDS OF THE WATSONVILLE PUBLIC LIBRARIES

NAME OF ORGANIZATION OR GOVERNMENT: HAPPY VALLEY ELEMENTARY SCHOOL

Part IV Supplemental Information
(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT, TO
SUPPORT CULTURAL AND ARTS PROGRAMS AND ACADEMIC PROGRAMS
NAME OF ORGANIZATION OR GOVERNMENT: PAJARO VALLEY HISTORICAL ASSOCIATION
(H) PURPOSE OF GRANT OR ASSISTANCE: FOR GENERAL OPERATING SUPPORT,
SUPPORT MAINTENANCE OF THE HISTORIC BOCKIUS-ORR HOUSE
NAME OF ORGANIZATION OR GOVERNMENT:
SUTTER CARE AT HOME - SANTA CRUZ (HOME HEALTH)/VISITING NURSE ASSOCIATION O
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION AND
ACTIVITIES OF VISITING NURSE ASSOCIATION OF SANTA CRUZ COUNTY

SCHEDULE J (Form 990)

Department of the Treasury

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.

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ

Inspection
Employer identification number 94-2808039

OMB No. 1545-0047

Open to Public

COUNTY

Questions Regarding Compensation

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a X Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? 6a X 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SUSAN TRUE	(i)	254,176.	0.	0.	15,251.	9,349.	278,776.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TIM CARSON	(i)	154,988.	0.	0.	9,299.	13,130.	177,417.	0.
PROGRAM DIRECTOR - RWMF	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SAM LEASK	(i)	146,500.	0.	0.	8,790.	21,534.	176,824.	0.
PHILANTHROPIC SERVICES DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SUSAN FARRAR	(i)	133,847.	0.	0.	8,031.	11,037.		0.
CHIEF OPERATING & FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						<u> </u>	

COMMUNITY FOUNDATION SANTA CRUZ

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

Pai	t I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	_
		applicable		Form 990, Part VIII, line 1g	noncash contribu	ition an	nounts	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	6	6,296,987.	FM7/			
	Securities - Closely held stock	21	,	0,250,501.	111			
10								
11	Securities - Partnership, LLC, or	Х	1	2,500,000.	EM7			
40	trust interests			2,300,000.	FMV			
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 organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of t	the initial co	ntribution, and whi	ich isn't required to be used	for			
	exempt purposes for the entire holding period?)				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties of							
	contributions?			•		32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	a type of property	for which column (a) is chec	cked,			
	describe in Part II.	(-))	()	,			
LHA		the Instruct	tions for Form 990).	Schedule N	1 (Forn	n 990)	2022

COMMUNITY FOUNDATION SANTA CRUZ

Schedule M (Form 990) 2022 COUNTY	94-2808039	Page 2
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3 is reporting in Part I, column (b), the number of contributions, the number of items received, or a conthis part for any additional information.	3, and whether the organizath nbination of both. Also comp	tion olete
SCHEDULE M, PART I, COLUMN (B):		
THE FOUNDATION IS REPORTING THE NUMBER OF ITEMS CONTRIBUT	ED (DEFINED AS	
EACH SEPARATE GIFT) IN SCHEDULE M, PART I, COLUMN (B).		
	_	

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

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

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

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

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

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

Schedule O (Form 990) 2022 Page **2**

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ
COUNTY

Employer identification number 94-2808039

REQUIRED TO PROVIDE A LIST OF NONPROFIT AND PROFESSIONAL PHILANTHROPIC

ORGANIZATIONS WITH WHICH THEY HAVE RELATIONSHIPS, AS WELL AS ANY

RELATIONSHIPS OF IMMEDIATE FAMILY MEMBERS. THEY MUST DISCLOSE ANY MATERIAL

OWNERSHIP OR INVESTMENT INTEREST WITH ANY ENTITY THAT HAS NEGOTIATED A

TRANSACTION WITH THE FOUNDATION WITHIN THE PAST YEAR OR OF ANY TRANSACTIONS

KNOWN TO BE CURRENTLY PENDING OR PROPOSED. THIS INFORMATION IS COLLECTED BY

THE CEO AND REPORTED BACK TO THE BOARD.

IN ALL SITUATIONS IN WHICH THERE IS A REAL OR PERCEIVED CONFLICT OF

INTEREST, THOSE INDIVIDUALS MUST RECUSE THEMSELVES FROM DISCUSSION AND

DECISION MAKING THAT INVOLVES THE PARTIES IN QUESTION. THIS INCLUDES THE

REVIEW, DISCUSSION OR DECISION OF ANY AND ALL GRANT PROPOSALS AS WELL AS

THE SELECTION OR CONTRACTING OF VENDORS OR SERVICE PROVIDERS. TO MONITOR

THE NEED TO DO SO, A SCHEDULE OF BOARD MEMBER CONFLICTS IS INCLUDED IN

EVERY BOARD PACKET FOR REFERENCE.

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

FOR ALL MATTERS BEFORE THE BOAD WHERE A REAL OR PERCEIVED CONFLICT OF

INTEREST EXISTS, THE STEPS TAKEN UNDER THE FOUNDATION'S CONFLICT OF

INTEREST POLICY SHALL BE NOTED AND RECORDED IN THE MEETING MINUTES.

THE FOUNDATION IS COMMITTED TO ATTRACTING AND RETAINING A QUALIFIED,

DIVERSE WORKFORCE THROUGH A COMPETITIVE COMPENSATION PROGRAM WITHIN THE

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

Employer identification number 94-2808039

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.

