

EXTENDED TO MAY 15, 2023

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2021**Open to Public  
Inspection

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**A** For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</b>		<b>D</b> Employer identification number <b>59-1956886</b>
	Doing business as		<b>E</b> Telephone number <b>941-955-3000</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>2635 FRUITVILLE ROAD</b>		
	City or town, state or province, country, and ZIP or foreign postal code <b>SARASOTA, FL 34237</b>		<b>G</b> Gross receipts \$ <b>125,372,524.</b>
<b>F</b> Name and address of principal officer: <b>ROXANNE G. JERDE</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ <b>WWW.CFSARASOTA.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1979</b>	<b>M</b> State of legal domicile: <b>FL</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>COMMUNITY IMPACT POWERED BY PHILANTHROPY.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>18</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>18</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>36</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>50</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>52,160.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>9,432.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>22,566,087.</b>	<b>45,645,781.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>3,650,096.</b>	<b>4,287,979.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>33,545,033.</b>	<b>21,097,794.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>10.</b>	<b>0.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>59,761,226.</b>	<b>71,031,554.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>23,415,869.</b>	<b>41,450,229.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>3,132,298.</b>	<b>3,536,856.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>2,951,177.</b>	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>5,760,806.</b>	<b>6,758,952.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>32,308,973.</b>	<b>51,746,037.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>27,452,253.</b>	<b>19,285,517.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>436,461,198.</b>	<b>386,793,850.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>45,965,340.</b>	<b>39,915,005.</b>
		<b>390,495,858.</b>	<b>346,878,845.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer		Date
	<b>ERIN JONES, CFO</b> Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	<b>REBECCA U. STONER</b>		
	Firm's name ▶ <b>KERKERING, BARBERIO &amp; CO.</b>	Firm's EIN ▶ <b>59-1753337</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P00585910</b>
	Firm's address ▶ <b>P.O. BOX 49348</b> <b>SARASOTA, FL 34230-6348</b>	Phone no. <b>941-365-4617</b>	

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

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INC.

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**Part III** Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

COMMUNITY IMPACT POWERED BY PHILANTHROPY.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 45,146,911. including grants of \$ 41,450,229. ) (Revenue \$ 4,287,979. )

I) IN PARTNERSHIP WITH DONORS WHO BELIEVE THEY CAN BE THE ONE TO MAKE A DIFFERENCE, GRANTS WERE MADE TO ORGANIZATIONS SUPPORTING THE FULL SPECTRUM OF CHARITABLE MISSIONS TO IMPROVE OUR COMMUNITY BY MEETING BASIC NEEDS, EXPANDING OPPORTUNITIES AND CULTURAL ENRICHMENT. SPECIFIC CAUSES FUNDED INCLUDE ANIMAL WELFARE, THE ARTS, HEALTH, HUMAN SERVICES, EDUCATION, ENVIRONMENTAL PROTECTION, CIVIC ENGAGEMENT, YOUTH DEVELOPMENT, AND OTHER AREAS. OUR SUPPORT OF LOCAL NONPROFITS GOES DEEPER THAN THE MILLIONS IN GRANTS WE AWARD EACH YEAR. OUR TEAM HELPS BUILD THE CAPACITY OF LOCAL ORGANIZATIONS TO ENSURE DONORS' CHARITABLE DOLLARS MAKE AN EVEN BIGGER IMPACT BY OFFERING WORKSHOPS, CONSULTING SERVICES, AND OTHER CAPACITY-BUILDING BENEFITS. ADDITIONALLY, OUR ONGOING GRANT OPPORTUNITIES PROVIDE SUPPORT BOTH UP TO \$10,000 AND

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

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

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

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

4e Total program service expenses 45,146,911.

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**Part IV Checklist of Required Schedules**

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

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**Part IV Checklist of Required Schedules** (continued)

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

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b> 39	
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b> X	

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

		Yes	No
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 36		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	X	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X	
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		X
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		X
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		X
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state?	<b>13a</b>		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</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	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>		
<b>15</b> 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?	<b>15</b>		X
If "Yes," see the instructions and file Form 4720, Schedule N.			
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	<b>16</b>		X
If "Yes," complete Form 4720, Schedule O.			
<b>17 Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	<b>17</b>		
If "Yes," complete Form 6069.			

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	18	
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>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	18	
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>		<b>X</b>
<b>3</b> 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?	<b>3</b>		<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		<b>X</b>
<b>7a</b> 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?	<b>7a</b>		<b>X</b>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	<b>8a</b>	<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	<b>X</b>	
<b>9</b> 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	<b>9</b>		<b>X</b>

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

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>		<b>X</b>
<b>b</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?	<b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	<b>X</b>	
<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	<b>X</b>	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	<b>X</b>	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<b>12c</b>	<b>X</b>	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	<b>X</b>	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	<b>X</b>	
<b>15</b> 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?			
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	<b>X</b>	
<b>b</b> Other officers or key employees of the organization	<b>15b</b>		<b>X</b>
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>		<b>X</b>
<b>b</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?	<b>16b</b>		

**Section C. Disclosure**

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

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

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **ERIN JONES - (941) 955-3000**  
**2635 FRUITVILLE ROAD, SARASOTA, FL 34237**

**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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROXANNE JERDE CEO/PRESIDENT	40.00			X				322,258.	0.	36,141.
(2) LAURA SPENCER CFO/CAO	40.00			X				217,557.	0.	28,355.
(3) ELIZABETH PENNEWILL GENERAL COUNSEL	40.00			X				198,289.	0.	26,396.
(4) MISCHA KIRBY VP, STRATEGIC COMM. & MARKETING	40.00			X				157,371.	0.	22,380.
(5) KIRSTEN RUSSELL VP, COMMUNITY IMPACT	40.00			X				149,717.	0.	21,282.
(6) JAY YOUNG VP, PHILANTHROPY	40.00			X				110,090.	0.	18,789.
(7) ERIN JONES VP, FINANCE AND OPERATIONS	25.00			X				108,612.	0.	18,475.
(8) RANATA REEDER VP, KNOWLEDGE & EQUITY	40.00			X				108,277.	0.	4,847.
(9) C.J. FISHMAN DIRECTOR	1.00	X						0.	0.	0.
(10) PAUL HUDSON DIRECTOR	1.00	X						0.	0.	0.
(11) JOHN HUMPHREY DIRECTOR	1.00	X						0.	0.	0.
(12) DONNA KOFFMAN DIRECTOR	1.00	X						0.	0.	0.
(13) DR. RODNEY LINFORD DIRECTOR	1.00	X						0.	0.	0.
(14) KELVIN LUMPKIN DIRECTOR	1.00	X						0.	0.	0.
(15) NELLE MILLER DIRECTOR	1.00	X						0.	0.	0.
(16) DRAYTON SAUNDERS DIRECTOR	1.00	X						0.	0.	0.
(17) FELICE SCHULANER DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MERCEDES SOLER DIRECTOR	1.00	X						0.	0.	0.
(19) DR. JANET E. TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(20) JEFFREY TROIANO DIRECTOR	1.00	X						0.	0.	0.
(21) LYNN WENTWORTH DIRECTOR	1.00	X						0.	0.	0.
(22) CHARLES E. WILLIAMS DIRECTOR	1.00	X						0.	0.	0.
(23) MARY LOU WINNICK DIRECTOR	1.00	X						0.	0.	0.
(24) WILLIAM SEIDER SECRETARY	1.00	X		X				0.	0.	0.
(25) DANIEL DELEO CHAIR	1.00	X		X				0.	0.	0.
(26) T. ANDREW STULTZ TREASURER	1.00	X		X				0.	0.	0.
<b>1b Subtotal</b>								1,372,171.	0.	176,665.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,372,171.	0.	176,665.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **8**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NORTHERN TRUST 1515 RINGLING BLVD., SARASOTA, FL 34236	INVESTMENT MANAGEMENT	220,925.
STRIPE, 510 TOWNSEND STREET, SAN FRANCISCO, CA 94103	CREDIT CARD PROCESSING	218,357.
RBC, 200 PARK AVE. 2ND FLOOR, FLORHAM PARK, NJ 07932	INVESTMENT MANAGEMENT	209,919.
GIVEGAB, INC., 401 E. STATE STREET, SUITE 100, ITHACA, NY 14850	GIVE DAY PLATFORM	135,000.
CALDWELL TRUST 201 CENTER ROAD, VENICE, FL 34292	INVESTMENT MANAGEMENT	116,709.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **6**

**SEE PART VII, SECTION A CONTINUATION SHEETS**

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## Form 990

<b>Part VII</b>	<b>Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> <i>(continued)</i>
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**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>	329,843.				
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	45,315,938.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 3,684,972.				
	<b>h Total.</b> Add lines 1a-1f						
<b>Program Service Revenue</b>			<b>Business Code</b>				
	<b>2 a</b> ADMINISTRATIVE FEES		900099	4,287,979.	4,287,979.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			4,287,979.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			11,143,980.		52,160.	11,091,820.
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>	54,340,970.				
	<b>c</b> Gain or (loss)	<b>7c</b>	9,953,814.				
	<b>d</b> Net gain or (loss)			9,953,814.			9,953,814.
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>					
	<b>b</b> Less: direct expenses	<b>8b</b>					
	<b>c</b> Net income or (loss) from fundraising events						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>					
	<b>b</b> Less: direct expenses	<b>9b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
	<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>					
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
	<b>11 a</b>						
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions				71,031,554.	4,287,979.	52,160.	21,045,634.

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**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	40,685,750.	40,685,750.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	764,479.	764,479.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,632,993.	548,642.	465,426.	618,925.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	1,412,666.	494,806.	629,787.	288,073.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	66,864.	26,737.	29,431.	10,696.
<b>9</b> Other employee benefits	227,848.	78,185.	87,078.	62,585.
<b>10</b> Payroll taxes	196,485.	67,549.	71,275.	57,661.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	51,733.	17,785.	18,766.	15,182.
<b>d</b> Lobbying	9,150.	3,146.	3,319.	2,685.
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	971,090.	333,846.	352,264.	284,980.
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	4,077,463.	1,401,771.	1,479,103.	1,196,589.
<b>12</b> Advertising and promotion	415,921.	142,987.	150,876.	122,058.
<b>13</b> Office expenses	83,945.	28,859.	30,451.	24,635.
<b>14</b> Information technology	94,192.	32,382.	34,168.	27,642.
<b>15</b> Royalties				
<b>16</b> Occupancy	51,373.	17,661.	18,636.	15,076.
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	51,346.	17,652.	18,626.	15,068.
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	100,618.	34,591.	36,499.	29,528.
<b>23</b> Insurance	52,658.	18,103.	19,102.	15,453.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a CREDIT CARD FEES</b>	388,870.	133,688.	141,063.	114,119.
<b>b GRANT INITIATIVES</b>	239,459.	239,459.		
<b>c REPAIRS AND MAINTENANCE</b>	171,134.	58,833.	62,079.	50,222.
<b>d</b>				
<b>e All other expenses</b>				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	51,746,037.	45,146,911.	3,647,949.	2,951,177.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	3,091,434.	<b>1</b>	4,366,330.
	<b>2</b> Savings and temporary cash investments .....	10,019,723.	<b>2</b>	10,034,346.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	194,113.	<b>4</b>	79,545.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	803,159.	<b>7</b>	859,033.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	73,656.	<b>9</b>	69,231.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	4,209,420.		
	<b>b</b> Less: accumulated depreciation .....	2,043,292.	<b>10c</b>	2,166,128.
	<b>11</b> Investments - publicly traded securities .....	395,735,719.	<b>11</b>	342,049,767.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	6,694,794.	<b>12</b>	3,855,491.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	17,608,152.	<b>15</b>	23,313,979.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	436,461,198.	<b>16</b>	386,793,850.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	557,196.	<b>17</b>	289,603.
	<b>18</b> Grants payable .....	1,981,705.	<b>18</b>	2,879,404.
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	43,426,439.	<b>25</b>	36,745,998.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	45,965,340.	<b>26</b>	39,915,005.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	349,013,906.	<b>27</b>	311,955,363.
	<b>28</b> Net assets with donor restrictions .....	41,481,952.	<b>28</b>	34,923,482.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	390,495,858.	<b>32</b>	346,878,845.
	<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	436,461,198.	<b>33</b>	386,793,850.

Form **990** (2021)

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Form 990 (2021)

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**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	71,031,554.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	51,746,037.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	19,285,517.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	390,495,858.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-59,474,506.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	-3,428,024.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	346,878,845.

**Part XII Financial Statements and Reporting**

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

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

Form **990** (2021)

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.** Employer identification number **59-1956886**

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

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

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

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

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule A (Form 990) 2021

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	63,222,392.	38,526,494.	45,593,190.	22,566,087.	45,645,781.	215,553,944.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	63,222,392.	38,526,494.	45,593,190.	22,566,087.	45,645,781.	215,553,944.
<b>5</b> 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) .....						35,558,125.
<b>6 Public support.</b> Subtract line 5 from line 4.						179,995,819.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	63,222,392.	38,526,494.	45,593,190.	22,566,087.	45,645,781.	215,553,944.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	7,922,411.	8,824,677.	9,664,834.	9,358,467.	11,143,980.	46,914,369.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....				10.		10.
<b>11 Total support.</b> Add lines 7 through 10						262,468,323.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	17,660,724.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	68.58 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	69.00 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>	

Schedule A (Form 990) 2021

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐ ►

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐ ►

**b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐ ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐ ►



**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.		Yes	No
<b>a</b> 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 <b>Part VI</b> 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.			
<b>2a</b>			
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> 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 <b>Part VI</b> .			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			
<b>3b</b>			

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule A (Form 990) 2021

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3.	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>		

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d.	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by 0.035.	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		

<b>Section C - Distributable Amount</b>		(A) Prior Year	(B) Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>		
<b>2</b> Enter 0.85 of line 1.	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3.	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2021

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule A (Form 990) 2021

59-1956886 Page 7

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2021 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2021</b>	<b>(iii) Distributable Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7 Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

Schedule A (Form 990) 2021

[illegible]

**Schedule B**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

Employer identification number

59-1956886

Organization type (check one):

**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

**SCHEDULE C**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	<b>THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</b>	Employer identification number	<b>59-1956886</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_

3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No
- 4a Was a correction made? ..... ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2021

LHA

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**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)															
<b>d</b> Other exempt purpose expenditures															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-															
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990) 2021



**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?		X	
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	X		
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?	X		9,150.
<b>j</b> Total. Add lines 1c through 1i			9,150.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE COMMUNITY FOUNDATION OF SARASOTA COUNTY, INC. IS PARTICIPATING IN THE COMMUNITY FOUNDATION AWARENESS INITIATIVE WHICH IS A PROJECT OF THE PHILANTHROPY PRACTICE AT VAN SCOYOC ASSOCIATES. THIS INITIATIVE HELPS INDIVIDUAL FOUNDATIONS AND OTHERS IN THE PHILANTHROPY SPACE EDUCATE POLICYMAKERS ABOUT THEIR PROGRAM WORK, AS WELL AS THE POSITIVE IMPACTS



**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

**Name of the organization** THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.

**Employer identification number**  
59-1956886

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....	472	847
2 Aggregate value of contributions to (during year) .....	12,557,472.	33,088,309.
3 Aggregate value of grants from (during year) .....	10,907,607.	30,542,622.
4 Aggregate value at end of year .....	71,710,866.	308,701,792.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

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

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....



**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule D (Form 990) 2021

59-1956886 Page **3**

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) SPLIT INTEREST AGREEMENTS	8,145,090.
(2) OTHER NONCURRENT ASSETS	238,308.
(3) CHARITABLE REMAINDER TRUST	1,928,594.
(4) ESTATES RECEIVABLE	12,467,530.
(5) LIFE INSURANCE RECEIVABLE	304,457.
(6) REAL ESTATE HELD FOR INVESTMENT	230,000.
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	23,313,979.

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY CONTRACT	3,212,183.
(3) FUNDS HELD AS AGENCY ENDOWMENTS	33,533,815.
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	36,745,998.

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... ☒

Schedule D (Form 990) 2021

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

Schedule D (Form 990) 2021

59-1956886 Page 4

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	-891,415.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-59,474,506.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	-3,141,092.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-62,615,598.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	61,724,183.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	798,102.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	8,509,269.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	9,307,371.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	71,031,554.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	51,653,886.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	7,711,714.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	7,711,714.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	43,942,172.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	798,102.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	7,005,763.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	7,803,865.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	51,746,037.

**Part XIII Supplemental Information.**

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

**PART V, LINE 4:**

TO PROVIDE GRANTS THAT ENHANCE THE QUALITY OF LIFE IN SARASOTA COUNTY AND SURROUNDING AREAS.

**PART X, LINE 2:**

UNDER THE INCOME TAXES TOPIC OF THE FASB ACCOUNTING STANDARDS CODIFICATION, THE FOUNDATION HAS REVIEWED AND EVALUATED THE RELEVANT TECHNICAL MERITS OF EACH OF ITS TAX POSITIONS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL IMPACT ON THE COMBINED FINANCIAL STATEMENTS.

**Part XIII** Supplemental Information (continued)

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN SPLIT-INTEREST AGREEMENT VALUES	-1,131,549.
DISTRIBUTIONS TO ANNUITANTS	-637,293.
REVENUE OF AFFILIATED ENTITIES INCLUDED IN CONSOLIDATED FINANCIALS	-1,372,250.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-3,141,092.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE ON FINANCIAL STMTS	4,013,117.
AGENCY INTEREST AND DIVIDENDS NOT INCLUDED ON FINANCIAL STATEMENTS	984,777.
AGENCY CONTRIBUTIONS NOT INCLUDED ON FINANCIAL STATEMENTS	1,247,722.
AGENCY REALIZED GAIN NOT INCLUDED ON FINANCIAL STATEMENTS	1,070,332.
INVESTMENT INCOME REPORTED ON K-1'S	852,230.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT RELATED TO 990S ROUNDING	1.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	8,509,269.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY AFFILIATED ENTITIES IN CONSOLIDATED FINANCIALS	7,556,037.
SHARED OPERATIONAL EXPENSES ALLOCATED TO TRUST	155,677.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	7,711,714.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE

**Part XIII** Supplemental Information (continued)

ON FINANCIAL STMTS	4,013,117.
AGENCY INVESTMENT FEES NOT INCLUDED ON FINANCIAL STATEMENTS	38,657.
INVESTMENT EXPENSES REPORTED ON K-1'S	134,331.
AGENCY GRANTS NOT INCLUDED ON FINANCIAL STATEMENTS	2,477,333.
AGENCY ADMINISTRATIVE FEES NOT INCLUDED ON FINANCIAL STATEMENTS	1,185.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT RELATED TO 990S	341,090.
AGENCY AUDIT & FILING FEES	50.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	7,005,763.