Schedule O (Form 990) 2022 Page 2

Name of the organization COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

BOARD IN THE CASE OF THE CEO) AS PART OF THE PERFORMANCE RECOGNITION PLAN

ANNUAL ASSESSMENT. THESE REVIEWS MAY OR MAY NOT RESULT IN A SALARY

INCREASE. SALARY INCREASES ARE PROVIDED ON THE BASIS OF MERIT, SUBJECT TO

BUDGETARY RESTRICTIONS AND AT THE SOLE DISCRETION OF THE FOUNDATION. ALSO,

AT THE FOUNDATION'S SOLE DISCRETION, A LUMP-SUM MERIT AWARD MAY BE GRANTED

TO AN EMPLOYEE WHO HAS REMAINED IN THEIR POSITION FOR MANY YEARS, IN LIEU

OF AN INCREASE IN SALARY.

FOR THE CEO, AN ANNUAL PERFORMANCE EVALUATION IS ONE OF THE MAJOR

RESPONSIBILITIES OF THE BOARD OF DIRECTORS. THE BOARD HAS ADOPTED

EVALUATION PROCEDURES ESTABLISHED BY THE COUNCIL ON FOUNDATIONS AS PART OF

ITS COMMUNITY FOUNDATIONS NATIONAL STANDARDS THAT PROVIDES FOR A

CONSISTENT, FAIR, SUPPORTIVE AND WELL-DOCUMENTED PROCESS.

SPECIFIC STEPS IN THE CEO EVALUATION PROCESS INCLUDE A REVIEW AND

DISCUSSION OF A SELF-PERFORMANCE EVALUATION AND DEVELOPMENT PLAN WITH PRIOR

YEAR'S GOALS AND OBJECTIVES; AN EXECUTIVE SESSION OF THE BOARD TO DISCUSS

ANY ISSUES OR CONCERNS AND TO SET NEW GOALS AND OBJECTIVES FOR THE

FOLLOWING YEAR; A BOARD SESSION WITH THE CEO PRESENT FOR AN OVERALL

ASSESSMENT AND GOAL SETTING, AS WELL AS DISCUSSION OF SALARY COMPENSATION

BASED ON A REVIEW OF COMPARABLE SALARIES FOR OTHER COMMUNITY FOUNDATIONS OF

OUR SIZE; AND, FINALLY, A SUMMARY OF THE ASSESSMENT, PLAN AND ANY SALARY

INCREASE TO BE SIGNED BY BOTH THE CEO AND BOARD PRESIDENT.

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

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

OBJECTIVES, GAUGE JOB PERFORMANCE AND LEADERSHIP AND SERVES AS A BASIS FOR SALARY COMPENSATION.

Schedule O (Form 990) 2022 Page 2 COMMUNITY FOUNDATION SANTA CRUZ Name of the organization **Employer identification number** 94-2808039 COUNTY FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION AT ITS OFFICE. FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE FOUNDATION'S WEBSITE (WWW.CFSCC.ORG) IN ADDITIONAL TO BEING PUBLISHED WITHIN ITS ANNUAL REPORT. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: -19,527,138. ADJUSTMENTS TO AGENCY FUNDS FORM 990, PART XII, LINE 2C: THE FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT AND THIS PROCESS HAS REMAINED CONSISTENT WITH PRIOR YEAR.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

COMMUNITY FOUNDATION SANTA CRUZ COUNTY

Employer identification number 94-2808039

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
ILMJ BORINA LAND LLC - 46-3734949	HOLDING TITLE TO				
807 SOQUEL DRIVE	AGRICULTURAL LAND; LEASING				COMMUNITY FOUNDATION
APTOS, CA 95003	AGRICULTURAL LAND	CALIFORNIA	163,150.	2,944,654.	SANTA CRUZ COUNTY

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

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

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

Page 2

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

organization abanda do dipartitioning and tack your.											
(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	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year	1	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managir	Percentage ownership
3		foreign	reign	excluded from tax under		assets	allocations?		20 of Schedule	partner	<u>'</u>
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	
							ļ				
										\vdash	<u> </u>

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
		country)		-				Yes	No
CHARITABLE REMAINDER TRUST (4)	CHARITABLE GIVING	CA	CFSCC					x	
	-								
									<u> </u>
	_								
	-								
	-								

1a

Yes No

COUNTY

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

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

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)					1b	Х	Λ_			
c Gift, grant, or capital contribution from related organization(s)										
d Loans or loan guarantees to or for related organization(s)										
e Loans or loan guarantees by related organization(s)										
f Dividends from related organization(s)					1f		X			
g Sale of assets to related organization(s)										
h Purchase of assets from related organization(s)										
i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)										
k Lease of facilities, equipment, or other assets from related organization(s)					1k		X			
I Performance of services or membership or fundraising solicitations for related orga	nization(s)				11		Х			
m Performance of services or membership or fundraising solicitations by related organ					1m		X			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization					1n	X				
Sharing of paid employees with related organization(s)					10	Х				
p Reimbursement paid to related organization(s) for expenses					1p		X			
q Reimbursement paid by related organization(s) for expenses					1q	X				
r Other transfer of cash or property to related organization(s)					1r		X			
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 w	ho must complete th	is line, including covered r	elationships and transaction	thresholds.						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	Method of det	(d) ermining amount inv	olved					
1) REGIONAL WATER MANAGEMENT FOUNDATION	С	0.	BOOK VALUE							
2) REGIONAL WATER MANAGEMENT FOUNDATION	D	0.	BOOK VALUE							
3)										
4)										
-1										
5)										
6)										
0)	<u> </u>		l	Schedule F) (Earr	n 000	2022			
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COUNTY

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)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
								000) 0000

COMMUNITY FOUNDATION SANTA CRUZ

Schedule R	(Form 990) 2022 COUNTY	94-2808039	Page 5
Part VII	Supplemental Information		
	Provide additional information for responses to questions on Schedule R. See instructions.		