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

**Employer identification number**  
**59-1956886**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
21ST CENTURY MINISTRIES INC (DBA INSPIRATION ACADEMY) - 7900 40TH AVE W - BRADENTON, FL 34209	47-1557521	501(C)(3)	31,206.	0.			GENERAL SUPPORT
52ND STREET PROJECT INC. 789 TENTH AVE NEW YORK, NY 10019	13-3467948	501(C)(3)	25,000.	0.			GENERAL SUPPORT
AAVI, INC. DBA LOVESERVES INTERNATIONAL - 3310 US HWY 301 N - ELLENTON, FL 34222	65-0406418	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ACADIA UNIVERSITY FOUNDATION 15 UNIVERSITY AVE WOLFFVILLE, NOVA SCOTIA, CANADA B4P2R6	98-0537324	501(C)(3)	8,755.	0.			GENERAL SUPPORT
ADVENTURE FOR ALL CORPORATION P.O. BOX 645 SARASOTA, FL 34230	86-1243498	501(C)(3)	31,685.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AGAPE FLIGHTS, INC. 100 AIRPORT AVE E VENICE, FL 34285	59-2057436	501(C)(3)	206,438.	0.			GENERAL SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... **857.**
- 3** Enter total number of other organizations listed in the line 1 table ..... **0.**

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

**Schedule I (Form 990) 2021**

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

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**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
AGASSIZ VILLAGE 185 DEAN STREET #206 NORWOOD, MA 02062	04-2160531	501(C)(3)	9,653.	0.			GENERAL SUPPORT
AGAWAM COUNCIL 6 FUNDY RD., SUITE 100 FALMOUTH, ME 04105	22-2577250	501(C)(3)	9,653.	0.			GENERAL SUPPORT
ALABAMA STATE UNIVERSITY TRUST FOR EDUCATIONAL EXCELLENCE - P.O. BOX 271 - MONTGOMERY, AL 36101	31-1635334	501(C)(3)	5,600.	0.			SCHOLARSHIP SUPPORT
ALL FAITHS FOOD BANK INC 8171 BLAIKIE COURT SARASOTA, FL 34240-8321	65-0115814	501(C)(3)	708,816.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALL STAR CHILDREN'S FOUNDATION 3300 17TH STREET SARASOTA, FL 34235	20-2182079	501(C)(3)	42,394.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALLIANCE FRANCAISE DE SARASOTA, INC. - 715 N. WASHINGTON BOULEVARD SUITE C - SARASOTA, FL 34236-4256	59-2381875	501(C)(3)	7,830.	0.			GENERAL SUPPORT
ALMOST HOME DOG RESCUE INC PO BOX 213 TERRA CEIA, FL 34250	26-3933844	501(C)(3)	10,919.	0.			GENERAL SUPPORT
ALPHA AND OMEGA FREEDOM MINISTRIES INCORPORATED D/B/A/ HANNAH'S HOUSE - P.O. BOX 339 - WAUCHULA, FL 33873-0339	59-2735813	501(C)(3)	7,550.	0.			GENERAL SUPPORT
ALSO FOR GAY YOUTH, INC. 1470 BOULEVARD OF THE ARTS SARASOTA, FL 34236	74-2840470	501(C)(3)	71,758.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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**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
ALTA VISTA ELEMENTARY SCHOOL 1050 S. EUCLID AVE. SARASOTA, FL 34237	59-6000847	501(C)(3)	131,296.	0.			PROGRAM SUPPORT
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION, INC. - FLORIDA GULF - 14010 ROOSEVELT BLVD SUITE 709 - CLEARWATER, FL	13-3039601	501(C)(3)	8,827.	0.			GENERAL SUPPORT
AMERICAN ASSOCIATION OF UNIVERSITY WOMEN - VENICE BRANCH - PO BOX 515 - VENICE, FL 34284	38-3867484	501(C)(3)	7,352.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY - SARASOTA, FL OFFICE - 2970 UNIVERSITY PKWY STE 104 - SARASOTA, FL 34243	13-1788491	501(C)(3)	6,955.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY, FLORIDA DIVISION - P.O. BOX 17127 - TAMPA, FL 33682	13-1788491	501(C)(3)	37,628.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY, LEE COUNTY UNIT - 4575 VIA ROYALE STE 110 - FT. MYERS, FL 33919	13-1788491	501(C)(3)	19,957.	0.			GENERAL SUPPORT
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE, INC. - 633 THIRD AVENUE 20TH FLOOR - NEW YORK CITY, NY 10017	13-1623886	501(C)(3)	10,100.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
AMERICAN FRIENDS OF MAGEN DAVID ADOM - PO BOX 96402 - WASHINGTON, DC 20090-6402	13-1790719	501(C)(3)	35,852.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN FRIENDS OF THE ASSOCIATION FOR THE ADVANCEMENT OF COMMUNITY CENTER - 1466 MANOR ROAD - STATEN ISLAND, NY 10314	75-3049554	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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**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 FRIENDS OF THE NATIONAL GALLERY, LONDON - 31 WEST 34TH STREET 7TH FLR #7010 - NEW YORK, NY 10001	13-3321549	501(C)(3)	12,526.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION SOUTHWEST FLORIDA - 9200 ESTERO PARK COMMONS BOULEVARD SUITE 7 - ESTERO, FL 33928	13-5613797	501(C)(3)	19,897.	0.			GENERAL SUPPORT
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE, INC. - P.O. BOX 4124 - NEW YORK, NY 10163	13-1656634	501(C)(3)	16,250.	0.			PROGRAM SUPPORT
AMERICAN LUNG ASSOCIATION - TAMPA, FL - 730 SOUTH STERLING AVENUE SUITE 303 - TAMPA, FL 33609	13-1632524	501(C)(3)	19,897.	0.			GENERAL SUPPORT
AMERICAN NATIONAL RED CROSS PO BOX 37839 BOONE, IA 50037-0839	53-0196605	501(C)(3)	21,100.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN RED CROSS OF CENTRAL FLORIDA AND THE U.S. VIRGIN ISLANDS (REGIONAL - 3310 WEST MAIN STREET - TAMPA, FL 33607	53-0196605	501(C)(3)	7,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
AMERICAN RED CROSS SOUTHWEST FLORIDA CHAPTER - 2001 CANTU COURT - SARASOTA, FL 34232-6239	53-0196605	501(C)(3)	32,229.	0.			GENERAL SUPPORT
AMERICAN TECHNION SOCIETY 55 EAST 59TH STREET NEW YORK, NY 10022	13-0434195	501(C)(3)	6,700.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMI PUP RESCUE INC. PO BOX 1878 ANNA MARIA, FL 34216-1878	85-4158364	501(C)(3)	7,572.	0.			GENERAL SUPPORT

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**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
ANCHOR HOUSE, INC. 13285 EASTERN AVENUE PALMETTO, FL 34221-6608	65-0397908	501(C)(3)	17,054.	0.			GENERAL SUPPORT
ANIMAL RESCUE COALITION, INC. 6320 TOWER LANE SARASOTA, FL 34240	65-0950292	501(C)(3)	55,404.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ANIMAL WELFARE LEAGUE OF CHARLOTTE COUNTY FLORIDA - 3519 DRANCE ST. - PUNTA GORDA, FL 33980-2407	59-1146309	501(C)(3)	42,861.	0.			GENERAL SUPPORT
ANNA MARIA ISLAND COMMUNITY CENTER DBA THE CENTER OF ANNA MARIA ISLAND - PO BOX 253 - ANNA MARIA, FL 34216-0253	59-6166231	501(C)(3)	43,125.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
APHASIA COMMUNITY CENTER INC P.O. BOX 693 SARASOTA, FL 34230-0693	83-2356579	501(C)(3)	17,167.	0.			GENERAL SUPPORT
ARCADIA-DESOTO COUNTY HABITAT FOR HUMANITY - 1101 W. OAK STREET - ARCADIA, FL 34266	59-3656661	501(C)(3)	6,189.	0.			GENERAL SUPPORT
ARCHDIOCESE OF DUBUQUE 1229 MT. LORETTA AVENUE DUBUQUE, IA 52003	42-0680409	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
ARIZONA STATE UNIVERSITY FOUNDATION AKA ASU FOUNDATION - PO BOX 2260 - TEMPE, AZ 85280-2260	86-6051042	501(C)(3)	13,000.	0.			PROGRAM SUPPORT
ART CENTER SARASOTA 707 N. TAMIAMI TRAIL SARASOTA, FL 34236	59-0706844	501(C)(3)	26,902.	0.			GENERAL SUPPORT

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**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
ART IN COMMON PLACES, INC. 5844 MERIWEATHER PLACE SARASOTA, FL 34232-5000	86-3556113	501(C)(3)	6,527.	0.			GENERAL SUPPORT
ART LEAGUE OF MANATEE COUNTY DBA ART CENTER MANATEE - 209 9TH STREET WEST - BRADENTON, FL 34205	59-0967824	501(C)(3)	32,272.	0.			GENERAL SUPPORT
ARTIST SERIES CONCERTS OF SARASOTA, INC. - 1226 N. TAMIAMI TRL SUITE 300 - SARASOTA, FL 34236	65-0755294	501(C)(3)	26,006.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ARTISTS GUILD OF MANATEE, INC. DBA VILLAGE OF THE ARTS - PO BOX 729 - BRADENTON, FL 34206-0729	65-0964401	501(C)(3)	14,592.	0.			GENERAL SUPPORT
ARTS & CULTURAL ALLIANCE OF SARASOTA COUNTY - 1226 N. TAMIAMI TRAIL #300 - SARASOTA, FL 34236-2431	59-2710755	501(C)(3)	70,214.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ASHTON PARENTS BOOSTERS, INC. DBA ASHTON ELEMENTARY PTO - 5110 ASHTON ROAD - SARASOTA, FL 34233	65-0592120	501(C)(3)	8,564.	0.			GENERAL SUPPORT
ASIAN COMMUNITY ALLIANCE 7577 CENTRAL PARKE BLVD STE 222 MASON, OH 45040	56-2465820	501(C)(3)	7,000.	0.			GENERAL SUPPORT
ASOLO REPERTORY THEATRE INC 5555 N. TAMIAMI TRAIL SARASOTA, FL 34243	59-2717909	501(C)(3)	211,863.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
AVENIDA DE COLORES, INC. 540 S. ORANGE AVENUE SARASOTA, FL 34236-7502	27-3251334	501(C)(3)	10,988.	0.			GENERAL SUPPORT

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**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
BABCOCK NEIGHBORHOOD SCHOOL INC. 43301 CYPRESS PARKWAY BABCOCK RANCH, FL 33982-0000	37-1842600	501(C)(3)	40,751.	0.			GENERAL SUPPORT
BABY BASICS OF SARASOTA COUNTY, INC. - P.O. BOX 15485 - SARASOTA, FL 34277	11-3832610	501(C)(3)	17,214.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
BARRIER ISLAND PARKS SOCIETY, INC. PO BOX 637 BOCA GRANDE, FL 33921-0121	65-0327405	501(C)(3)	16,585.	0.			GENERAL SUPPORT
BAYSIDE COMMUNITY CHURCH OF SARASOTA - 15800 EAST STATE ROAD 64 - BRADENTON, FL 34212	04-3648411	501(C)(3)	8,000.	0.			GENERAL SUPPORT
BE THE CHANGE INC 2235 WASON ROAD SARASOTA, FL 34231	20-5991397	501(C)(3)	7,298.	0.			GENERAL SUPPORT
BEAUTY FOR ASHES WOMEN'S HOME 236 147TH ST NE BRADENTON, FL 34212	47-3768926	501(C)(3)	17,672.	0.			GENERAL SUPPORT
BEDS FOR KIDS INC. 6611 209TH ST. E. BRADENTON, FL 34211	85-3472066	501(C)(3)	17,811.	0.			GENERAL SUPPORT
BEYOND THE SPECTRUM, INC. 7333 INTERNATIONAL PLACE SARASOTA, FL 34240-8418	20-8269622	501(C)(3)	49,954.	0.			GENERAL AND PROGRAM SUPPORT
BIG BEND AREA HEALTH EDUCATION CENTER INC. - 2815 REMINGTON GREEN CIRCLE SUITE 100 - TALLAHASSEE, FL 32308	59-3345711	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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INC.**

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**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
BIG BROTHERS BIG SISTERS OF THE SUN COAST INC. - 1000 S. TAMIAMI TRAIL, SUITE C - VENICE, FL 34285-4122	59-1361826	501(C)(3)	59,182.	0.			GENERAL AND PROGRAM SUPPORT
BIG CAT HABITAT GULF COAST SANCTUARY INC - 7101 PALMER BOULEVARD - SARASOTA, FL 34232	65-0659177	501(C)(3)	69,948.	0.			GENERAL AND PROGRAM SUPPORT
BIRDS OF PARADISE SANCTUARY & RESCUE, INC. - 17020 WATERLINE ROAD - BRADENTON, FL 34212	45-3674500	501(C)(3)	31,408.	0.			GENERAL AND PROGRAM SUPPORT
BLAZE OF HOPE INC 16237 WINBURN DR SARASOTA, FL 34240	47-3406359	501(C)(3)	7,637.	0.			GENERAL SUPPORT
BOCA GRANDE UNITED METHODIST CHURCH DBA THE LIGHTHOUSE CHURCH OF BOCA GRAND - P.O. BOX 524 - BOCA GRANDE, FL 33921	58-2221539	501(C)(3)	8,750.	0.			GENERAL AND PROGRAM SUPPORT
BOOKER HIGH SCHOOL 3201 N. ORANGE AVENUE SARASOTA, FL 34234	59-6000847	501(C)(3)	10,250.	0.			EMERGENCY ASSISTANCE AND PROGRAM SUPPORT
BOOKER MIDDLE SCHOOL 2250 MYRTLE STREET SARASOTA, FL 34234	59-6000847	501(C)(3)	16,262.	0.			EMERGENCY ASSISTANCE AND PROGRAM SUPPORT
BOOKER PROMISE FOUNDATION INC PO BOX 2299 SARASOTA, FL 34230	84-2585940	501(C)(3)	9,749.	0.			GENERAL SUPPORT AND SCHOLARSHIP SUPPORT
BOOSTERS FOUNDATION, INC. 2912 ALEX MCKAY PLACE SARASOTA, FL 34240	81-2127166	501(C)(3)	50,000.	0.			GENERAL SUPPORT

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BOXSER DIVERSITY INITIATIVE, INC. 2301 GULF OF MEXICO DR UNIT 63 LONGBOAT KEY, FL 34228	81-3050026	501(C)(3)	40,034.	0.			GENERAL AND PROGRAM SUPPORT
BOYS & GIRLS CLUB OF HILTON HEAD ISLAND - P.O. BOX 22267 - HILTON HEAD ISLAND, SC 29925	57-0811876	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE PLATEAU PO BOX 1812 CASHIERS, NC 28717	46-5336895	501(C)(3)	41,500.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
BOYS & GIRLS CLUBS OF CHARLOTTE COUNTY - 21500 GIBRALTER DRIVE, SUITE 10 - PORT CHARLOTTE, FL 33952-5417	65-0725247	501(C)(3)	82,564.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF MANATEE COUNTY, INC. - P.O. BOX 280 - BRADENTON, FL 34206	59-0675141	501(C)(3)	56,245.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF SARASOTA AND DESOTO COUNTIES - 3130 FRUITVILLE ROAD - SARASOTA, FL 34237	59-6211876	501(C)(3)	1,701,981.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
BOYS TOWN OF CENTRAL FLORIDA 975 OKLAHOMA STREET OVIEDA, FL 32765	47-0376606	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
BRADENTON BLUE FOUNDATION, INC. 100 10TH ST W BRADENTON, FL 34205	82-4912048	501(C)(3)	7,102.	0.			GENERAL SUPPORT
BRADENTON CHRISTIAN SCHOOL 3304 43RD STREET W BRADENTON, FL 34209	59-6045439	501(C)(3)	60,819.	0.			GENERAL SUPPORT

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BRADENTON DREAM CENTER INC 1816 9TH ST. W. BRADENTON, FL 34205	27-3661583	501(C)(3)	5,766.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BRIDGE A LIFE INC 1680 FRUITVILLE RD SUITE 312B SARASOTA, FL 34236	46-2391027	501(C)(3)	43,908.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BRING ON THE MINISTRY, INC. 4814 18TH ST W BRADENTON, FL 34207	82-5082626	501(C)(3)	14,423.	0.			GENERAL SUPPORT
BROTHERHOOD OF MEN MENTOR GROUP, INC. - 2316 MIZNER BAY AVE - BRADENTON, FL 34208-2534	26-0228550	501(C)(3)	14,358.	0.			GENERAL SUPPORT
C.G. JUNG SOCIETY OF SARASOTA P.O. BOX 1956 SARASOTA, FL 34230	65-0480102	501(C)(3)	12,309.	0.			GENERAL SUPPORT
CALVARY CHAPEL SCHOOL INC 3800 27TH PKWY SARASOTA, FL 34235	65-0942749	501(C)(3)	14,382.	0.			GENERAL SUPPORT
CAMP SUNSHINE AT SEBAGO LAKE INC 35 ACADIA RD CASCO, ME 04015	22-2582877	501(C)(3)	9,653.	0.			GENERAL SUPPORT
CANINE CASTAWAYS, INC. P.O. BOX 3295 ARCADIA, FL 34265	20-0416812	501(C)(3)	40,767.	0.			GENERAL SUPPORT
CARDINAL MOONEY CATHOLIC HIGH SCHOOL - 4171 FRUITVILLE ROAD - SARASOTA, FL 34232	59-0900923	501(C)(3)	73,505.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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CARE NET MANASOTA PREGNANCY CENTER INC. - 5111 26TH STREET W. - BRADENTON, FL 34207-2202	65-0710238	501(C)(3)	16,110.	0.			GENERAL SUPPORT
CARE USA - COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE - PO BOX 1870 - MERRIFIELD, VA 22116-8070	13-1685039	501(C)(3)	10,500.	0.			GENERAL SUPPORT
CASEY KEY LIBRARY ASSOCIATION, INC. - P.O. BOX 1101 - OSPREY, FL 34229-1101	59-2669039	501(C)(3)	5,277.	0.			GENERAL SUPPORT
CAT DEPOT 2542 17TH STREET SARASOTA, FL 34234-1905	20-0217681	501(C)(3)	173,944.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES DIOCESE OF VENICE, INC. - 1000 PINEBROOK RD. - VENICE, FL 34285	59-2473176	501(C)(3)	304,478.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES OF DESOTO COUNTY, DISTRICT IV - 1210 E. OAK STREET - ARCADIA, FL 34266-8907	59-2473176	501(C)(3)	100,000.	0.			EMERGENCY ASSISTANCE
CATHOLIC RELIEF SERVICES PO BOX 17090 BALTIMORE, MD 21297-0303	13-5563422	501(C)(3)	8,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CENTER FOR ABUSE & RAPE EMERGENCIES OF CHARLOTTE COUNTY INC (C.A.R.E) - P.O. BOX 510234 - PUNTA GORDA, FL 33951-0234	59-2435059	501(C)(3)	21,933.	0.			GENERAL SUPPORT
CENTER FOR ARCHITECTURE SARASOTA INC (DBA ARCHITECTURE SARASOTA) - 265 SOUTH ORANGE AVENUE - SARASOTA, FL 34236	46-3116947	501(C)(3)	14,678.	0.			GENERAL SUPPORT

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CENTER FOR DISASTER PHILANTHROPY INC - ONE THOMAS CIRCLE, NW STE 700 - WASHINGTON, DC 20005	45-5257937	501(C)(3)	24,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CENTER FOR EDUCATION PARENTS ASSOCIATION DBA CENTER MONTESSORI - 6024 26TH ST W - BRADENTON, FL 34207-4401	65-0796951	501(C)(3)	10,469.	0.			GENERAL SUPPORT
CENTER FOR RELIGIOUS TOLERANCE 520 RALPH STREET SARASOTA, FL 34242	20-5782137	501(C)(3)	29,131.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CENTER OF THE AMERICAN EXPERIMENT 8421 WAYZATA BLVD., STE. 110 GOLDEN VALLEY, MN 55426	36-3611426	501(C)(3)	7,500.	0.			GENERAL SUPPORT
CENTERPLACE HEALTH INC 1750 17TH STREET, BUILDING N SARASOTA, FL 34234	20-2779327	501(C)(3)	39,874.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CENTERSTONE OF FLORIDA 391 6TH AVENUE WEST BRADENTON, FL 34205-8820	59-1009537	501(C)(3)	7,459.	0.			GENERAL SUPPORT
CENTRAL NEW YORK COMMUNITY FOUNDATION INC. - 431 EAST FAYETTE STREET, SUITE 100 - SYRACUSE, NY 13202	15-0626910	501(C)(3)	180,000.	0.			PROGRAM SUPPORT
CHABAD LUBAVITCH OF SARASOTA AND MANATEE COUNTIES, INC. - 7700 BENEVA ROAD - SARASOTA, FL 34238	65-0234425	501(C)(3)	7,961.	0.			GENERAL SUPPORT
CHARLOTTE CHRISTIAN SCHOOL 7301 SARDIS RD. CHARLOTTE, NC 28270	56-0750913	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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CHARLOTTE COUNTRY DAY SCHOOL (DBA CHARLOTTE PREPARATORY SCHOOL) - 365 ORLANDO BLVD. - PORT CHARLOTTE, FL 33954	65-0661754	501(C)(3)	20,942.	0.			GENERAL SUPPORT
CHARLOTTE COUNTY ART GUILD, INC. DBA VISUAL ARTS CENTER - 210 MAUD ST. - PUNTA GORDA, FL 33950	59-6192800	501(C)(3)	38,471.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE COUNTY HABITAT FOR HUMANITY, INC. - 1750 MANZANA AVENUE - PUNTA GORDA, FL 33950-6409	59-2870908	501(C)(3)	27,870.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE COUNTY HOMELESS COALITION, INC. - 1476 KENESAW ST. - PORT CHARLOTTE, FL 33948	65-0139525	501(C)(3)	30,033.	0.			GENERAL SUPPORT
CHARLOTTE COUNTY PUBLIC SCHOOLS 1445 EDUCATION WAY PORT CHARLOTTE, FL 33948	59-6000539	501(C)(3)	19,305.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE HARBOR ENVIRONMENTAL CENTER - P.O. BOX 512876 - PUNTA GORDA, FL 33951	59-2853001	501(C)(3)	11,012.	0.			GENERAL SUPPORT
CHARLOTTE HARBOR YOUNG LIFE P.O. BOX 512529 PUNTA GORDA, FL 33951-2529	84-0385934	501(C)(3)	16,311.	0.			GENERAL SUPPORT
CHARLOTTE HIV-AIDS PEOPLE SUPPORT INC (CHAPS) - 18200 PAULSON DR UNIT A1-2 - PORT CHARLOTTE, FL 33954-1032	65-0498294	501(C)(3)	5,554.	0.			GENERAL SUPPORT
CHARLOTTE PLAYERS INC P.O. BOX 494088 PORT CHARLOTTE, FL 33949-4088	23-7087894	501(C)(3)	28,970.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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CHARLOTTE SYMPHONY ORCHESTRA DBA PUNTA GORDA SYMPHONY - 6210 SCOTT STREET, UNIT 213 - PUNTA GORDA, FL 33950	59-2029342	501(C)(3)	32,879.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHICAGO JESUIT ACADEMY 5058 W. JACKSON BLVD. CHICAGO, IL 60644	20-2091040	501(C)(3)	50,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHILD EVANGELISM FELLOWSHIP INC SOUTHWEST FLORIDA - 25166 MARION AVE, #115 - PUNTA GORDA, FL 33950	59-0837546	501(C)(3)	13,470.	0.			GENERAL SUPPORT
CHILD EVANGELISM FELLOWSHIP OF FLORIDA INC - 4141 DESOTO RD - SARASOTA, FL 34235-3614	59-0837546	501(C)(3)	40,537.	0.			GENERAL SUPPORT
CHILD PROTECTION CENTER, INC. 720 S. ORANGE AVE SARASOTA, FL 34236	59-2113850	501(C)(3)	142,654.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHILDREN FIRST, INC. 1723 N. ORANGE AVENUE SARASOTA, FL 34234	59-0968249	501(C)(3)	183,437.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
CHILDREN'S BOOK PROJECT 3433 21ST STREET SAN FRANCISCO, CA 94110-2212	94-3229734	501(C)(3)	54,500.	0.			GENERAL SUPPORT
CHILDREN'S CANCER CENTER, INC. 4901 W. CYPRESS ST. TAMPA, FL 33607	59-1779035	501(C)(3)	42,592.	0.			GENERAL SUPPORT
CHILDREN'S GUARDIAN FUND INC P.O. BOX 49722 SARASOTA, FL 34230	65-0626074	501(C)(3)	43,786.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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CHILDREN'S HOME ASSOCIATION OF ILLINOIS - 2130 N KNOXILLE AVENUE - PEORIA, IL 61603	37-0662601	501(C)(3)	19,000.	0.			GENERAL SUPPORT
CHILDRENS DREAM FUND INC 1600 23RD AVENUE NORTH ST. PETERSBURG, FL 33713-4428	59-2145821	501(C)(3)	16,301.	0.			GENERAL SUPPORT
CHIPOLA COLLEGE FOUNDATION, INC. 3094 INDIAN CIR MARIANNA, FL 32446	59-2074070	501(C)(3)	60,000.	0.			SCHOLARSHIP SUPPORT
CHORAL ARTISTS OF SARASOTA P.O. BOX 52987 SARASOTA, FL 34232	59-1913814	501(C)(3)	28,496.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHS SILVER KING BAND BOOSTER CLUB 1250 COOPER STREET PUNTA GORDA, FL 33950	46-0938655	501(C)(3)	9,440.	0.			GENERAL SUPPORT
CHURCH OF THE CROSS 5051 26TH STREET WEST BRADENTON, FL 34207	59-1803986	501(C)(3)	6,876.	0.			GENERAL SUPPORT
CHURCH OF THE REDEEMER 222 S. PALM AVENUE SARASOTA, FL 34236	59-0751911	501(C)(3)	10,600.	0.			GENERAL SUPPORT
CITY COMMIT INC 7220 PROCTOR ROAD SARASOTA, FL 34241	47-2062193	501(C)(3)	19,322.	0.			GENERAL SUPPORT
CITY OF NORTH PORT - DIVISION OF SOCIAL SERVICES - 6919 OUTREACH WAY - NORTH PORT, FL 34287	59-6072227	501(C)(3)	50,000.	0.			EMERGENCY ASSISTANCE

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CITY OF NORTH PORT - PARKS & RECREATION DEPARTMENT - 4970 CITY HALL BOULEVARD, THIRD FLOOR - NORTH PORT, FL 34286	59-6072227	501(C)(3)	14,576.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CITY OF SARASOTA 1565 1ST STREET SARASOTA, FL 34236	59-6000426	501(C)(3)	6,726.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CLARE BOOTHE LUCE POLICY INSTITUTE 112 ELDEN STREET, STE P HERNDON, VA 20170	54-1672138	501(C)(3)	6,000.	0.			GENERAL SUPPORT
CLIMATE ADAPTATION CENTER INC 111 S PINEAPPLE AVE, SUITE 911 SARASOTA, FL 34236	84-1889176	501(C)(3)	8,715.	0.			GENERAL SUPPORT
COASTAL CONSERVATION ASSOCIATION FLORIDA - P.O. BOX 568886 - ORLANDO, FL 32856	74-1984482	501(C)(3)	16,408.	0.			GENERAL SUPPORT
COLLEGE OF CENTRAL FLORIDA FOUNDATION, INC. - 3001 SW COLLEGE RD, ENTERPRISE CENTER, BUILDING 42, ROOM 202 - OCALA, FL 34474	59-6139037	501(C)(3)	100,000.	0.			SCHOLARSHIP SUPPORT
COMBAT WOUNDED VETERAN'S CHALLENGE INC. - 10490 GANDY BOULEVARD - ST. PETERSBURG, FL 33702	47-2040547	501(C)(3)	60,000.	0.			GENERAL SUPPORT
COMMITTEE FOR ACCURACY IN MIDDLE EAST REPORTING IN AMERICA, INC. - P.O. BOX 35040 - BOSTON, MA 02135	52-1332702	501(C)(3)	32,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY ASSISTED & SUPPORTED LIVING, INC. (C.A.S.L.) - 2911 FRUITVILLE ROAD - SARASOTA, FL 34237	65-0869993	501(C)(3)	60,520.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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COMMUNITY BROADBAND RADIO ASSOCIATION INC - 12737 TAMIAMI TRAIL - NORTH PORT, FL 34287	27-3270116	501(C)(3)	16,285.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY CATS OF CHARLOTTE INC PO BOX 380755 MURDOCK, FL 33938	46-2387690	501(C)(3)	14,087.	0.			GENERAL SUPPORT
COMMUNITY COALITION ON HOMELESSNESS DBA TURNING POINTS - 701 17TH AVENUE WEST - BRADENTON, FL 34205-7665	59-3340921	501(C)(3)	892,058.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY FOUNDATION OF JACKSON HOLE - PO BOX 1523 - DRIGGS, ID 83422	83-0308856	501(C)(3)	7,500.	0.			PROGRAM SUPPORT
COMMUNITY HAVEN FOR ADULTS AND CHILDREN WITH DISABILITIES AKA THE HAVEN - 4405 DESOTO ROAD - SARASOTA, FL 34235	59-1305522	501(C)(3)	73,074.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY PREGNANCY CLINICS INC P.O. BOX 7608 NAPLES, FL 34101	51-0204833	501(C)(3)	60,794.	0.			GENERAL SUPPORT
COMPEER 1058 N TAMIAMI TRAIL SUITE 108-122 SARASOTA, FL 34236	47-3970857	501(C)(3)	7,142.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
COMPLETE TRANSFORMATION MINISTRIES INC - 6289 VERNA RD - MYAKKA CITY, FL 34251	47-2413984	501(C)(3)	15,030.	0.			GENERAL SUPPORT
CONGREGATION OF THE SACRED HEARTS PO BOX 668 SAN DIMAS, CA 91773	04-2160533	501(C)(3)	7,483.	0.			GENERAL SUPPORT

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CONQUISTADORE HISTORICAL FOUNDATION INC. - P.O. BOX 1663 - BRADENTON, FL 34206	59-6161989	501(C)(3)	5,613.	0.			GENERAL SUPPORT
CONSERVATION FOUNDATION OF THE GULF COAST - PO BOX 902 - OSPREY, FL 34229-0902	20-0345249	501(C)(3)	199,435.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
CORE SRQ FKA OUR Y INC. 1075 S. EUCLID AVENUE SARASOTA, FL 34237	84-2889884	501(C)(3)	10,349.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CORNELL UNIVERSITY BOX 37334 BOONE, IA 50037	15-0532082	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
CRANBERRY ELEMENTARY SCHOOL 2775 SHALIMAR TERRACE NORTH PORT, FL 34286	59-6000847	501(C)(3)	6,115.	0.			PROGRAM SUPPORT
CREARTE LATINO CULTURAL CENTER CORP - 8251 15TH STREET E, SUITE I - SARASOTA, FL 34243	30-0969540	501(C)(3)	33,604.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CREEKSIDE CHRISTIAN CHURCH, INC. 92 LIFESPRING WAY ST. JOHNS, FL 32259	01-0697890	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
CROSSROADS HOPE ACADEMY INCORPORATED - PO BOX 510267 - PUNTA GORDA, FL 33951	81-5467641	501(C)(3)	44,733.	0.			GENERAL SUPPORT
DEER ISLE SUNSET CONGREGATIONAL CHURCH UCC - PO BOX 292 - DEER ISLE, ME 04627	45-4089930	501(C)(3)	6,900.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

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DENISE AMBER LEE FOUNDATION PO BOX 781 ENGLEWOOD, FL 34295-0781	27-2372559	501(C)(3)	10,424.	0.			GENERAL SUPPORT
DESOTO COUNTY BOARD OF COUNTY COMMISSIONERS - 201 E. OAK STREET, SUITE 201 - ARCADIA, FL 34266	APPLIED FOR	501(C)(3)	7,000.	0.			GENERAL SUPPORT
DIAL HOPE FOUNDATION INC PO BOX 953 SARASOTA, FL 34230	26-4326614	501(C)(3)	17,249.	0.			GENERAL SUPPORT
DIAMOND BOOSTERS, INC. 1 INDIAN AVE. VENICE, FL 34284	65-0781987	501(C)(3)	14,063.	0.			GENERAL SUPPORT
DIOCESE OF SUPERIOR 1201 HUGHITT AVE, PO BOX 969 SUPERIOR, WI 54880	39-0807040	501(C)(3)	6,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
DIOCESE OF VENICE IN FLORIDA INC 1000 PINEBROOK ROAD VENICE, FL 34285	27-1988145	501(C)(3)	46,242.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
DO GOOD FUND, INC. P.O. BOX 1199 COLUMBUS, GA 31902	45-5236209	501(C)(3)	7,000.	0.			PROGRAM SUPPORT
DOCTORS WITHOUT BORDERS USA, INC. P.O. BOX 5030 HAGERSTOWN, MD 21741-5030	13-3433452	501(C)(3)	23,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
DOCUMENTARY EDUCATIONAL RESOURCES INC. - 108 WATER STREET, 5A - WATERTOWN, MA 02472	04-2498206	501(C)(3)	30,000.	0.			PROGRAM SUPPORT

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DOMESTIC AND FOREIGN MISSIONARY SOCIETY OF THE PROTESTANT EPISCOPAL CHURCH - 401 W. HENRY STREET - PUNTA GORDA, FL 33950	13-5562208	501(C)(3)	16,184.	0.			GENERAL SUPPORT
DREAMERS ACADEMY INC 1050 S. TUTTLE AVE SARASOTA, FL 34237	82-2813068	501(C)(3)	9,316.	0.			GENERAL SUPPORT
DUBUQUE HUMANE SOCIETY 4242 CHAVENELLE ROAD DUBUQUE, IA 52002	42-6039535	501(C)(3)	10,000.	0.			GENERAL SUPPORT
EAGLES WINGS COUNSELING CENTER INC 5763 ROSIN WAY SARASOTA, FL 34233	45-2529120	501(C)(3)	6,961.	0.			GENERAL SUPPORT
EARLY LEARNING COALITION OF MANATEE COUNTY INC - 600 8TH AVE W, SUITE 100 - PALMETTO, FL 34221	65-0811318	501(C)(3)	6,547.	0.			GENERAL SUPPORT
EARLY LEARNING COALITION OF SARASOTA COUNTY - 1750 17TH STREET BUILDING L - SARASOTA, FL 34234-8690	65-1110174	501(C)(3)	42,958.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EAST COAST HUMANE SOCIETY INC 4392 POMPANO ROAD VENICE, FL 34293	26-1551120	501(C)(3)	8,335.	0.			GENERAL SUPPORT
EASTER SEALS SOUTHWEST FLORIDA INC 350 BRADEN AVENUE SARASOTA, FL 34243	59-0638490	501(C)(3)	114,649.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EDUCATION FOUNDATION OF SARASOTA COUNTY INC - 1960 LANDINGS BOULEVARD, #120 - SARASOTA, FL 34231-3365	59-2320858	501(C)(3)	125,911.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

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EDUCATIONAL CONSULTANTS CONSORTIUM INC - 1701 3RD AVE. E. - PALMETTO, FL 34221	65-0612497	501(C)(3)	26,141.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EMBRACING OUR DIFFERENCES INC PO BOX 2559 SARASOTA, FL 34230	20-3581293	501(C)(3)	115,909.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EMBRACING OUR DIFFERENCES SE MICHIGAN INC - P.O. BOX 130853 - ANN ARBOR, MI 48113	87-3289021	501(C)(3)	6,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EMMA E. BOOKER ELEMENTARY SCHOOL 2350 DR. MARTIN LUTHER KING WAY SARASOTA, FL 34234	59-6000847	501(C)(3)	59,608.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EMMA WILLARD SCHOOL 285 PAWLING AVENUE TROY, NY 12180	14-1338390	501(C)(3)	21,000.	0.			GENERAL SUPPORT
ENDOWMENT FUND OF TEMPLE EMANU-EL 151 MCINTOSH ROAD SARASOTA, FL 34232	65-0488747	501(C)(3)	5,375.	0.			GENERAL SUPPORT
ENGLEWOOD ANIMAL RESCUE SANCTUARY INC - 500 N. INDIANA AVE. - ENGLEWOOD, FL 34223	59-3647313	501(C)(3)	18,106.	0.			GENERAL SUPPORT
ENGLEWOOD COMMUNITY CARE CLINIC, INC. - PO BOX 189 - ENGLEWOOD, FL 34295-0189	27-1035312	501(C)(3)	6,406.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
ENGLEWOOD HELPING HAND, INC. 700 E. DEARBORN STREET ENGLEWOOD, FL 34223-3506	59-2259063	501(C)(3)	9,421.	0.			GENERAL SUPPORT

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ENGLEWOOD SAILING ASSOCIATION INC 4291 S TAMiami TRAIL #1009 VENICE, FL 34293	76-0707070	501(C)(3)	17,969.	0.			GENERAL SUPPORT
ENSEMBLENEWSRQ PO BOX 15372 SARASOTA, FL 34277	81-0734331	501(C)(3)	27,193.	0.			GENERAL SUPPORT
ENVISION UNLIMITED 8 S. MICHIGAN AVE, STE. 1700 CHICAGO, IL 60603	36-2544178	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
EPILEPSY SERVICES OF SW FLORIDA INC - 1750 17TH ST., BUILDING I-2 - SARASOTA, FL 34234	59-3281492	501(C)(3)	22,229.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EPIPHANY CATHOLIC SCHOOL 316 SARASOTA STREET VENICE, FL 34285	59-1346327	501(C)(3)	37,883.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
EQUALITY FLORIDA INSTITUTE, INC. P.O. BOX 13184 ST. PETERSBURG, FL 33733	59-3435235	501(C)(3)	46,669.	0.			GENERAL SUPPORT
ESCUELAS HERMANAS INC DBA SISTER SCHOOLS - 1124 135TH ST NE - BRADENTON, FL 34212	47-5070717	501(C)(3)	11,728.	0.			GENERAL SUPPORT
EVANGELISM INTERNATIONAL, INC. PO BOX 64893 VIRGINIA BEACH, VA 23467	26-2644218	501(C)(3)	37,500.	0.			CAPITAL PURCHASES
EVERY CHILD INC 959 POMELLO PLACE SARASOTA, FL 34236	65-1035374	501(C)(3)	10,636.	0.			GENERAL SUPPORT

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EXCHANGE CLUB FAMILY PARTNERSHIP CENTER OF MANATEE COUNTY, INC. DBA PARENTI - 602 3RD ST E - BRADENTON, FL 34208	65-0374386	501(C)(3)	24,361.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
FACE AUTISM 5610 74TH PLACE EAST ELLENTON, FL 34222-4058	26-1141761	501(C)(3)	9,486.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FAIRVIEW HOSPITAL 29 LEWIS AVENUE GREAT BARRINGTON, MA 01230	04-2133860	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
FAMILY LIFE COMMUNITY SCHOOL INC P.O. BOX 468 PARRISH, FL 34219	65-0822381	501(C)(3)	12,867.	0.			GENERAL SUPPORT
FAMILY PROMISE OF SARASOTA INC 8499 TAMIA MI TRL PMB 267 SARASOTA, FL 34238	20-5058968	501(C)(3)	41,268.	0.			GENERAL SUPPORT
FAMILY PROMISE OF SOUTH SARASOTA COUNTY - 850 COCKRILL STREET - VENICE, FL 34285-3511	46-4906213	501(C)(3)	316,688.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
FAMILY RESOURCES, INC. 5180 62ND AVENUE NORTH PINELLAS PARK, FL 33781-5600	23-7146873	501(C)(3)	17,286.	0.			GENERAL SUPPORT
FARMHOUSE ANIMAL & NATURE SANCTUARY INC - 2807 DUETTE RD - MYAKKA CITY, FL 34251	82-3481291	501(C)(3)	17,045.	0.			GENERAL SUPPORT
FEEDING EMPTY LITTLE TUMMIES INC 901 8TH AVENUE WEST PALMETTO, FL 34221	45-2898383	501(C)(3)	41,589.	0.			GENERAL SUPPORT

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FELINE FRIENDS OF SOUTHWEST FLORIDA - P.O. BOX 17998 - SARASOTA, FL 34276-0901	83-1928963	501(C)(3)	27,996.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES DBA GULF COAST FCA - GULF COAST FCA, 1728 S LAKESIDE CT - VENICE, FL 34293	44-0610626	501(C)(3)	43,288.	0.			GENERAL SUPPORT
FENWICK HIGH SCHOOL 505 WASHINGTON BLVD OAK PARK, IL 60302	36-1066828	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
FINE ARTS SOCIETY OF SARASOTA INC PO BOX 1432 SARASOTA, FL 34230-1432	23-7098475	501(C)(3)	18,784.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
FIRST PRESBYTERIAN CHURCH 2050 OAK STREET SARASOTA, FL 34237	23-6393377	501(C)(3)	12,809.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH - ASHEVILLE - 40 CHURCH STREET - ASHEVILLE, NC 28801	23-6393377	501(C)(3)	11,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FIRST STEP OF SARASOTA INC 4579 NORTHGATE COURT SARASOTA, FL 34234	59-1304472	501(C)(3)	22,800.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FISHER HOUSE FOUNDATION INC 12300 TWINBROOK PKWY, SUITE 410 ROCKVILLE, MD 20852-1650	11-3158401	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FIVE PEARLS OF EXCELLENCE 519 SAND CRANE CT BRADENTON, FL 34212	45-1596509	501(C)(3)	10,090.	0.			GENERAL SUPPORT

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FLORIDA BAPTIST CHILDREN'S HOMES, INC. - P.O. BOX 8190 - LAKE LAND, FL 33802-8190	59-0657326	501(C)(3)	20,724.	0.			GENERAL SUPPORT
FLORIDA CANCER SPECIALISTS FOUNDATION, INC. - 5985 SILVER FALLS RUN STE 210 - BRADENTON, FL 34211	20-4616813	501(C)(3)	18,968.	0.			GENERAL SUPPORT
FLORIDA CHRISTIAN HOMES SENIOR HOUSING INC DBA WATER'S EDGE OF BRADENTON - 2015 32ND STREET W - BRADENTON, FL 34205	41-1832101	501(C)(3)	7,269.	0.			GENERAL SUPPORT
FLORIDA COALITION ON DONATION, INC. DBA DONATE LIFE FLORIDA - 3200 US 27 SOUTH, SUITE 402 - SEBRING, FL 33870	20-1169939	501(C)(3)	34,997.	0.			GENERAL SUPPORT
FLORIDA CULTURAL GROUP, INC. DBA MANATEE PERFORMING ARTS CENTER - 502 THIRD AVENUE WEST - BRADENTON, FL 34205	59-1196043	501(C)(3)	170,465.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FLORIDA HOLOCAUST MUSEUM 55 FIFTH STREET SOUTH ST. PETERSBURG, FL 33701-4146	59-2981494	501(C)(3)	17,046.	0.			GENERAL SUPPORT
FLORIDA INSTITUTE FOR SALTWATER HERITAGE INC - 4428 119TH ST W #339 - CORTEZ, FL 34215-0606	65-0272644	501(C)(3)	25,624.	0.			GENERAL SUPPORT
FLORIDA OCEANOGRAPHIC SOCIETY INC. 890 NORTHEAST OCEAN BLVD. STUART, FL 34996	59-1114306	501(C)(3)	11,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FLORIDA POLICY INSTITUTE 1001 N. ORANGE AVE. ORLANDO, FL 32801	47-2759708	501(C)(3)	6,500.	0.			GENERAL SUPPORT

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FLORIDA POODLE RESCUE P.O. BOX 7336 ST. PETERSBURG, FL 33734-7336	59-3545425	501(C)(3)	41,951.	0.			GENERAL SUPPORT
FLORIDA RESCUE FARM INC 39610 CARLTON RD PARRISH, FL 34219-6823	47-2475489	501(C)(3)	14,182.	0.			GENERAL SUPPORT
FLORIDA SHERIFFS YOUTH RANCHES INC PO BOX 2000 BOYS RANCH, FL 32064	23-7303117	501(C)(3)	72,559.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FLORIDA STATE UNIVERSITY FOUNDATION, INC. - 325 W. COLLEGE AVENUE - TALLAHASSEE, FL 32301-1403	59-6152180	501(C)(3)	5,400.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FLORIDA STUDIO THEATRE INC. 1241 N. PALM AVENUE SARASOTA, FL 34236	23-7362760	501(C)(3)	265,770.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FLORIDA VETERANS FOR COMMON SENSE FUND INC - PO BOX 2311 - SARASOTA, FL 34230	26-1484285	501(C)(3)	21,139.	0.			GENERAL SUPPORT
FOLDS OF HONOR FOUNDATION DEPARTMENT #13 TULSA, OK 74182	75-3240683	501(C)(3)	10,300.	0.			GENERAL SUPPORT
FOOD ADDICTION INSTITUTE INC (FKA LOUISVILLE FUND FOR ADULT CHILDREN) - PO BOX 51261 - SARASOTA, FL 34232-0331	61-1203757	501(C)(3)	22,520.	0.			GENERAL SUPPORT
FORDHAM UNIVERSITY P.O. BOX 417762 BOSTON, MA 02241	13-1740451	501(C)(3)	32,500.	0.			PROGRAM SUPPORT

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FORGET-ME-NOT INC 5223 26TH ST WEST BRADENTON, FL 34207	46-3101100	501(C)(3)	10,189.	0.			GENERAL SUPPORT
FORTY CARROTS FAMILY CENTER 1500 S. TUTTLE AVENUE SARASOTA, FL 34239	65-0405988	501(C)(3)	174,333.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
FOUNDATION FOR DREAMS, INC. 16110 DREAM OAKS PLACE BRADENTON, FL 34212	65-0704986	501(C)(3)	13,408.	0.			GENERAL SUPPORT
FOUNDATION FOR FLORIDA GATEWAY COLLEGE, INC. - 149 SE COLLEGE PLACE - LAKE CITY, FL 32025	59-1627997	501(C)(3)	60,000.	0.			SCHOLARSHIP SUPPORT
FOUNDATIONS INC. 701 EAST GATE DRIVE, SUITE 300 MT. LAUREL, NJ 08054	52-1801849	501(C)(3)	44,875.	0.			PROGRAM SUPPORT
FOX FOSTER KITTENS INC 2618 STRATFORD DRIVE SARASOTA, FL 34232	82-4002822	501(C)(3)	44,284.	0.			GENERAL SUPPORT
FRIENDS OF AMANI US, INC. 11 SOUTH MAIN STREET SUITE 501 CONCORD, NH 03301	27-3621599	501(C)(3)	24,600.	0.			GENERAL SUPPORT
FRIENDS OF ARTS & HUMANITIES, INC. DBA DESIGNING WOMEN BOUTIQUE - 1226 N TAMIAMI TRL SUITE 101 - SARASOTA, FL 34236-2461	02-0592364	501(C)(3)	14,242.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FRIENDS OF LITTLE SALT SPRING INC. PO BOX 7227 NORTH PORT, FL 34290	45-5082640	501(C)(3)	6,016.	0.			GENERAL SUPPORT

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FRIENDS OF MANATEE COUNTY ANIMAL SERVICES - 3230 EAST BAY DR #316 - HOLMES BEACH, FL 34217	81-4062317	501(C)(3)	23,690.	0.			GENERAL SUPPORT
FRIENDS OF MYAKKA RIVER, INC. 13208 STATE ROAD 72 SARASOTA, FL 34241	65-0448875	501(C)(3)	35,652.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FRIENDS OF ROCKY BLUFF LIBRARY P O BOX 133 ELLENTON, FL 34222	65-0548294	501(C)(3)	8,116.	0.			GENERAL SUPPORT
FRIENDS OF SARASOTA COUNTY PARKS INC - 234 NIPPINO TRAIL E UNIT 101 - NOKOMIS, FL 34275	45-0522194	501(C)(3)	17,529.	0.			GENERAL SUPPORT
FRIENDS OF SHANNON STAUB PUBLIC LIBRARY, INC. - P.O. BOX 7403 - NORTH PORT, FL 34290	47-5062036	501(C)(3)	8,025.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FRIENDS OF THE BRADEN RIVER LIBRARY, INC. - 4915 53RD AVENUE EAST - BRADENTON, FL 34203	65-0099691	501(C)(3)	5,452.	0.			GENERAL SUPPORT
FRIENDS OF THE EAST MANATEE LIBRARY AT LAKEWOOD RANCH - P.O. BOX 110221 - LAKEWOOD RANCH, FL 34211-0003	83-2152443	501(C)(3)	15,119.	0.			GENERAL SUPPORT
FRIENDS OF THE FLORIDA MARITIME MUSEUM - P.O. BOX 100 - CORTEZ, FL 34215-0100	45-4937212	501(C)(3)	12,268.	0.			GENERAL SUPPORT
FRIENDS OF THE LEGACY TRAIL, INC. PO BOX 792 OSPREY, FL 34229-0792	81-3060109	501(C)(3)	31,659.	0.			GENERAL SUPPORT

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FRIENDS OF THE PELICANS INC PO BOX 15076 BRADENTON, FL 34209-3102	30-1011601	501(C)(3)	10,450.	0.			GENERAL SUPPORT
FRIENDS OF THE PORT CHARLOTTE LIBRARY ASSOCIATION INC. - 2280 AARON ST. - PORT CHARLOTTE, FL 33952	23-7427363	501(C)(3)	5,500.	0.			GENERAL SUPPORT
FRUITVILLE ELEMENTARY SCHOOL PTO 601 HONORE AVENUE SARASOTA, FL 34232	55-0857253	501(C)(3)	10,534.	0.			GENERAL SUPPORT
FSU/ASOLO CONSERVATORY FOR ACTOR TRAINING - 5555 N. TAMIAMI TRAIL - SARASOTA, FL 34243	59-6152180	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
FUNDUCATION, INC. 11161 EAST STATE ROAD 70, SUITE 110 LAKEWOOD RANCH, FL 34202	83-4704098	501(C)(3)	35,907.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GALATIANS 6-2 INC DBA AVENUE941 518 13TH STREET WEST BRADENTON, FL 34205	65-0729731	501(C)(3)	10,168.	0.			GENERAL SUPPORT
GALATIANS 6-2 INC DBA GOD RAISING INCREDIBLE PARENTS - 2895 ASHTON ROAD - SARASOTA, FL 34231	65-0729731	501(C)(3)	5,148.	0.			GENERAL SUPPORT
GALATIANS 6-2 INC DBA HOPE 4 COMMUNITIES - 518 13TH STREET W - BRADENTON, FL 34205	65-0729731	501(C)(3)	102,459.	0.			GENERAL SUPPORT
GAMMA XI BOULE FOUNDATION, INC. P.O. BOX 20117 BRADENTON, FL 34204	59-3711858	501(C)(3)	11,688.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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GATOR WILDERNESS CAMP SCHOOL 44930 FARABEE ROAD PUNTA GORDA, FL 33982-9536	65-0704638	501(C)(3)	44,349.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
GENTLE SOULS HORSE SANCTUARY INC 1996 SE PIGGYBACK RD ARCADIA, FL 34266-4350	45-4685931	501(C)(3)	7,004.	0.			GENERAL SUPPORT
GHANAIAI MOTHERS HOPE, INC. 5718 BEAURIVAGE AVENUE SARASOTA, FL 34243-2866	20-3770294	501(C)(3)	16,829.	0.			GENERAL SUPPORT
GIRL SCOUTS OF GULFCOAST FLORIDA INC - 4780 CATTLEMEN ROAD - SARASOTA, FL 34233	59-0760212	501(C)(3)	39,683.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
GIRLS INCORPORATED OF SARASOTA COUNTY - 201 S. TUTTLE AVENUE - SARASOTA, FL 34237-6333	23-7363275	501(C)(3)	123,997.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GIRLS ON THE RUN OF SOUTHWEST FLORIDA - 616 POSADAS CIR. - PUNTA GORDA, FL 33983	45-5346080	501(C)(3)	18,072.	0.			GENERAL SUPPORT
GLASSER-SCHOENBAUM HUMAN SERVICES CENTER - 1750 17TH STREET, BUILDING J-1 - SARASOTA, FL 34234-8666	59-2707877	501(C)(3)	1,553,061.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
GLENRIDGE CHARITABLE FOUNDATION, INC. - 7333 SCOTLAND WAY - SARASOTA, FL 34238	81-2990180	501(C)(3)	10,000.	0.			GENERAL SUPPORT
GLOBAL OUTREACH INC 7326 WINDEMERE LANE UNIVERSITY PARK, FL 34201	20-2247890	501(C)(3)	26,652.	0.			GENERAL SUPPORT

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GLOBAL SERVE INTERNATIONAL INC 2102 SW 47TH ST. CAPE CORAL, FL 33914	82-1585100	501(C)(3)	29,846.	0.			GENERAL SUPPORT
GO-PHER GREEN INC DBA BOCILLA ISLANDS CONSERVANCY - PO BOX 881 - PLACIDA, FL 33946	81-1139087	501(C)(3)	17,024.	0.			GENERAL SUPPORT
GOCIO ELEMENTARY SCHOOL 3450 GOCIO ROAD SARASOTA, FL 34235	59-6000847	501(C)(3)	54,046.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
GOOD SAMARITAN PHARMACY & HEALTH SERVICES INC - 2502 TAMIAMI TRL N - NOKOMIS, FL 34275	26-2295558	501(C)(3)	7,759.	0.			GENERAL SUPPORT
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH, INC. - 5659 HONORE AVE. - SARASOTA, FL 34233	59-2170050	501(C)(3)	87,799.	0.			GENERAL SUPPORT
GOODWILL INDUSTRIES MANASOTA INC 2705 51ST AVE EAST BRADENTON, FL 34203	59-2074391	501(C)(3)	8,888.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GOTTA VAN PRODUCTIONS INC. (DBA SARASOLO PRODUCTIONS) - PO BOX 3102 - SARASOTA, FL 34230	47-1576293	501(C)(3)	15,512.	0.			GENERAL SUPPORT
GRAMBLING UNIVERSITY FOUNDATION, INC. - 403 MAIN STREET - GRAMBLING, LA 71245	05-0624523	501(C)(3)	5,600.	0.			SCHOLARSHIP SUPPORT
GREATER SARASOTA CHAMBER OF COMMERCE FOUNDATION INC - 1945 FRUITVILLE ROAD - SARASOTA, FL 34236-4203	26-1563145	501(C)(3)	17,593.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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GREATER TWIN CITIES UNITED WAY PO BOX 856213 MINNEAPOLIS, MN 55485	41-1973442	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
GUARDIAN ANGELS OF SW FLORIDA INC 1429 60TH AVE. W., SUITE 200 BRADENTON, FL 34207	02-0763545	501(C)(3)	31,448.	0.			GENERAL SUPPORT
GUERRILLA CARTOGRAPHY P.O. BOX 18744 OAKLAND, CA 94619	47-3496913	501(C)(3)	13,500.	0.			PROGRAM SUPPORT
GUITAR SARASOTA, INC. P.O. BOX 2498 SARASOTA, FL 34230	65-1269091	501(C)(3)	7,313.	0.			GENERAL SUPPORT
GULF COAST COMMUNITY FOUNDATION 601 TAMIAMI TRAIL SOUTH VENICE, FL 34285	59-1052433	501(C)(3)	100,000.	0.			PROGRAM SUPPORT
GULF COAST FLUTE CHOIR, INC. P.O. BOX 14685 BRADENTON, FL 34280-4685	46-3830642	501(C)(3)	6,027.	0.			GENERAL SUPPORT
GULF COAST ITALIAN CULTURE SOCIETY INC - P.O. BOX 2591 - SARASOTA, FL 34230	65-0369121	501(C)(3)	9,165.	0.			GENERAL SUPPORT
GULF COAST MENS CHORUS D/B/A DIVERSITY: THE VOICES OF SARASOTA - PO BOX 2453 - SARASOTA, FL 34230-2453	65-0811862	501(C)(3)	24,247.	0.			GENERAL SUPPORT
GULF COAST STATE COLLEGE FOUNDATION, INC. - 5230 WEST HIGHWAY 98, ENROLLMENT SERVICES BUILDING #129 - PANAMA CITY, FL	59-1682455	501(C)(3)	100,000.	0.			SCHOLARSHIP SUPPORT

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GULF SHORE ANIMAL LEAGUE P.O. BOX 14291 BRADENTON, FL 34280-4291	81-0586833	501(C)(3)	7,205.	0.			GENERAL SUPPORT
GULFCOAST LEGAL SERVICES INC 501 FIRST AVE NORTH SUITE 420 ST. PETERSBURG, FL 33701	59-1882749	501(C)(3)	27,456.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GULFCOAST SOUTH AREA HEALTH EDUCATION CENTER, INC. - 2201 CANTU CT STE 220 - SARASOTA, FL 34232	59-3342312	501(C)(3)	6,618.	0.			GENERAL SUPPORT
H. LEE MOFFITT CANCER CENTER AND RESEARCH INSTITUTE FOUNDATION INC. - 12902 MAGNOLIA DRIVE - TAMPA, FL 33612	59-3238636	501(C)(3)	113,983.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HABITAT FOR HUMANITY SARASOTA INC 1757 NORTH EAST AVENUE SARASOTA, FL 34234	59-2495597	501(C)(3)	47,882.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HABITAT FOR HUMANITY SOUTH SARASOTA COUNTY, INC. - 280 ALLIGATOR DRIVE - VENICE, FL 34293	65-0326534	501(C)(3)	25,802.	0.			GENERAL SUPPORT
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA, INC. - 40 WALL STREET - NEW YORK, NY 10005	13-1656651	501(C)(3)	10,616.	0.			GENERAL SUPPORT
HAND UP TO VICTORY PO BOX 991 ELLENTON, FL 34222	82-3082401	501(C)(3)	36,763.	0.			GENERAL SUPPORT
HARRIS-STOWE FOUNDATION, INC. 3026 LACLEDE AVENUE, ROOM 110 SAINT LOUIS, MO 63103	43-1631601	501(C)(3)	5,600.	0.			SCHOLARSHIP SUPPORT

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HARRY CHAPIN FOOD BANK OF SOUTHWEST FLORIDA, INC. - 3760 FOWLER STREET - FT. MYERS, FL 33901	59-2332120	501(C)(3)	19,282.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HARVEST TABERNACLE OF SARASOTA D/B/A HARVEST HOUSE TRANSITIONAL CENTERS - 3650 17TH ST. - SARASOTA, FL 34235	59-2186807	501(C)(3)	154,336.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HARVESTING IN SPANISH P.O. BOX 331012 MURFREESBORO, TN 37133	84-0832744	501(C)(3)	20,000.	0.			CAPITAL PURCHASES
HARVEY MILK FESTIVAL SARASOTA 1342 17TH ST SARASOTA, FL 34234-8423	27-4013351	501(C)(3)	5,616.	0.			GENERAL SUPPORT
HEALING ROOMS OF MANATEE 4535 26TH ST W BRADENTON, FL 34207	46-1459324	501(C)(3)	5,696.	0.			GENERAL SUPPORT
HEALTHY START COALITION OF SARASOTA COUNTY INC - 1750 17TH STREET BLDG A - SARASOTA, FL 34234-8666	31-1591167	501(C)(3)	17,610.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HEALTHY TEENS COALITION OF MANATEE COUNTY INC - 1023 MANATEE AVE W, SUITE 210 - BRADENTON, FL 34205-7816	45-0990646	501(C)(3)	14,463.	0.			GENERAL SUPPORT
HERMITAGE ARTIST RETREAT INC 6630 MANASOTA KEY ROAD ENGLEWOOD, FL 34223	30-0104608	501(C)(3)	166,674.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HERSHORIN SCHIFF DAY SCHOOLS OF TOMORROW INC DBA HERSHORIN SCHIFF COMMUNITY - 4335 WILKINSON ROAD - SARASOTA, FL 34233	47-3558984	501(C)(3)	49,005.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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HIGH RISK HOPE INC 1320 E 9TH AVE, 2ND FLOOR TAMPA, FL 33605	27-5129716	501(C)(3)	21,216.	0.			GENERAL SUPPORT
HILLSDALE COLLEGE 33 E. COLLEGE STREET HILLSDALE, MI 49242-9989	38-1374230	501(C)(3)	16,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HIS HELPING HANDS MINISTRIES INC DBA HIS GIRL'S DISCIPLESHIP - PO BOX 14582 - BRADENTON, FL 34280	46-3995873	501(C)(3)	39,088.	0.			GENERAL SUPPORT
HISTORICAL SOCIETY OF SARASOTA COUNTY - PO BOX 1632 - SARASOTA, FL 34230	59-6169574	501(C)(3)	29,138.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HOLY FAMILY CATHOLIC SCHOOLS 2005 KANE STREET DUBUQUE, IA 52001	42-0792429	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
HONOR SANCTUARY INC DBA HONOR ANIMAL RESCUE - 4951 LORRAINE RD - BRADENTON, FL 34211	26-0878064	501(C)(3)	143,656.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HOPE FAMILY SERVICES INC P.O. BOX 1624 BRADENTON, FL 34206	59-1970241	501(C)(3)	19,763.	0.			GENERAL SUPPORT
HOPE SEEDS, INC. 4625 26TH STREET WEST BRADENTON, FL 34207	65-0911582	501(C)(3)	24,846.	0.			GENERAL SUPPORT
HORIZONS UNLIMITED CHRISTIAN ACADEMY, INC. - 2674 DR. M. L. KING JR WAY - SARASOTA, FL 34234-6344	14-1879521	501(C)(3)	21,392.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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HOWARD CLUB OF SOUTHWEST FLORIDA PO BOX 31 TALLEVAST, FL 34270	16-1776367	501(C)(3)	20,481.	0.			GENERAL SUPPORT
HUMANE SOCIETY AT LAKEWOOD RANCH INC - 26920 GOPHER HILL RD - MYAKKA CITY, FL 34251	27-3937966	501(C)(3)	46,271.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HUMANE SOCIETY OF MANATEE COUNTY INC - 2515 14TH STREET WEST - BRADENTON, FL 34205	59-1819652	501(C)(3)	51,210.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HUMANE SOCIETY OF SARASOTA COUNTY INC - 2331 15TH STREET - SARASOTA, FL 34237-2909	59-6014943	501(C)(3)	255,668.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HUNGERS END INC P.O. BOX 742 PALMETTO, FL 34220	47-3038591	501(C)(3)	10,315.	0.			GENERAL SUPPORT
IMAGINE SCHOOL AT NORTH PORT 1000 INNOVATION AVE. NORTH PORT, FL 34289	20-3590526	501(C)(3)	11,718.	0.			GENERAL SUPPORT
IMAGINE SCHOOLS NON-PROFIT INC DBA IMAGINE - EAST MANATEE COUNTY - 10535 PORTAL CROSSING - BRADENTON, FL 34211	20-3590526	501(C)(3)	6,691.	0.			GENERAL SUPPORT
IMAGINE SCHOOLS NON-PROFIT INC DBA IMAGINE SCHOOL AT PALMER RANCH - 6220 MCINTOSH RD. - SARASOTA, FL 34238-2965	20-3590526	501(C)(3)	7,318.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT
IMPACT 100 SRQ, INC. PO BOX 49887 SARASOTA, FL 34230	82-1754541	501(C)(3)	11,930.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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IN THE PINK BOUTIQUE INC. 1727 FRUITVILLE ROAD SARASOTA, FL 34236	26-4471182	501(C)(3)	10,688.	0.			GENERAL SUPPORT
INCARNATION CATHOLIC SCHOOL 2911 BEE RIDGE RD. SARASOTA, FL 34239-7118	59-1318386	501(C)(3)	31,368.	0.			GENERAL SUPPORT
INCLUSION REVOLUTION INC 111 SOUTH PINEAPPLE AVE, SUITE 601 SARASOTA, FL 34236	84-3132691	501(C)(3)	10,068.	0.			GENERAL SUPPORT
INNER EXPLORER INC 430 FRANKLIN VILLAGE DRIVE, #325 FRANKLIN, MA 02038	45-2395336	501(C)(3)	43,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
INSIGHT COUNSELING SERVICES INC 351 6TH AVENUE W BRADENTON, FL 34205-8820	65-1023414	501(C)(3)	12,689.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
INSTITUTE ON RELIGION & DEMOCRACY 1023 15TH ST. NW, STE. 200 WASHINGTON, DC 20005-2601	52-1265221	501(C)(3)	7,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
INTERLOCHEN CENTER FOR THE ARTS PO BOX 199 INTERLOCHEN, MI 49643	38-1689022	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
INTERNATIONAL RESCUE COMMITTEE, INC. - PO BOX 6068 - ALBERT LEA, MN 56007-9847	13-5660870	501(C)(3)	12,625.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ISLAND VILLAGE MONTESSORI CHARTER SCHOOL, INC. - 2001 PINEBROOK ROAD - VENICE, FL 34292	65-1067095	501(C)(3)	24,633.	0.			GENERAL SUPPORT

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IT'S OUR TURN, INC. 26284 HONG KONG RD. PUNTA GORDA, FL 33983	37-1770252	501(C)(3)	6,000.	0.			GENERAL SUPPORT
IVY FOUNDATION, INC. P.O. BOX 9484 BRADENTON, FL 34206-9484	56-2537578	501(C)(3)	16,547.	0.			GENERAL SUPPORT
J316 MINISTRIES INC 298 43RD ST W BRADENTON, FL 34209	80-0373696	501(C)(3)	13,022.	0.			GENERAL SUPPORT
J5 EXPERIENCE, INC. P.O. BOX 231 TALLEVAST, FL 34270-0121	82-2991546	501(C)(3)	8,310.	0.			GENERAL SUPPORT
JAZZ CLUB OF SARASOTA, INC. 330 PINEAPPLE AVENUE, #111 SARASOTA, FL 34236	59-1997114	501(C)(3)	51,000.	0.			GENERAL SUPPORT
JERSEY COUNTY HISTORICAL SOCIETY 601 NORTH STATE STREET JERSEYVILLE, IL 62052	51-0153238	501(C)(3)	28,930.	0.			GENERAL SUPPORT
JESUS LOVES YOU MINISTRY INC P.O. BOX 380275 MURDOCK, FL 33938	26-1128961	501(C)(3)	14,551.	0.			GENERAL SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE OF THE SUNCOAST, INC. - 2688 FRUITVILLE ROAD - SARASOTA, FL 34237-5223	59-2693318	501(C)(3)	122,322.	0.			CAPITAL PURCHASES, EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
JEWISH NATIONAL FUND -KEREN KAYEMETH LEISRAEL, INC. - 78 RANDALL AVENUE - ROCKVILLE CENTER, NY 11570	13-1659627	501(C)(3)	7,416.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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JOHN & MABLE RINGLING MUSEUM OF ART FOUNDATION - 5401 BAY SHORE ROAD - SARASOTA, FL 34243	59-6214423	501(C)(3)	117,520.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
JOHNS HOPKINS ALL CHILDREN'S HOSPITAL FOUNDATION, INC. - PO BOX 3142 - ST. PETERSBURG, FL 33731-3142	59-2481738	501(C)(3)	8,962.	0.			GENERAL SUPPORT
JOSH PROVIDES EPILEPSY ASSISTANCE FOUNDATION, INC. - 5428 SUNDEW DRIVE - SARASOTA, FL 34238	46-2322505	501(C)(3)	22,039.	0.			GENERAL SUPPORT
JUDICIAL WATCH, INC. P.O. BOX 96234 WASHINGTON, DC 20090	52-1885088	501(C)(3)	10,200.	0.			GENERAL SUPPORT
JUNIOR LEAGUE OF SARASOTA, INC. 3300 S. TAMiami TRAIL, #3 SARASOTA, FL 34239-5100	59-6159037	501(C)(3)	67,090.	0.			GENERAL SUPPORT
KENTUCKY STATE TREASURER 500 MERO STREET, 218 NC FRANKFORT, KY 40601	APPLIED FOR	501(C)(3)	60,000.	0.			PROGRAM SUPPORT
KENTUCKY STATE UNIVERSITY FOUNDATION INC. - 400 EAST MAIN STREET, HUME HALL, SUITE 102 - FRANKFORT, KY 40601	23-7351574	501(C)(3)	16,800.	0.			SCHOLARSHIP SUPPORT
KEY CHORALE, INC. 1233-C SOUTH TAMiami TRAIL SARASOTA, FL 34239-2208	59-2779200	501(C)(3)	49,189.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
KIDS NEEDS - GREATER ENGLEWOOD FL INC - PO BOX 3203 - PLACIDA, FL 33946	35-2361844	501(C)(3)	6,081.	0.			GENERAL SUPPORT

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KIWANIS CLUB OF BRADENTON FOUNDATION, INC. - PO BOX 1032 - BRADENTON, FL 34206-1032	65-0221660	501(C)(3)	10,853.	0.			GENERAL SUPPORT
LA MUSICA DI ASOLO, INC. P.O. BOX 5442 SARASOTA, FL 34277-5442	65-0005948	501(C)(3)	15,654.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LAKEWOOD RANCH BAND BOOSTERS ASSOCIATION - PO BOX 110354 - LAKEWOOD RANCH, FL 34211	65-0861794	501(C)(3)	23,569.	0.			GENERAL SUPPORT
LAUREL CIVIC ASSOCIATION, INC. PO BOX 511 LAUREL, FL 34272	65-0187752	501(C)(3)	14,176.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LEADERSHIP FLORIDA STATEWIDE COMMUNITY FOUNDATION INC. - 3500 FINANCIAL PLAZA SUITE 300 - TALLAHASSEE, FL 32312	59-3201445	501(C)(3)	63,139.	0.			GENERAL SUPPORT
LEADSRO INC 1650 KEELY LN SARASOTA, FL 34232-3061	82-0692237	501(C)(3)	11,990.	0.			GENERAL SUPPORT
LEAGUE OF WOMEN VOTERS OF SARASOTA COUNTY EDUCATION FUND INC - PO BOX 18884 - SARASOTA, FL 34276	59-2514085	501(C)(3)	10,457.	0.			GENERAL SUPPORT
LEARN MY HISTORY FOUNDATION PO BOX 3333 SARASOTA, FL 34230-3333	20-5794552	501(C)(3)	5,936.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LEE & BOB PETERSON FOUNDATION, INC. - P.O. BOX 49201 - SARASOTA, FL 34230	83-3723361	501(C)(3)	18,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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LEGAL AID OF MANASOTA, INC. 1900 MAIN ST STE 302 SARASOTA, FL 34236-5927	65-0265426	501(C)(3)	44,647.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LEMON BAY CONSERVANCY 1765 MANOR ROAD, SUITE A ENGLEWOOD, FL 34223-4974	59-6510980	501(C)(3)	24,981.	0.			GENERAL SUPPORT
LEMON BAY GARDEN CLUB INC PO BOX 1176 ENGLEWOOD, FL 34295	59-6169744	501(C)(3)	6,341.	0.			GENERAL SUPPORT
LEMUR CONSERVATION FOUNDATION PO BOX 249 MYAKKA CITY, FL 34251-0241	59-3359549	501(C)(3)	37,017.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LIBRARY FOUNDATION FOR SARASOTA COUNTY, INC. - P.O. BOX 17903 - SARASOTA, FL 34276	45-2585429	501(C)(3)	281,986.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
LIBRARY FOUNDATION, INC. DBA MANATEE COUNTY PUBLIC LIBRARY FOUNDATION - 1301 BARCARROTA BLVD W - BRADENTON, FL 34205-7599	59-2590387	501(C)(3)	5,652.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LIGHT OF THE WORLD INTERNATIONAL CHURCH - P.O. BOX 1594 - SARASOTA, FL 34230	83-0499021	501(C)(3)	11,000.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
LINKS TO SUCCESS P.O. BOX 864 ARCADIA, FL 34265	45-3572522	501(C)(3)	17,428.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LITERACY COUNCIL OF MANATEE COUNTY, INC. - 3501 CORTEZ ROAD W STE 6 - BRADENTON, FL 34210-3196	59-2116479	501(C)(3)	31,066.	0.			GENERAL SUPPORT

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LITERACY VOLUNTEERS OF AMERICA OF SOUTH SARASOTA COUNTY - 300 NOKOMIS AVE S. - VENICE, FL 34285-2416	65-0174475	501(C)(3)	13,409.	0.			GENERAL SUPPORT
LIVING 127, INC. 3538 MINEOLA DR. SARASOTA, FL 34239	46-2023497	501(C)(3)	14,720.	0.			GENERAL SUPPORT
LONGBOAT KEY CENTER FOR HEALTHY LIVING INC (DBA THE PARADISE CENTER) - 546 BAY ISLES ROAD - LONGBOAT KEY, FL 34228	35-2548455	501(C)(3)	57,541.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LONGBOAT KEY FOUNDATION, INC. PO BOX 8297 LONGBOAT KEY, FL 34228	84-3913302	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
LOST PET SERVICES INC 6905 29TH AVE W BRADENTON, FL 34209-5903	81-5401994	501(C)(3)	40,803.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST - 1266 FIRST STREET, SUITE 1 - SARASOTA, FL 34236	14-6285967	501(C)(3)	83,175.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LOVELAND CENTER, INC. 157 SOUTH HAVANA ROAD VENICE, FL 34292-3104	59-1011392	501(C)(3)	100,909.	0.			GENERAL SUPPORT
LOVING HANDS MINISTRIES INC PO BOX 1157 BRADENTON, FL 34206	59-2573982	501(C)(3)	139,637.	0.			GENERAL SUPPORT
LOW RIDER DACHSHUND RESCUE OF FLORIDA, INC - 13435 S. MCCALL ROAD #16, BOX 135 - PORT CHARLOTTE, FL 33981	82-1295650	501(C)(3)	15,590.	0.			GENERAL SUPPORT

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LOYOLA ACADEMY 1100 LARAMIE AVENUE WILMETTE, IL 60091	36-2367981	501(C)(3)	22,000.	0.			PROGRAM SUPPORT
LSU ALUMNI ASSOCIATION 3838 W LAKESHORE DR BATON ROUGE, LA 70808	72-6027430	501(C)(3)	20,000.	0.			SCHOLARSHIP SUPPORT
LUPUS RESEARCH ALLIANCE, INC. 270 MADISON AVENUE, SUITE 300 NEW YORK, NY 10016	58-2492929	501(C)(3)	22,000.	0.			GENERAL SUPPORT
LUTHERAN SERVICES FLORIDA, INC. 3627 W. WATERS AVE TAMPA, FL 33614	59-2198911	501(C)(3)	25,406.	0.			GENERAL SUPPORT
LUTHERAN SOCIAL SERVICES OF THE NATIONAL CAPITAL AREA INC. - 1730 RHODE ISLAND AVE NW, SUITE 712 - WASHINGTON, DC 20036	53-0207407	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
MADONNA OF THE STREETS INC DBA ST. LUKE'S MISSION OF MERCY - PO BOX 448 - BUFFALO, NY 14215	16-1433964	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
MAKE A WISH FOUNDATION OF SOUTHERN FLORIDA SUNCOAST REGIONAL OFFICE - 3430 MAGIC OAK LANE - SARASOTA, FL 34232-1812	59-2620322	501(C)(3)	9,497.	0.			GENERAL SUPPORT
MAKING AN IMPACT INC 11161 EAST STATE ROAD 70, SUITE 110 LAKEWOOD RANCH, FL 34202	85-0834801	501(C)(3)	7,073.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANA-SOTA LIGHTHOUSE FOR THE BLIND INC DBA LIGHTHOUSE VISION LOSS EDUCATION - 7318 N. TAMiami TRAIL - SARASOTA, FL 34243	59-2591136	501(C)(3)	214,667.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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MANASOTA ASALH P.O. BOX 2356 SARASOTA, FL 34230-2356	45-3969420	501(C)(3)	16,592.	0.			GENERAL SUPPORT
MANASOTA B.U.D.S. 8374 MARKET ST STE 113 LAKEWOOD RANCH, FL 34202-0100	22-3871903	501(C)(3)	6,496.	0.			GENERAL SUPPORT
MANASOTA DISTRICT COUNCIL ST. VINCENT DE PAUL SOCIETY INC - 2850 75TH STREET W - BRADENTON, FL 34209	59-2378750	501(C)(3)	29,311.	0.			GENERAL SUPPORT
MANASOTA SOLVE, INC. 1335 MANATEE AVENUE WEST BRADENTON, FL 34205	59-1683408	501(C)(3)	77,910.	0.			GENERAL SUPPORT
MANATEE CHILDREN'S SERVICES INCORPORATED - 1227 9TH AVE W - BRADENTON, FL 34205	59-1771210	501(C)(3)	31,587.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE CONCERT BAND INC PO BOX 502 BRADENTON, FL 34206-0502	47-3623178	501(C)(3)	22,978.	0.			GENERAL SUPPORT
MANATEE COUNTY 4-H ASSOCIATION (UNIVERSITY OF FLORIDA) - 1303 17TH STREET WEST - PALMETTO, FL 34221-2934	59-6002052	501(C)(3)	8,505.	0.			GENERAL SUPPORT
MANATEE COUNTY AGRICULTURAL MUSEUM INC - 1015 6TH ST. WEST - PALMETTO, FL 34221-4601	65-0132929	501(C)(3)	11,405.	0.			GENERAL SUPPORT
MANATEE COUNTY BOARD OF COUNTY COMMISSIONERS - 1112 MANATEE AVENUE WEST - BRADENTON, FL 34205	59-6000727	501(C)(3)	14,428.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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MANATEE COUNTY FAMILY YMCA, INC. 701 CENTER ROAD VENICE, FL 34285	59-1626905	501(C)(3)	12,073.	0.			PROGRAM SUPPORT
MANATEE COUNTY GIRLS CLUB, INC. DBA JUST FOR GIRLS - 1011 21ST STREET EAST - BRADENTON, FL 34208	59-1271332	501(C)(3)	45,034.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY HABITAT FOR HUMANITY - 1901 MANATEE AVENUE W., 2ND FLOOR - BRADENTON, FL 34205	65-0484034	501(C)(3)	45,212.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY YOUTH ROWING INC PO BOX 924 PARRISH, FL 34219	61-1580648	501(C)(3)	5,059.	0.			GENERAL SUPPORT
MANATEE EDUCATION FOUNDATION 1023 MANATEE AVE. W. SUITE 215 BRADENTON, FL 34205-7824	65-0037457	501(C)(3)	19,154.	0.			GENERAL SUPPORT
MANATEE HIGH SCHOOL ALUMNI ASSOCIATION - PO BOX 15103 - BRADENTON, FL 34280	46-4194721	501(C)(3)	6,329.	0.			GENERAL SUPPORT
MANATEE RIVER GARDEN CLUB, INC. P.O. BOX 14662 BRADENTON, FL 34280	59-6135578	501(C)(3)	6,226.	0.			GENERAL SUPPORT
MARIE SELBY BOTANICAL GARDENS INC 1534 MOUND STREET SARASOTA, FL 34236	59-1848965	501(C)(3)	1,430,143.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MASONIC HOME FOR CHILDREN AT OXFORD - 600 COLLEGE STREET - OXFORD, NC 27565	56-0603924	501(C)(3)	42,214.	0.			GENERAL SUPPORT

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MAYORS' FEED THE HUNGRY PROGRAM, INC. - P.O. BOX 1992 - SARASOTA, FL 34230	65-0369363	501(C)(3)	19,513.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MEALS ON WHEELS OF CHARLOTTE COUNTY - 3082 TAMiami TRAIL - PORT CHARLOTTE, FL 33952	59-1358912	501(C)(3)	11,171.	0.			GENERAL SUPPORT
MEALS ON WHEELS OF SARASOTA INC 421 NORTH LIME AVENUE SARASOTA, FL 34237	59-1391249	501(C)(3)	109,939.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MEALS ON WHEELS PLUS OF MANATEE, INC. - 811 23RD AVENUE E. - BRADENTON, FL 34208	59-1420986	501(C)(3)	104,448.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MEMORIAL SLOAN-KETTERING CANCER CENTER - PO BOX 27106 - NEW YORK, NY 10087	13-1924236	501(C)(3)	23,750.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MERCY CORPS PO BOX 37800 BOONE, IA 50037	91-1148123	501(C)(3)	26,850.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
METHODIST CHILDREN'S HOME SOCIETY 26645 W. SIX MILE RD. REDFORD, MI 48240	38-1240951	501(C)(3)	6,500.	0.			GENERAL SUPPORT
MILITARY HERITAGE MUSEUM INC 900 WEST MARION AVE PUNTA GORDA, FL 33950-5308	65-1036360	501(C)(3)	52,859.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MISSION & WELFARE INTERNATIONAL P.O. BOX 1135 BATTLE GROUND, WA 98604-1135	20-0239517	501(C)(3)	21,000.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT

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MOONRACER NO KILL ANIMAL RESCUE INC - PO BOX 2103 - HOLMES BEACH, FL 34218	45-1995123	501(C)(3)	7,169.	0.			GENERAL SUPPORT
MORE TOO LIFE INC 1750 17TH STREET, BUILDING F SARASOTA, FL 34234	20-5970211	501(C)(3)	11,376.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MORGAN COUNTY HOMELESS COALITION INC. - P.O. BOX 304 - BERKELEY SPRINGS, WV 25411	82-1578152	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MOTE MARINE FOUNDATION 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-2226800	501(C)(3)	38,000.	0.			GENERAL SUPPORT
MOTE MARINE LABORATORY, INC. 1600 KEN THOMPSON PKWY SARASOTA, FL 34236	59-0756643	501(C)(3)	360,548.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MOTHERS HELPING MOTHERS 5933 N. WASHINGTON BLVD. SARASOTA, FL 34243	65-0416462	501(C)(3)	54,633.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MOUNTAIN ASSOCIATION FOR COMMUNITY ECONOMIC DEVELOPMENT INC DBA MOUNTAIN AS - 433 CHESTNUT STREET - BERE A, KY 40403-1510	31-0900246	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
MULTICULTURAL HEALTH INSTITUTE 1781 DR. MARTIN LUTHER KING, JR. WA SARASOTA, FL 34234	68-0384071	501(C)(3)	55,917.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MUSEUM OF FINE ARTS OF ST. PETERSBURG FLORIDA, INC. - 255 BEACH DRIVE NE - ST. PETERSBURG, FL 33701	59-0949278	501(C)(3)	20,673.	0.			GENERAL SUPPORT

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MUSICA SACRA CANTORUM, INC. P.O. BOX 50581 SARASOTA, FL 34232-0853	27-2822198	501(C)(3)	9,498.	0.			GENERAL SUPPORT
MYOSITIS ASSOCIATION OF AMERICA, INC. - 6950 COLUMBIA GATEWAY DRIVE, SUITE 370 - COLUMBIA, MD 21046	54-1660976	501(C)(3)	10,000.	0.			GENERAL SUPPORT
NAMI SARASOTA AND MANATEE COUNTIES INC - 2911 FRUITVILLE RD. - SARASOTA, FL 34237	59-2464505	501(C)(3)	47,643.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NATHAN B STUBBLEFIELD FOUNDATION INC DBA WMNF - 1210 E DR MARTIN LUTHER KING JR BLVD - TAMPA, FL 33603-4417	59-1619213	501(C)(3)	28,267.	0.			GENERAL SUPPORT
NATIONAL AUDUBON SOCIETY INC DBA AUDUBON FLORIDA - 4500 BISCAYNE BLVD, SUITE 350 - MIAMI, FL 33145	13-1624102	501(C)(3)	5,551.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN/SARASOTA-MANATEE SECTION - PO BOX 3641 - SARASOTA, FL 34230-3641	59-1940872	501(C)(3)	6,254.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY - HOUSTON OFFICE - 1050 N. POST OAK RD., STE. 240 - HOUSTON, TX 77055	13-5661935	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY/MID FLORIDA CHAPTER - 2701 MAITLAND CENTER PKWY STE 100 - MAITLAND, FL 32751	13-5661935	501(C)(3)	17,564.	0.			GENERAL SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY/NATIONAL - 900 S. BROADWAY, 2ND FLOOR - DENVER, CO 80209	13-5661935	501(C)(3)	18,997.	0.			GENERAL SUPPORT

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NATIONAL PSORIASIS FOUNDATION 6600 SW 92ND AVE. SUITE 300 PORTLAND, OR 97223	93-0571472	501(C)(3)	9,081.	0.			GENERAL SUPPORT
NAVY LEAGUE OF THE UNITED STATES SARASOTA-MANATEE COUNCIL - P.O. BOX 5531 - SARASOTA, FL 34277-5531	65-1124136	501(C)(3)	19,206.	0.			GENERAL SUPPORT
NEURO CHALLENGE FOUNDATION INC 722 APEX RD, STE A SARASOTA, FL 34240	26-2311656	501(C)(3)	75,993.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NEW AVENUES FOR YOUTH, INC. 1220 SW COLUMBIA STREET PORTLAND, OR 97201	93-0910213	501(C)(3)	25,000.	0.			GENERAL SUPPORT
NEW COLLEGE FOUNDATION, INC. 5800 BAY SHORE ROAD SARASOTA, FL 34243-2109	59-0911744	501(C)(3)	197,867.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
NEW GATE SCHOOL, INC. 5237 ASHTON ROAD SARASOTA, FL 34233-3417	65-0358841	501(C)(3)	11,059.	0.			GENERAL SUPPORT
NEWTOWN NATION, INC. PO BOX 2111 SARASOTA, FL 34230	47-3465787	501(C)(3)	18,269.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NODNOC, INC. AKA THE CHILDREN'S GARDEN - 1670 TENTH WAY - SARASOTA, FL 34236-4111	27-0687287	501(C)(3)	11,214.	0.			GENERAL SUPPORT
NORMAN ROCKWELL MUSEUM P.O. BOX 308 STOCKBRIDGE, MA 01262	04-2450813	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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NORTH CAROLINA A&T STATE UNIVERSITY - 1601 E. MARKET STREET - GREENSBORO, NC 27411	56-6000007	501(C)(3)	5,600.	0.			SCHOLARSHIP SUPPORT
NORTH FLORIDA COMMUNITY COLLEGE FOUNDATION, INC. - 325 NW TURNER DAVIS DR. - MADISON, FL 32340	59-6179948	501(C)(3)	100,000.	0.			SCHOLARSHIP SUPPORT
NORTH FLORIDA SCHOOL OF SPECIAL EDUCATION - 223 MILL CREEK RD. - JACKSONVILLE, FL 32211	59-3126545	501(C)(3)	11,750.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
NORTH PORT AREA ART GUILD INC DBA NORTH PORT ART CENTER - 5950 SAM SHAPOS WAY - NORTH PORT, FL 34287-3119	65-0122432	501(C)(3)	6,011.	0.			GENERAL SUPPORT
NORTH PORT CHORALE 6400 W. PRICE BLVD., MUSIC SUITE NORTH PORT, FL 34291-4104	65-0974888	501(C)(3)	5,345.	0.			GENERAL SUPPORT
NORTH PORT COALITION FOR HOMELESS NEEDY CHILDREN DBA BACKPACK ANGELS - P.O. BOX 6826 - NORTH PORT, FL 34290	30-0630665	501(C)(3)	6,220.	0.			GENERAL SUPPORT
NORTH PORT MEALS ON WHEELS 13624 TAMIAMI TRAIL, BOX 227 NORTH PORT, FL 34287-2055	59-2106997	501(C)(3)	10,800.	0.			GENERAL SUPPORT
NORTH RIVER CARE, INC. 1020 10TH AVE WEST SUITE 100 PALMETTO, FL 34221	01-0713126	501(C)(3)	15,712.	0.			GENERAL SUPPORT
NORTHERN NEW YORK COMMUNITY FOUNDATION, INC. - 131 WASHINGTON STREET - WATERTOWN, NY 13601	15-6020989	501(C)(3)	74,391.	0.			GENERAL SUPPORT

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NUTRITION INITIATIVE OF MANATEE INC. - 1002 MANATEE AVE. E., SUITE B - BRADENTON, FL 34208	85-0878424	501(C)(3)	6,668.	0.			GENERAL SUPPORT
OLD PUNTA GORDA INC 118 SULLIVAN ST. PUNTA GORDA, FL 33950	59-2361235	501(C)(3)	9,000.	0.			CAPITAL PURCHASES
OLD SALEM INCORPORATED 600 S. MAIN STREET WINSTON SALEM, NC 27101	56-0587289	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
ON THE SPOT AID INC 12161 MERCADO DRIVE VENICE, FL 34293	85-1931026	501(C)(3)	26,760.	0.			GENERAL SUPPORT
ONEBLOOD FOUNDATION, INC. 10100 DR. MLK JR. STREET N ST. PETERSBURG, FL 33716-3806	59-2216675	501(C)(3)	48,894.	0.			GENERAL SUPPORT
OPERATION ECO VETS 22807 JAIME WAY BRADENTON, FL 34211	83-1533905	501(C)(3)	6,113.	0.			GENERAL SUPPORT
OPERATION SECOND CHANCE INC 20251 CENTURY BLVD, SUITE 130 GERMANTOWN, MD 20874-1162	20-2624345	501(C)(3)	127,871.	0.			GENERAL SUPPORT
OPERATION WARRIOR RESOLUTION 242 S. WASHINGTON BLVD. #130 SARASOTA, FL 34236	82-3982294	501(C)(3)	18,279.	0.			GENERAL SUPPORT
OSPREY FIRST BAPTIST CHURCH PO BOX 808 OSPREY, FL 34229	65-0108914	501(C)(3)	22,800.	0.			GENERAL SUPPORT

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OUR DAILY BREAD OF BRADENTON, INC. P.O. BOX 9544 BRADENTON, FL 34206-9544	65-0374954	501(C)(3)	23,094.	0.			GENERAL SUPPORT
OUT-OF-DOOR ACADEMY OF SARASOTA, INC. - 444 REID STREET - SARASOTA, FL 34242-1399	59-1731857	501(C)(3)	63,549.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
PACE CENTER FOR GIRLS, INC. 3508 26TH STREET WEST BRADENTON, FL 34205	59-2414492	501(C)(3)	22,864.	0.			GENERAL SUPPORT
PALMA SOLA BOTANICAL PARK FOUNDATION - PO BOX 14214 - BRADENTON, FL 34280-4214	65-0548069	501(C)(3)	11,335.	0.			GENERAL SUPPORT
PALMETTO CHARTER SCHOOL INC 1601 17TH ST WEST PALMETTO, FL 34221	80-0447761	501(C)(3)	22,520.	0.			GENERAL SUPPORT
PALMETTO HIGH SCHOOL ATHLETIC BOOSTER CLUB INC - 1180 8TH AVENUE WEST #123 - PALMETTO, FL 34221	77-0664170	501(C)(3)	9,705.	0.			GENERAL SUPPORT
PARENT BOOSTER USA INC DBA BRADEN RIVER HIGH SCHOOL BAND BOOSTERS ASSOCIATI - 6545 STATE ROAD 70 EAST - BRADENTON, FL 34203	30-0281785	501(C)(3)	10,696.	0.			GENERAL SUPPORT
PARKINSON RESEARCH FOUNDATION, INC. - 5969 CATTLERIDGE BLVD STE 100 - SARASOTA, FL 34232	20-0205035	501(C)(3)	19,492.	0.			GENERAL SUPPORT
PASCO-HERNANDO STATE COLLEGE FOUNDATION, INC. - 10230 RIDGE ROAD, WEST CAMPUS, E-215 - NEW PORT RICHEY, FL 34654	59-1731676	501(C)(3)	60,000.	0.			SCHOLARSHIP SUPPORT

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PAUL A & VERONICA H GROSS WILDLIFE CENTER OF SOUTHWEST FLORIDA - 925 NORTH JACKSON ROAD - VENICE, FL 34292	20-1065695	501(C)(3)	84,392.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PEACE EDUCATION & ACTION CENTER PO BOX 2540 SARASOTA, FL 34230	20-8474610	501(C)(3)	10,033.	0.			GENERAL SUPPORT
PEACE RIVER BOTANICAL & SCULPTURE GARDENS - 5800 RIVERSIDE DRIVE - PUNTA GORDA, FL 33982	26-3285783	501(C)(3)	30,272.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PEACE RIVER COMMUNITY HOUSING PARTNERS INC - 480 TAMIAMI TRAIL, UNIT 121 - PUNTA GORDA, FL 33950	46-2200351	501(C)(3)	9,657.	0.			GENERAL SUPPORT
PEACE RIVER K9 SEARCH AND RESCUE ASSOCIATION INC - 9326 PROSPECT AVE - ENGLEWOOD, FL 34224-8132	27-1584186	501(C)(3)	13,497.	0.			GENERAL SUPPORT
PEACE RIVER WILDLIFE CENTER 3400 PONCE DE LEON PARKWAY PUNTA GORDA, FL 33950-6312	59-2535665	501(C)(3)	57,234.	0.			GENERAL SUPPORT
PENNSYLVANIA STATE UNIVERSITY 2583 GATEWAY DRIVE, SUITE 130 STATE COLLEGE, PA 16801	24-6000376	501(C)(3)	18,403.	0.			GENERAL SUPPORT
PERLMAN MUSIC PROGRAM SUNCOAST, INC. - PO BOX 3407 - SARASOTA, FL 34230-3407	26-2714384	501(C)(3)	24,549.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PGI GREEN THUMBS INC 1368 WILLET CT PUNTA GORDA, FL 33950-8264	46-1591005	501(C)(3)	16,091.	0.			GENERAL SUPPORT

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PHARMACY LEADERSHIP AND EDUCATION INSTITUTE INC. AKA PLEI - P.O. BOX 115 - SOUTH LYON, MI 48178	58-2296988	501(C)(3)	25,000.	0.			SCHOLARSHIP SUPPORT
PHELAN-MCDERMID SYNDROME FOUNDATION - 8 SORRENTO DRIVE - OSPREY, FL 34229-9610	04-3673104	501(C)(3)	72,461.	0.			GENERAL SUPPORT
PHILLIPPI SHORES ELEMENTARY PTO INC - 4747 S. TAMiami TRAIL - SARASOTA, FL 34231	82-1882645	501(C)(3)	17,697.	0.			GENERAL SUPPORT
PICKLEPLEX OF PUNTA GORDA INC 130 E MARION AVE 592691 PUNTA GORDA, FL 33950	81-5421929	501(C)(3)	50,694.	0.			GENERAL SUPPORT
PINE VIEW ASSOCIATION 1 PYTHON PATH OSPREY, FL 34229	59-1390908	501(C)(3)	24,251.	0.			GENERAL SUPPORT
PINE VIEW BAND INC 1 PYTHON PATH OSPREY, FL 34229	27-1927928	501(C)(3)	17,043.	0.			GENERAL SUPPORT
PINE VIEW SCHOOL ONE PYTHON PATH OSPREY, FL 34229	59-6000847	501(C)(3)	5,400.	0.			PROGRAM SUPPORT
PINELLAS EDUCATION FOUNDATION 12090 STARKEY ROAD LARGO, FL 33773	59-2688253	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
PINES OF SARASOTA FOUNDATION, INC. 1501 N. ORANGE AVENUE SARASOTA, FL 34236-2631	59-2988752	501(C)(3)	125,053.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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PINNACLE ACADEMY PTO 6215 LORRAINE RD. BRADENTON, FL 34202	26-3580726	501(C)(3)	20,042.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. - P.O. BOX 97166 - WASHINGTON, DC 20090	13-1644147	501(C)(3)	38,925.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA, INC. - 736 CENTRAL AVENUE - SARASOTA, FL 34236	59-1274328	501(C)(3)	264,490.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PLAYWRIGHTS HORIZONS INC. 416 WEST 42 ST NEW YORK, NY 10036	13-2805131	501(C)(3)	15,000.	0.			GENERAL SUPPORT
PLYMOUTH HARBOR, INC 700 JOHN RINGLING BOULEVARD SARASOTA, FL 34236-1542	59-1031820	501(C)(3)	104,787.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
POWERED BY INCLUSION INC. 53 BRIDGE ST, SUITE 606 BROOKLYN, NY 11201	85-4244638	501(C)(3)	20,000.	0.			GENERAL SUPPORT
PRADER-WILLI SYNDROME ASSOCIATION, INC. - 8588 POTTER PARK DR, STE 500 - SARASOTA, FL 34238-5471	41-1306908	501(C)(3)	15,594.	0.			GENERAL SUPPORT
PREGNANCY SOLUTIONS, INC. 504 E VENICE AVENUE VENICE, FL 34285	65-1085310	501(C)(3)	54,482.	0.			GENERAL SUPPORT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE AKA HARVARD UNIVERSITY - PO BOX 419209 - BOSTON, MA 02241	04-2103580	501(C)(3)	9,250.	0.			PROGRAM SUPPORT

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PROJECT 180 SARASOTA, INC. PO BOX 25684 SARASOTA, FL 34277	26-3092460	501(C)(3)	65,976.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
PROJECT LIGHT OF MANATEE, INC. 1104 14TH STREET WEST BRADENTON, FL 34205-6650	65-0490652	501(C)(3)	12,854.	0.			GENERAL SUPPORT
PROJECT PRIDE SRQ P.O BOX 48635 SARASOTA, FL 34230	84-3878767	501(C)(3)	55,810.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PROSPECT RIDING CENTER PO BOX 424 MYAKKA CITY, FL 34251	45-5236589	501(C)(3)	25,603.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PROTECT OUR DEFENDERS FOUNDATION 1058 N TAMIAMI TRAIL, SUITE 108-240 SARASOTA, FL 34236	45-4044997	501(C)(3)	24,631.	0.			GENERAL SUPPORT
PUNTA GORDA HISTORIC MURAL SOCIETY P.O. BOX 510506 PUNTA GORDA, FL 33951-0506	65-0563402	501(C)(3)	12,395.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PUNTA GORDA HISTORY CENTER INC PO BOX 512557 PUNTA GORDA, FL 33951-2557	45-2020710	501(C)(3)	12,061.	0.			GENERAL SUPPORT
PUNTA GORDA ISLES CIVIC ASSOCIATION - 2001 SHREVE ST - PUNTA GORDA, FL 33950	59-6541350	501(C)(3)	18,468.	0.			GENERAL SUPPORT
PUNTA GORDA ROTARY CHARITY AND EDUCATION FOUNDATION INC - PO BOX 511132 - PUNTA GORDA, FL 33951-1132	65-0291703	501(C)(3)	5,999.	0.			GENERAL SUPPORT

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PURPOSE HOUSE MINISTRIES INC PO BOX 5838 SARASOTA, FL 34239	81-1070735	501(C)(3)	23,493.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
QUEENS BRIGADE, INC. 828 EVANS RIDGE ROAD LAKE TOXAWAY, NC 28747	84-4161461	501(C)(3)	45,000.	0.			PROGRAM SUPPORT
READING IS FUNDAMENTAL, INC. 750 FIRST STREET NE, STE. 920 WASHINGTON, DC 20002	52-0976257	501(C)(3)	10,000.	0.			GENERAL SUPPORT
REALIZE BRADENTON, INC. P.O. BOX 9114 BRADENTON, FL 34206-9114	27-1330078	501(C)(3)	24,752.	0.			GENERAL SUPPORT
RENAISSANCE ARTS AND EDUCATION INC D/B/A MANATEE SCHOOL FOR THE ARTS - 700 HABEN BLVD. - PALMETTO, FL 34221	65-0829459	501(C)(3)	8,431.	0.			GENERAL SUPPORT
RESILIENT RETREAT, INC. 1207 SARASOTA CENTER BLVD SARASOTA, FL 34240	83-1677056	501(C)(3)	47,633.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RESURRECTION HOUSE, INC. 507 KUMQUAT CT., PO BOX 398 SARASOTA, FL 34236	65-0096171	501(C)(3)	73,398.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RING SARASOTA P.O. BOX 21153 SARASOTA, FL 34276	27-3886712	501(C)(3)	8,977.	0.			GENERAL SUPPORT
RINGLING COLLEGE OF ART AND DESIGN 2700 N. TAMiami TRAIL SARASOTA, FL 34234	59-0637903	501(C)(3)	224,948.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

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RISE ABOVE PERFORMING ARTS, INC. P.O. BOX 51837 SARASOTA, FL 34232	47-2582525	501(C)(3)	51,566.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RIVERVIEW HIGH SCHOOL FOUNDATION 1 RAM WAY SARASOTA, FL 34231	59-2229914	501(C)(3)	44,182.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RIVERVIEW HIGH SCHOOL KILTIE BAND BOOSTERS, INC. - P.O. BOX 18504 - SARASOTA, FL 34276	59-2727115	501(C)(3)	25,965.	0.			GENERAL SUPPORT
ROCKET PHONICS FOUNDATION, INC. 7320 BOUNTY DR. SARASOTA, FL 34231	84-4543296	501(C)(3)	7,550.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROLLINS COLLEGE PO BOX 850001, DEPT# 9921 ORLANDO, FL 32885	59-0624440	501(C)(3)	5,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROSALYN WALTON EDUCATION AND ENRICHMENT SERVICES INC. - 713 46TH ST E - BRADENTON, FL 34208	81-4297668	501(C)(3)	5,036.	0.			GENERAL SUPPORT
ROSEMARY YOUTH BALLET 422 CENTRAL AVE SARASOTA, FL 34236-4940	84-3776157	501(C)(3)	21,240.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
ROSKAMP INSTITUTE, INC. 2040 WHITFIELD AVENUE SARASOTA, FL 34243-3956	27-1397124	501(C)(3)	18,396.	0.			GENERAL SUPPORT
ROTARY CLUB OF LAKEWOOD RANCH 8374 MARKET STREET, # 449 LAKEWOOD RANCH, FL 34202	65-1119411	501(C)(3)	12,371.	0.			GENERAL SUPPORT

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ROTARY CLUB OF SARASOTA BAY FOUNDATION, INC. - P.O. BOX 1311 - SARASOTA, FL 34230-1311	59-2687165	501(C)(3)	9,910.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROTARY CLUB OF SARASOTA FOUNDATION, INC. - PO BOX 2766 - SARASOTA, FL 34230	59-6153330	501(C)(3)	42,107.	0.			GENERAL SUPPORT
ROTARY CLUB OF SARASOTA SUNRISE FOUNDATION, INC. - PO BOX 595 - SARASOTA, FL 34230	59-2812994	501(C)(3)	24,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROTARY FUTURES COLLEGE RESOURCE CENTER - 1 INDIAN AVENUE, ROOM 406 - VENICE, FL 34285-2632	02-0583160	501(C)(3)	12,498.	0.			GENERAL SUPPORT
ROWLETT MIDDLE ACADEMY 400 30TH AVENUE WEST BRADENTON, FL 34205	46-5521687	501(C)(3)	10,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
SACATAR FOUNDATION P.O. BOX 2612 PASADENA, CA 91102	77-0557433	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
SAFE CHILDREN COALITION, INC. 1500 INDEPENDENCE BOULEVARD, STE.21 SARASOTA, FL 34234-2171	59-1618413	501(C)(3)	66,099.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAFE PLACE AND RAPE CRISIS CENTER INC (SPARCC) - 2139 MAIN STREET - SARASOTA, FL 34237	59-1943399	501(C)(3)	94,920.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAINT MARY'S COLLEGE 110 LE MANS HALL NOTRE DAME, IN 46556-5001	35-0868158	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT

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SAINT STEPHEN'S EPISCOPAL SCHOOL 315 41ST ST W BRADENTON, FL 34209-2943	59-1301635	501(C)(3)	47,098.	0.			GENERAL SUPPORT
SAINTS PETER & PAUL SCHOOL 5480 MAIN STREET WILLIAMSVILLE, NY 14221	53-0196617	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
SALISBURY SINGERS, INC. 370 MAIN STREET, SUITE 1200 WORCESTER, MA 01608	04-2619664	501(C)(3)	11,264.	0.			GENERAL SUPPORT
SALVATION ARMY 16130 NORTHLAND DR. SOUTHFIELD, MI 48075	38-1370971	501(C)(3)	6,500.	0.			GENERAL SUPPORT
SALVATION ARMY - MANATEE 1204 14TH STREET WEST BRADENTON, FL 34205	58-0660607	501(C)(3)	27,670.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SALVATION ARMY - SARASOTA PO BOX 2792 SARASOTA, FL 34230	58-0660607	501(C)(3)	327,030.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SALVATION ARMY - VENICE PO BOX 69 VENICE, FL 34284-0069	58-0660607	501(C)(3)	89,926.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAMARITAN COUNSELING SERVICES OF THE GULF COAST, INC. - 3224 BEE RIDGE RD. - SARASOTA, FL 34239-7201	59-3457923	501(C)(3)	26,974.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAMARITAN'S PURSE INTERNATIONAL RELIEF - P O BOX 3000 - BOONE, NC 28607-3000	58-1437002	501(C)(3)	18,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SAMOSSET ELEMENTARY 3300 19TH STREET EAST BRADENTON, FL 34208	59-6000728	501(C)(3)	100,000.	0.			PROGRAM SUPPORT
SAN FRANCISCO FOUNDATION ONE EMBARCADERO CENTER, SUITE 1400 SAN FRANCISCO, CA 94111	01-0679337	501(C)(3)	1,000,000.	0.			PROGRAM SUPPORT
SAN PEDRO PARISH OF THE DIOCESE OF VENICE - 14380 TAMiami TRAIL - NORTH PORT, FL 34287	59-2473176	501(C)(3)	54,480.	0.			GENERAL SUPPORT
SARA DESOTO CHAPTER-DAUGHTERS OF THE AMERICAN - 1232 12TH STREET - SARASOTA, FL 34236	59-6153056	501(C)(3)	16,097.	0.			GENERAL SUPPORT
SARASOTA AFRICAN AMERICAN CULTURAL COALITION, INC. - PO BOX 686 - SARASOTA, FL 34230-0686	83-3573603	501(C)(3)	45,701.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA ALLIANCE FOR HISTORIC PRESERVATION, - PO BOX 1754 - SARASOTA, FL 34230	59-2551426	501(C)(3)	17,942.	0.			GENERAL SUPPORT
SARASOTA AUDUBON SOCIETY, INC. 999 CENTER RD. SARASOTA, FL 34240	23-7382804	501(C)(3)	48,312.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA BALLET OF FLORIDA, INC. 5555 N TAMiami TRAIL SARASOTA, FL 34243-2141	65-0135900	501(C)(3)	299,515.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA BAY WATCH INC PO BOX 1141 OSPREY, FL 34229	26-2521889	501(C)(3)	13,754.	0.			GENERAL SUPPORT

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SARASOTA CHRISTIAN SCHOOL 5415 BAHIA VISTA STREET SARASOTA, FL 34232	59-0931269	501(C)(3)	132,193.	0.			GENERAL SUPPORT
SARASOTA CONCERT ASSOCIATION, INC. PO BOX 211 SARASOTA, FL 34230-0211	59-2850861	501(C)(3)	27,336.	0.			GENERAL SUPPORT
SARASOTA CONTEMPORARY DANCE 1400 BLVD OF THE ARTS SUITE 300 SARASOTA, FL 34236	41-2211673	501(C)(3)	25,280.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA COUNTY LIBRARIES 1660 RINGLING BLVD SARASOTA, FL 34236	59-6000848	501(C)(3)	9,629.	0.			GENERAL SUPPORT
SARASOTA COUNTY PARKS, RECREATION AND NATURAL RESOURCES - 1660 RINGLING BLVD., 5TH FLOOR - SARASOTA, FL 34236	59-6000848	501(C)(3)	19,568.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA COUNTY ROWING CLUB INC PO BOX 184 OSPREY, FL 34229-0184	65-1096968	501(C)(3)	33,070.	0.			GENERAL SUPPORT
SARASOTA COUNTY SHERIFF'S OFFICE CHARITABLE FOUNDATION - 6120 S. LOCKWOOD RIDGE ROAD - SARASOTA, FL 34231	47-2913955	501(C)(3)	8,498.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA CREW, INC. 343 PALMETTO AVE OSPREY, FL 34229	01-0733041	501(C)(3)	51,804.	0.			GENERAL SUPPORT
SARASOTA CUBAN BALLET SCHOOL INC 4740 CATTLEMEN ROAD SARASOTA, FL 34233-5038	45-5074780	501(C)(3)	40,293.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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SARASOTA DOLPHIN RESEARCH PROGRAM 708 TROPICAL CIRCLE SARASOTA, FL 34242	59-2288387	501(C)(3)	21,859.	0.			GENERAL SUPPORT
SARASOTA FILM FESTIVAL INC 332 COCOANUT AVE, SUITE 201 SARASOTA, FL 34236	65-0826229	501(C)(3)	6,257.	0.			GENERAL SUPPORT
SARASOTA GARDEN CLUB INC 1131 BLVD OF THE ARTS SARASOTA, FL 34236-4809	59-0968250	501(C)(3)	41,787.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SARASOTA HIGH CROSS COUNTRY AND TRACK TEAM INC - 2155 BAHIA VISTA ST - SARASOTA, FL 34239-2402	84-1866386	501(C)(3)	14,188.	0.			GENERAL SUPPORT
SARASOTA HIGH SCHOOL MAST RESEARCH INSTITUTE BOOSTERS INCORPORATED - 2155 BAHIA VISTA ST. - SARASOTA, FL 34239-8044	45-3132534	501(C)(3)	29,903.	0.			GENERAL SUPPORT
SARASOTA HIGH SCHOOL MIGHTY SAILOR BAND BOOSTERS INC - PO BOX 25724 - SARASOTA, FL 34277	03-0507547	501(C)(3)	9,114.	0.			GENERAL SUPPORT
SARASOTA HOUSING FUNDING CORPORATION - 269 S. OSPREY AVENUE SUITE 100 - SARASOTA, FL 34236-6805	80-0418699	501(C)(3)	38,153.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA IN DEFENSE OF ANIMALS INC. - PO BOX 15653 - SARASOTA, FL 34277-1653	65-0124076	501(C)(3)	12,412.	0.			GENERAL SUPPORT
SARASOTA INSTITUTE OF LIFETIME LEARNING, INC. - 8499 S. TAMiami TRAIL - SARASOTA, FL 34238	59-2344325	501(C)(3)	125,280.	0.			GENERAL SUPPORT

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SARASOTA K-9 SEARCH AND RESCUE, INC. - PO BOX 51446 - SARASOTA, FL 34232	65-0845818	501(C)(3)	10,706.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA LAWN BOWLING CLUB 809 N TAMIAMI TRL SARASOTA, FL 34236-4052	65-0989382	501(C)(3)	15,053.	0.			GENERAL SUPPORT
SARASOTA MANATEE ASSOCIATION FOR RIDING THERAPY - 4640 COUNTY ROAD 675 E - BRADENTON, FL 34211-9600	65-0043354	501(C)(3)	32,566.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MEDICAL PREGNANCY CENTER, INC. - 1762 HAWTHORNE STREET, #5 - SARASOTA, FL 34239	05-0533818	501(C)(3)	48,013.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MEMORIAL HEALTHCARE FOUNDATION, INC. - 1515 S. OSPREY AVENUE, SUITE B4 - SARASOTA, FL 34239-2919	51-0188568	501(C)(3)	339,319.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MILITARY ACADEMY 801 N. ORANGE AVENUE SARASOTA, FL 34236	65-1149763	501(C)(3)	25,089.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MILITARY OFFICERS FOUNDATION INC. - P.O. BOX 1016 - SARASOTA, FL 34230	65-0883860	501(C)(3)	7,819.	0.			GENERAL SUPPORT
SARASOTA MUSIC ARCHIVE, INC. 1331 FIRST ST, 2ND FLOOR SARASOTA, FL 34236-5702	65-0295646	501(C)(3)	6,783.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MUSIC CONSERVATORY INC 323 CENTRAL AVE. SARASOTA, FL 34236-4915	45-4180504	501(C)(3)	11,572.	0.			GENERAL SUPPORT

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SARASOTA OPERA ASSOCIATION, INC. 61 N. PINEAPPLE AVE SARASOTA, FL 34236-5716	23-7089047	501(C)(3)	178,880.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA ORCHESTRA 709 N. TAMIAMI TRAIL SARASOTA, FL 34236	82-2043821	501(C)(3)	470,827.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA PARROT CONSERVATORY INC 28801 104TH DRIVE EAST MYAKKA CITY, FL 34251	46-1720728	501(C)(3)	9,810.	0.			GENERAL SUPPORT
SARASOTA POLICE FOUNDATION INC 240 N WASHINGTON BLVD, 6TH FLOOR SARASOTA, FL 34236	26-3399878	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SARASOTA POPS ORCHESTRA, INC. DBA POPS ORCHESTRA OF BRADENTON AND SARASOTA - P.O. BOX 1622 - SARASOTA, FL 34230-1622	59-1694954	501(C)(3)	28,433.	0.			GENERAL SUPPORT
SARASOTA SCULLERS YOUTH ROWING PROGRAM, INC. - 153 NORTH TAMIAMI TRAIL - OSPREY, FL 34229	65-0280018	501(C)(3)	17,805.	0.			GENERAL SUPPORT
SARASOTA SHARKS INCORPORATED 8501 POTTER PARK DRIVE SARASOTA, FL 34238	82-3302879	501(C)(3)	30,940.	0.			GENERAL SUPPORT
SARASOTA SKI A REES INC PO BOX 1493 SARASOTA, FL 34230	59-2418349	501(C)(3)	19,508.	0.			GENERAL SUPPORT
SARASOTA TECHNOLOGY USERS GROUP P.O. BOX 15889 SARASOTA, FL 34277-1889	59-2456855	501(C)(3)	10,217.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SARASOTA UNITED FOR RESPONSIBILITY & EQUITY, INC. (SURE) - 1031 S. EUCLID AVENUE - SARASOTA, FL 34237	65-0797727	501(C)(3)	41,315.	0.			GENERAL SUPPORT
SARASOTA WALDORF INC DBA MANGROVE SCHOOL OF SARASOTA - 6210 CRESTWOOD AVE - SARASOTA, FL 34231	65-1094495	501(C)(3)	16,992.	0.			GENERAL SUPPORT
SARASOTA WORLD AFFAIRS COUNCIL 5800 BAY SHORE RD SARASOTA, FL 34243	47-2606403	501(C)(3)	6,866.	0.			GENERAL SUPPORT
SARASOTA YOUNG VOICES INCORPORATED 3224 BEE RIDGE ROAD SARASOTA, FL 34239-7201	46-4020137	501(C)(3)	11,992.	0.			GENERAL SUPPORT
SARASOTA YOUTH SAILING PROGRAM INC 1717 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-2008905	501(C)(3)	31,419.	0.			GENERAL SUPPORT
SARASOTA-BRADENTON KAPPA ALPHA PSI PROJECT GUIDE RIGHT INC - P.O. BOX 573 - TALLEVAST, FL 34270	65-0910261	501(C)(3)	15,817.	0.			GENERAL SUPPORT
SARASOTA-MANATEE JEWISH HOUSING COUNCIL, INC. DBA AVIVA - A CAMPUS FOR SENI - 1955 N. HONORE AVENUE, SUITE B-1 - SARASOTA, FL	65-0091025	501(C)(3)	51,138.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SATCHEL'S LAST RESORT 8101 COASH RD SARASOTA, FL 34241	04-3585931	501(C)(3)	79,078.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAVE OUR SEABIRDS, INC. 1708 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-3078536	501(C)(3)	70,022.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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SAVE OUR Y (DBA CORE SRQ) 1075 S. EUCLID AVE SARASOTA, FL 34237-8124	84-2889884	501(C)(3)	19,769.	0.			GENERAL SUPPORT
SAVE THE CHILDREN P.O. BOX 97132 WASHINGTON, DC 20090	06-0726487	501(C)(3)	8,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAVE THE REDWOODS LEAGUE 111 SUTTER STREET, 11TH FLOOR SAN FRANCISCO, CA 94104	94-0843915	501(C)(3)	10,100.	0.			GENERAL SUPPORT
SCHOOL BOARD OF SARASOTA COUNTY 1960 LANDINGS BLVD. SARASOTA, FL 34231-3331	59-6000847	501(C)(3)	510,252.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SCHOOL DISTRICT OF MANATEE COUNTY 215 MANATEE AVE WEST BRADENTON, FL 34205	59-6000728	501(C)(3)	278,184.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SCIENCE AND ENVIRONMENT COUNCIL OF SOUTHWEST FLORIDA, INC. - P.O. BOX 2879 - SARASOTA, FL 34230	65-1102028	501(C)(3)	11,853.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SEA OF STRENGTHS ACADEMY PTO 7313 INTERNATIONAL PLACE, SUITE 90 SARASOTA, FL 34240	27-4014136	501(C)(3)	77,499.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SECOND CHANCE-LAST OPPORTUNITY PO BOX 1027 SARASOTA, FL 34230-1027	65-0699257	501(C)(3)	46,265.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SECOND HEART HOMES INC PO BOX 3886 SARASOTA, FL 34230	84-1848246	501(C)(3)	52,139.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SELAH FREEDOM, INC. PO BOX 21415 SARASOTA, FL 34276	45-5189165	501(C)(3)	40,809.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SELBY LIBRARY 1331 FIRST STREET SARASOTA, FL 34236	59-6000848	501(C)(3)	5,059.	0.			GENERAL SUPPORT
SEMINARY COVENANT COMMUNITY (DBA PRISON BOOK PROJECT) - 1100 S HOPKINS AVE. - TITUSVILLE, FL 32780	59-3506589	501(C)(3)	10,832.	0.			GENERAL SUPPORT
SENIOR FRIENDSHIP CENTERS FOUNDATION, INC. - 1888 BROTHER GEENEN WAY - SARASOTA, FL 34236	65-0364819	501(C)(3)	9,797.	0.			GENERAL SUPPORT
SENIOR FRIENDSHIP CENTERS, INC. 1888 BROTHER GEENEN WAY SARASOTA, FL 34236-7118	59-1522614	501(C)(3)	339,852.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SERTOMA CLUB OF VENICE PO BOX 621 VENICE, FL 34284-0621	63-0655922	501(C)(3)	13,095.	0.			GENERAL SUPPORT
SERTOMA KIDS, INC. 2750 STICKNEY POINT ROAD, SUITE 210 SARASOTA, FL 34231-6000	45-5472110	501(C)(3)	23,557.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SHRINERS HOSPITALS FOR CHILDREN - TAMPA UNIT - 12502 USF PINE DR - TAMPA, FL 33612	04-2121377	501(C)(3)	62,881.	0.			GENERAL SUPPORT
SHS LAX BOOSTERS INC. 1055 S. TAMIAMI TRL, SUITE 107B SARASOTA, FL 34236-9119	84-4637803	501(C)(3)	5,415.	0.			GENERAL SUPPORT

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SIESTA KEY CHAPEL PRESBYTERIAN 4615 GLEASON AVENUE SARASOTA, FL 34242	59-1399716	501(C)(3)	10,075.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SIESTA KEY KIWANIS CLUB FOUNDATION INC - PO BOX 5485 - SARASOTA, FL 34277	54-2067657	501(C)(3)	19,268.	0.			GENERAL SUPPORT
SIMMARON RESEARCH INC 948 INCLINE WAY INCLINE VILLAGE, NV 89451	45-2191464	501(C)(3)	150,000.	0.			PROGRAM SUPPORT
SISTERHOOD FOR GOOD INC 8374 MARKET STREET, #181 LAKEWOOD RANCH, FL 34202	83-2044782	501(C)(3)	10,967.	0.			GENERAL SUPPORT
SISTERS SOWING SEEDS 2640 21ST ST. SARASOTA, FL 34234	81-4194584	501(C)(3)	21,911.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SIXTEEN HANDS HORSE SANCTUARY 712 ROY MOORE RD. ONA, FL 33865-9577	26-1224137	501(C)(3)	21,571.	0.			GENERAL SUPPORT
SMALLCIRCLE INC. 4373 REFLECTIONS PKWY. SARASOTA, FL 34233	84-2387119	501(C)(3)	26,500.	0.			PROGRAM SUPPORT
SOAR LEARNING CENTER, INC. P.O. BOX 51917 SARASOTA, FL 34232	81-4840233	501(C)(3)	165,382.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF BARBERSHOP QUARTET SINGIN - PO BOX 51751 - SARASOTA, FL 34232-2016	59-6155059	501(C)(3)	10,544.	0.			GENERAL SUPPORT

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SOCIETY OF ST. VINCENT DE PAUL SACRED HEART CONFERENCE INC - 25200 AIRPORT ROAD - PUNTA GORDA, FL 33950-5743	80-0029958	501(C)(3)	26,375.	0.			GENERAL SUPPORT
SOCIETY OF ST. VINCENT DE PAUL SOUTH PINELLAS INC - 384 15TH ST N - ST PETERSBURG, FL 33705-2016	59-2380770	501(C)(3)	12,354.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOFT COATED WHEATEN TERRIER CLUB OF GREATER TAMPA BAY INC - 364 BLACKBIRD CT - LAKEWOOD RANCH, FL 34212-2943	83-0459393	501(C)(3)	8,823.	0.			GENERAL SUPPORT
SOKA GAKKAI INTERNATIONAL - USA 606 WILSHIRE BOULEVARD SANTA MONICA, CA 90401	95-2265667	501(C)(3)	42,000.	0.			GENERAL SUPPORT
SOLUTIONS TO AVOID RED TIDE (START) - PO BOX 642 - TALLEVAST, FL 34270-7000	65-0688476	501(C)(3)	5,364.	0.			GENERAL SUPPORT
SOUTH COUNTY FOOD PANTRY 121 WARFIELD AVENUE VENICE, FL 34285	65-0007133	501(C)(3)	22,496.	0.			GENERAL SUPPORT
SOUTH FLORIDA STATE COLLEGE FOUNDATION, INC. - 13 E. MAIN STREET - AVON PARK, FL 33825	59-3050497	501(C)(3)	61,000.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
SOUTHEASTERN GUIDE DOGS, INC. 4210 77TH STREET E. PALMETTO, FL 34221	59-2252352	501(C)(3)	127,524.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOUTHFACE ENERGY INSTITUTE INC. 4454 S. BENEVA RD. SARASOTA, FL 34233	58-1357547	501(C)(3)	7,865.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SOUTHSIDE BAPTIST CHURCH 505 S 10TH AVE WAUCHULA, FL 33873	59-2321240	501(C)(3)	7,045.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SPAACES FOUNDATION INC 2087 PRINCETON STREET, BOX 5 SARASOTA, FL 34237	84-5004237	501(C)(3)	9,365.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SPECIAL OLYMPICS MANATEE COUNTY 3657 CORTEZ RD WEST SUITE 120 BRADENTON, FL 34210-3171	23-7181560	501(C)(3)	15,501.	0.			GENERAL SUPPORT
SRQLAX INC PO BOX 15153 SARASOTA, FL 34277	47-2044510	501(C)(3)	10,501.	0.			GENERAL SUPPORT
SS. JOACHIM AND ANNE SCHOOL 218-19 105 AVENUE QUEENS VILLAGE, NY 11429	11-2203284	501(C)(3)	100,000.	0.			GENERAL SUPPORT
ST. ANDREW SCOTTISH SOCIETY SCHOLARSHIP FUND INC - P.O. BOX 2592 - SARASOTA, FL 34230	04-3666660	501(C)(3)	8,373.	0.			GENERAL SUPPORT
ST. ANTHONY'S HOSPITAL FOUNDATION 1200 7TH AVENUE NORTH ST. PETERSBURG, FL 33705	59-2043026	501(C)(3)	48,894.	0.			GENERAL SUPPORT
ST. AUGUSTINE'S EPISCOPAL CHURCH 1140 WILMETTE AVENUE WILMETTE, IL 60091	36-2334635	501(C)(3)	16,500.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
ST. CHARLES BORROMEO CATHOLIC SCHOOL - 21505 AUGUSTA AVENUE - PORT CHARLOTTE, FL 33952-5413	59-1576869	501(C)(3)	9,715.	0.			GENERAL SUPPORT

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ST. DAVID'S EPISCOPAL CHURCH - THE JUBILEE CENTER - 401 S. BROADWAY - ENGLEWOOD, FL 34223-3802	59-6173767	501(C)(3)	8,460.	0.			GENERAL SUPPORT
ST. FRANCIS ANIMAL RESCUE OF VENICE - 1925 S. TAMiami TRAIL - VENICE, FL 34293-5003	65-0409317	501(C)(3)	56,169.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. FRANCIS OF ASSISI CATHOLIC CHURCH - 5265 PLACIDA RD. - GROVE CITY, FL 34224	59-1933467	501(C)(3)	6,469.	0.			GENERAL SUPPORT
ST. JOSEPH FOOD PANTRY 2704 33RD AVENUE WEST BRADENTON, FL 34205	59-2473176	501(C)(3)	25,917.	0.			GENERAL SUPPORT
ST. JOSEPH CATHOLIC SCHOOL 2990 26TH STREET WEST BRADENTON, FL 34211	59-1351248	501(C)(3)	79,322.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. JOSEPHS COLLEGIATE INSTITUTE 845 KENMORE AVE BUFFALO, NY 14223	16-0743159	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105-1905	62-0646012	501(C)(3)	55,538.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. MARTHA CATHOLIC SCHOOL 4380 FRUITVILLE ROAD SARASOTA, FL 34232	59-1510711	501(C)(3)	18,838.	0.			GENERAL SUPPORT
ST. MARY ACADEMY 4380 FRUITVILLE RD SARASOTA, FL 34232-1623	65-0931385	501(C)(3)	62,008.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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ST. PETERSBURG COLLEGE FOUNDATION FBO THE PALLADIUM - P.O. BOX 13489 - ST. PETERSBURG, FL 33733	59-1954362	501(C)(3)	14,668.	0.			GENERAL SUPPORT
ST. PETERSBURG FREE CLINIC, INC. 863 3RD AVE N. ST. PETERSBURG, FL 33701	23-7208280	501(C)(3)	50,009.	0.			GENERAL SUPPORT
ST. ROBERT BELLARMINE CHURCH 310 N. CHERRY STREET FLUSHING, MI 48433	38-1443389	501(C)(3)	8,625.	0.			GENERAL SUPPORT
STATE COLLEGE OF FLORIDA FOUNDATION - 5840 26TH STREET WEST - BRADENTON, FL 34207	59-1843274	501(C)(3)	70,828.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
STEP UP SUNCOAST 6428 PARKLAND DR. SARASOTA, FL 34243	59-6208766	501(C)(3)	696,024.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BOULEVARD - STATEN ISLAND, NY 10306-3159	02-0554654	501(C)(3)	13,400.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
STILLPOINT MISSION P.O. BOX 619 BRADENTON, FL 34206	65-0850895	501(C)(3)	16,254.	0.			GENERAL SUPPORT
STORAHTELLING LAB SHUL INC. 131 VARICK STREET, SUITE 921 NEW YORK, NY 10013	46-3877785	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
STRINGS CON BRIO P.O. BOX 5936 SARASOTA, FL 34277-5936	81-0736923	501(C)(3)	17,252.	0.			GENERAL SUPPORT

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SUMMIT CHARTER SCHOOL FOUNDATION, INC. - P.O. BOX 2493 - CASHIERS, NC 28717	56-1993257	501(C)(3)	10,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST AQUATIC NATURE CENTER ASSOCIATES, INC. DBA NATHAN BENDERSON PARK - 5851 NATHAN BENDERSON CIR - SARASOTA, FL 34235	45-2641647	501(C)(3)	10,027.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SUNCOAST BLACK ARTS COLLABORATIVE, INC. - PO BOX 21185 - BRADENTON, FL 34204	85-0847497	501(C)(3)	18,118.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST BLUES SOCIETY INC. PO BOX 4232 TAMPA, FL 33677	59-3514378	501(C)(3)	7,253.	0.			GENERAL SUPPORT
SUNCOAST CENTER FOR INDEPENDENT LIVING, INC. - P.O. BOX 52649 - SARASOTA, FL 34232	65-0209424	501(C)(3)	13,137.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST CHARITIES FOR CHILDREN INC - 5317 FRUITVILLE ROAD, SUITE 43 - SARASOTA, FL 34232	65-0397846	501(C)(3)	13,977.	0.			GENERAL SUPPORT
SUNCOAST COMMUNITIES BLOOD BANK, INC. DBA SUNCOAST BLOOD CENTERS - 3025 LAKEWOOD RANCH BLVD., SUITE 111 - BRADENTON, FL 34211	59-0873275	501(C)(3)	18,625.	0.			GENERAL SUPPORT
SUNCOAST HUMANE SOCIETY, INC. 6781 SAN CASA DRIVE ENGLEWOOD, FL 34224	23-7174193	501(C)(3)	68,445.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST PARTNERSHIP TO END HOMLESSNESS - 1750 17TH STREET, BUILDING C-1 - SARASOTA, FL 34234-8632	20-2783762	501(C)(3)	5,479.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SUNCOAST WATERKEEPER INC P O BOX 1028 SARASOTA, FL 34230	30-0753993	501(C)(3)	30,002.	0.			GENERAL SUPPORT
SUNCOAST YOUTH FOR CHRIST PO BOX 123 BRADENTON, FL 34206	59-0999771	501(C)(3)	100,201.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNSHINE COMMUNITY COMPOST 7416 RIVERVIEW DRIVE NW BRADENTON, FL 34209	82-1729198	501(C)(3)	11,137.	0.			GENERAL SUPPORT
SURVIVORS IN SYNC 15918 KENDLESHIRE TERRACE LAKEWOOD RANCH, FL 34202-1240	37-1781181	501(C)(3)	46,260.	0.			GENERAL SUPPORT
SVDP ST. JOSEPH CONFERENCE BRADENTON INC. - 2704 33RD AVE W - BRADENTON, FL 34205	81-1678362	501(C)(3)	10,605.	0.			GENERAL SUPPORT
TAKE STOCK IN CHILDREN OF MANATEE COUNTY INC - P.O. BOX 325 - PALMETTO, FL 34220	46-1337168	501(C)(3)	20,527.	0.			GENERAL SUPPORT
TAKE STOCK IN CHILDREN OF SARASOTA COUNTY, INC. - PO BOX 48186 - SARASOTA, FL 34230	33-1012774	501(C)(3)	45,747.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
TANKS INCORPORATED 5150 WAUCHULA RD MYAKKA CITY, FL 34251-4640	01-0935224	501(C)(3)	6,463.	0.			GENERAL SUPPORT
TAYLOR RANCH ELEMENTARY SCHOOL 2500 TAYLOR RANCH TRAIL VENICE, FL 34293	59-6000847	501(C)(3)	8,670.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT

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TBS ENDOWMENT FUND INC 1050 SOUTH TUTTLE AVE. SARASOTA, FL 34237	26-1421638	501(C)(3)	16,088.	0.			GENERAL SUPPORT
TEACH RWANDA 1787-C CHATEAU PL EASTON, PA 18045	45-5516209	501(C)(3)	7,000.	0.			GENERAL SUPPORT
TEAM PUNTA GORDA 227 SULLIVAN STREET 2ND FLOOR PUNTA GORDA, FL 33950	20-2375899	501(C)(3)	14,163.	0.			GENERAL SUPPORT
TEAM TONY CANCER FOUNDATION 3562 S OSPREY AVE., STE. C SARASOTA, FL 34239	27-3755241	501(C)(3)	10,316.	0.			GENERAL SUPPORT
TEAMUP VOLUNTEER & PARTNERSHIP COUNCIL - 1960 LANDINGS BLVD - SARASOTA, FL 34231	59-2354722	501(C)(3)	5,677.	0.			GENERAL SUPPORT
TEEN COURT OF SARASOTA, INC. P.O. BOX 48927 SARASOTA, FL 34230	65-0108304	501(C)(3)	43,910.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE BETH ISRAEL OF LONGBOAT KEY FLORIDA, INC. - 567 BAY ISLES ROAD - LONGBOAT KEY, FL 34228	59-1970401	501(C)(3)	7,735.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE BETH SHOLOM & JEWISH CENTER, INC. - 1050 S. TUTTLE AVENUE - SARASOTA, FL 34237	23-7156328	501(C)(3)	11,260.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE EMANU-EL 151 MCINTOSH ROAD SARASOTA, FL 34232	59-1145961	501(C)(3)	24,261.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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THE ACADEMY AT GLENGARY, INC. 1910 GLENGARY ST. SARASOTA, FL 34231-3603	83-0608910	501(C)(3)	32,914.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE AMERICAN FRIENDS OF THE BRITISH MUSEUM, INC. - 31 WEST 34TH STREET, 7TH FLOOR #7010 - NEW YORK, NY 10001	52-1640217	501(C)(3)	12,870.	0.			GENERAL SUPPORT
THE AMERICAN UNIVERSITY - WASHINGTON COLLEGE OF LAW - 4300 NEBRASKA AVENUE NW, C305 - WASHINGTON, DC 20016	53-0196549	501(C)(3)	7,500.	0.			GENERAL SUPPORT
THE BAY PARK CONSERVANCY INC 655 N. TAMIAMI TRAIL SARASOTA, FL 34236	81-4653473	501(C)(3)	322,227.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE BISHOP MUSEUM OF SCIENCE AND NATURE INC - PO BOX 9265 - BRADENTON, FL 34206-9265	59-0598726	501(C)(3)	43,557.	0.			GENERAL SUPPORT
THE BLESSING BAGS PROJECT INC 1802 14TH ST W BRADENTON, FL 34205	47-4714498	501(C)(3)	7,350.	0.			GENERAL SUPPORT
THE BRCC FUND 355 SPENCER LANE SAN ANTONIO, TX 78201	86-3269131	501(C)(3)	29,083.	0.			PROGRAM SUPPORT
THE CENTER OF HOPE OF SOUTH COUNTY, INC. - 2395 SHAMROCK DR - VENICE, FL 34293	65-1049834	501(C)(3)	7,566.	0.			GENERAL SUPPORT
THE CHARLOTTE CHORALE PO BOX 494451 PORT CHARLOTTE, FL 33949-4451	65-0205461	501(C)(3)	10,981.	0.			GENERAL SUPPORT

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THE CIRCUS ARTS CONSERVATORY, INC. 2075 BAHIA VISTA ST. SARASOTA, FL 34239-2302	65-0786312	501(C)(3)	138,816.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
THE CIRCUS RING OF FAME FOUNDATION INC - P.O. BOX 4282 - SARASOTA, FL 34220	65-0450544	501(C)(3)	33,332.	0.			GENERAL SUPPORT
THE CITIZEN SCIENTISTS LEAGUE INC DBA SUNCOAST SCIENCE CENTER - 4452 S BENEVA RD - SARASOTA, FL 34233	45-2477364	501(C)(3)	8,247.	0.			GENERAL SUPPORT
THE CLASSICAL ACADEMY OF SARASOTA INC - 8751 FRUITVILLE RD. - SARASOTA, FL 34240	46-3754462	501(C)(3)	174,984.	0.			GENERAL SUPPORT
THE D. L. RANDALL FOUNDATION, INC. 1523 72ND ST. EAST RUBONIA, FL 34221	47-4988613	501(C)(3)	5,033.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE DALI MUSEUM, INC. 1 DALI BLVD. ST. PETERSBURG, FL 33701	59-2015192	501(C)(3)	14,668.	0.			GENERAL SUPPORT
THE ENVIRONMENTAL CONSERVANCY OF NORTH PORT INC. - 3465 ALFRED ROAD - NORTH PORT, FL 34268	84-4132468	501(C)(3)	11,784.	0.			GENERAL SUPPORT
THE FLORIDA CENTER FOR EARLY CHILDHOOD - 4620 17TH STREET - SARASOTA, FL 34235	59-1947024	501(C)(3)	378,063.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE INTERNATIONAL WALDENSTROMS MACROGLOBULINEMIA FOUNDATION INC - 6144 CLARK CENTER AVENUE - SARASOTA, FL 34238	54-1784426	501(C)(3)	107,728.	0.			GENERAL SUPPORT

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THE JEWISH FEDERATION OF SARASOTA-MANATEE - 580 MCINTOSH ROAD - SARASOTA, FL 34232-1957	59-1227747	501(C)(3)	115,928.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE LEGACY FOUNDATION AT SHELL POINT INC. - 15010 SHELL POINT BOULEVARD - FT. MYERS, FL 33908	80-0002415	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETY, INC. - PO BOX 22324 - NEW YORK, NY 10087	13-5644916	501(C)(3)	24,481.	0.			GENERAL SUPPORT
THE LITERACY COUNCIL OF SARASOTA, INC. - 1750 17TH ST., BLDG K-3 - SARASOTA, FL 34234-8666	59-1911680	501(C)(3)	81,705.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE LONG WALK HOME INC. 466 EDGEWOOD RD VENICE, FL 34293	20-5700906	501(C)(3)	6,612.	0.			GENERAL SUPPORT
THE MARK WANDALL FOUNDATION, INC. P.O. BOX 21333 BRADENTON, FL 34204	20-1933021	501(C)(3)	25,614.	0.			GENERAL SUPPORT
THE MYOSITIS ASSOCIATION DBA SW FL MYOSITIS KIT - 6950 COLUMBIA GATEWAY DRIVE, SUITE 370 - COLUMBIA, MD 21046	54-1660976	501(C)(3)	18,788.	0.			GENERAL SUPPORT
THE NATIONAL PRESS CLUB JOURNALISM INSTITUTE INC. - 529 14TH STREET, NW, 13TH FLOOR - WASHINGTON, DC 20045	52-1750908	501(C)(3)	38,500.	0.			PROGRAM SUPPORT
THE PARENT PROJECT FOR MUSCULAR DYSTROPHY RESEARCH, INC. - 1012 14TH STREET, NW, SUITE 500 - WASHINGTON, DC 20005	31-1405490	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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THE PAYTON WRIGHT FOUNDATION, INC. P.O. BOX 110067 BRADENTON, FL 34211	33-1204054	501(C)(3)	16,691.	0.			GENERAL SUPPORT
THE PLAYERS, INC. AKA THE PLAYERS CENTRE FOR PERFORMING ARTS - 1400 BOULEVARD OF THE ARTS, STE 200 - SARASOTA, FL 34236-4033	59-0711182	501(C)(3)	24,372.	0.			GENERAL SUPPORT
THE POLICE ATHLETIC LEAGUE OF MANATEE COUNTY, INC. - 202 13TH AVENUE EAST - BRADENTON, FL 34208	80-0435892	501(C)(3)	9,140.	0.			GENERAL SUPPORT
THE SARASOTA PROSTATE INITIATIVE, INC - 1661 RINGLING BLVD UNIT 75 - SARASOTA, FL 34230-7003	83-0634414	501(C)(3)	14,104.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE SUNSHINE ACADEMY AND DAYCARE CORPORATION - 2520 43RD ST W - BRADENTON, FL 34209	59-2444484	501(C)(3)	24,225.	0.			GENERAL SUPPORT
THE TREE FOUNDATION, INC. P.O. BOX 48839 SARASOTA, FL 34230-5839	65-0904869	501(C)(3)	12,989.	0.			GENERAL SUPPORT
THE TWIG CARES, INC. 826 PINEBROOK ROAD VENICE, FL 34285	27-3577334	501(C)(3)	63,162.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE UCLA FOUNDATION PO BOX 7145 PASADENA, CA 91109	95-2250801	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
THE WAREHOUSE OF VENICE, INC. PO BOX 844 VENICE, FL 34284-0844	57-1176809	501(C)(3)	12,967.	0.			GENERAL SUPPORT

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THEATRE ODYSSEY P.O. BOX 1383 SARASOTA, FL 34230-1383	84-1702076	501(C)(3)	7,369.	0.			GENERAL SUPPORT
THERE'S STILL HOPE 3810 42ND AVENUE WEST BRADENTON, FL 34205	82-0778542	501(C)(3)	14,914.	0.			GENERAL SUPPORT
THOMAS JEFFERSON UNIVERSITY - MEDICAL COLLEGE - P.O. BOX 71331 - PHILADELPHIA, PA 19176	23-1352651	501(C)(3)	9,648.	0.			GENERAL SUPPORT
TICKETS FOR KIDS FOUNDATION 700 COCONUT AVENUE, UNIT 112 SARASOTA, FL 34236-4935	02-0559825	501(C)(3)	5,158.	0.			GENERAL SUPPORT
TIDEWELL FOUNDATION INC. 5955 RAND BLVD SARASOTA, FL 34238	85-0729071	501(C)(3)	523,149.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TRANSITION SARASOTA INC P.O. BOX 1861 SARASOTA, FL 34230	47-5682533	501(C)(3)	13,029.	0.			GENERAL SUPPORT
TRIUMPH OVER KID CANCER FOUNDATION 723 COLEMAN AVENUE CORPUS CHRISTI, TX 78401	27-2224984	501(C)(3)	10,000.	0.			GENERAL SUPPORT
TRULY VALUED INC P.O. BOX 381 PALMETTO, FL 34220	81-2755747	501(C)(3)	19,269.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TRUSTEES OF THE MASONIC HALL AND ASYLUM FUND - 71 WEST 23RD STREET, SUITE 1003 - NEW YORK, NY 10010	13-5563012	501(C)(3)	6,677.	0.			GENERAL SUPPORT

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TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - PO BOX 71332 - PHILADELPHIA, PA 19176	23-1352685	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
UNCOMMON KIDS INC 1620 BAY ROAD SARASOTA, FL 34239-6808	47-4672187	501(C)(3)	8,246.	0.			GENERAL SUPPORT
UNDERDOG RESCUE OF FLORIDA INC P.O. BOX 351 BRADENTON, FL 34206	80-0204675	501(C)(3)	45,527.	0.			GENERAL SUPPORT
UNIDOSNOW, INC. 1750 17TH ST., BLDG C 2 SARASOTA, FL 34234	27-4102169	501(C)(3)	169,047.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
UNITARIAN UNIVERSALIST CHURCH OF SARASOTA - 3975 FRUITVILLE RD. - SARASOTA, FL 34232	59-0954128	501(C)(3)	7,950.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED BOARD FOR CHRISTIAN HIGHER EDUCATION IN ASIA - 475 RIVERSIDE DR., STE 1221 - NEW YORK, NY 10115	13-5562367	501(C)(3)	6,000.	0.			GENERAL SUPPORT
UNITED COMMUNITY CENTERS, INC. 922 24TH ST. E. BRADENTON, FL 34208	65-0282384	501(C)(3)	17,324.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED STATES HOLOCAUST MEMORIAL COUNCIL - 100 RAOUL WALLENBERG PLACE, SW - WASHINGTON, DC 20024-2126	52-1309391	501(C)(3)	26,054.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED WAY OF CHARLOTTE COUNTY 17831 MURDOCK CIRCLE, STE A PORT CHARLOTTE, FL 33948	59-1149995	501(C)(3)	423,604.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT

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UNITED WAY OF SOUTH SARASOTA COUNTY, INC. - 4242 SOUTH TAMiami TRAIL - VENICE, FL 34293	59-1100846	501(C)(3)	12,314.	0.			GENERAL SUPPORT
UNITED WAY SUNCOAST INC. 5201 WEST KENNEDY BOULEVARD, STE. 6 TAMPA, FL 33609	59-3725701	501(C)(3)	18,461.	0.			GENERAL SUPPORT
UNIVERSITY OF MINNESOTA FOUNDATION P.O. BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	15,601.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF MONTEVALLO FOUNDATION - STATION 6215 - MONTEVALLO, AL 35115	23-7349527	501(C)(3)	16,000.	0.			GENERAL SUPPORT
UNIVERSITY OF SOUTH FLORIDA FOUNDATION - 4202 E. FOWLER AVE., ALC100 - TAMPA, FL 33620-5455	59-0879015	501(C)(3)	49,794.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF SOUTH FLORIDA FOUNDATION WUSF 89.7 - 4202 E. FOWLER AVE., TVB 100 - TAMPA, FL 33620-6870	59-0879015	501(C)(3)	77,483.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF SOUTHERN CALIFORNIA 1150 SOUTH OLIVE STREET, 25TH FLOOR LOS ANGELES, CA 90015	95-1642394	501(C)(3)	14,601.	0.			GENERAL SUPPORT
UNIVERSITY OF ST. FRANCIS 500 WILCOX ST JOLIET, IL 60435	36-2170999	501(C)(3)	17,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF THE CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769-1372	61-0470593	501(C)(3)	42,804.	0.			GENERAL SUPPORT

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UNIVERSITY OF WISCONSIN FOUNDATION US BANK LOCKBOX, BOX 78807 MILWAUKEE, WI 53278-0807	39-0743975	501(C)(3)	35,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UPPER DES MOINES OPPORTUNITY, INC. 101 EAST ROBINS STREET, PO BOX 519 GRAETTINGER, IA 51342	42-0923424	501(C)(3)	10,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
URBANITE THEATRE INC. 1487 2ND STREET SARASOTA, FL 34236	46-5554467	501(C)(3)	74,387.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
US FUND FOR UNICEF 125 MAIDEN LANE NEW YORK, NY 10038	13-1760110	501(C)(3)	18,525.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VALERIE'S HOUSE PO BOX 1955 FORT MYERS, FL 33902-1955	47-3701240	501(C)(3)	18,262.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VAN WEZEL FOUNDATION, INC. 777 NORTH TAMiami TRAIL 3RD FLOOR SARASOTA, FL 34236-4047	59-2807055	501(C)(3)	95,696.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE NASHVILLE, TN 37240-7727	62-0476822	501(C)(3)	8,755.	0.			GENERAL SUPPORT
VENICE AREA AUDUBON SOCIETY PO BOX 1381 VENICE, FL 34284-1381	23-7450895	501(C)(3)	11,446.	0.			GENERAL SUPPORT
VENICE AREA BEAUTIFICATION, INC. 257 TAMiami TRAIL N. VENICE, FL 34285-1916	65-0223440	501(C)(3)	34,909.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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VENICE AREA CHAMBER OF COMMERCE FOUNDATION - 597 TAMIAMI TRL S - VENICE, FL 34285-2927	65-0441705	501(C)(3)	6,815.	0.			GENERAL SUPPORT
VENICE AREA MOBILE MEALS INC 920 S. TAMIAMI TRAIL VENICE, FL 34285-3652	59-1805535	501(C)(3)	43,219.	0.			GENERAL SUPPORT
VENICE ART CENTER, INC. 390 NOKOMIS AVENUE S. VENICE, FL 34285	59-6178294	501(C)(3)	26,262.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE CAT COALITION PO BOX 991 VENICE, FL 34284-0991	26-3193138	501(C)(3)	22,265.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE CHALLENGER BASEBALL INC 680 PERCHERON CIRCLE NOKOMIS, FL 34275	26-3214658	501(C)(3)	14,564.	0.			GENERAL SUPPORT
VENICE CHORALE, INC. P.O. BOX 1004 VENICE, FL 34284-1004	75-3036470	501(C)(3)	26,509.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE CHRISTIAN PRIVATE SCHOOL 1200 CENTER RD VENICE, FL 34292	59-2834505	501(C)(3)	18,004.	0.			GENERAL SUPPORT
VENICE CONCERT BAND INC 1312 90TH COURT NW BRADENTON, FL 34209-9605	65-0195475	501(C)(3)	19,212.	0.			GENERAL SUPPORT
VENICE HERITAGE, INC. P O BOX 1190 VENICE, FL 34284-1190	65-0537496	501(C)(3)	12,209.	0.			CAPITAL PURCHASES, GENERAL SUPPORT

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule I (Form 990)

59-1956886

Page 1

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

(a) Name and address of 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
VENICE HISTORIC PRESERVATION LEAGUE, INC. DBA VENICE AREA HISTORICAL SOCIETY - P.O. BOX 995 - VENICE, FL 34284-0995	65-0334416	501(C)(3)	14,047.	0.			GENERAL SUPPORT
VENICE INSTITUTE FOR PERFORMING ARTS CENTER MANAGEMENT, INC. - 1 INDIAN AVENUE, BUILDING 5 - VENICE, FL 34285	81-1190704	501(C)(3)	8,066.	0.			GENERAL SUPPORT
VENICE MAIN STREET INC. 101 W. VENICE AVE. #23 VENICE, FL 34285-1940	59-2815346	501(C)(3)	21,789.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE NOKOMIS COMMUNITY PRESCHOOL INC - P.O. BOX 1641 - NOKOMIS, FL 34274	82-0995843	501(C)(3)	13,345.	0.			GENERAL SUPPORT
VENICE PRIDE INC 3276 E VENICE AVE VENICE, FL 34292-2533	84-4192645	501(C)(3)	14,233.	0.			GENERAL SUPPORT
VENICE SYMPHONY, INC. P.O. BOX 1561 VENICE, FL 34284-1561	59-1710244	501(C)(3)	103,846.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE TAKEDOWN CLUB INCORPORATED 11811 GRANITE WOODS LOOP VENICE, FL 34292-4113	81-4745228	501(C)(3)	8,415.	0.			GENERAL SUPPORT
VENICE THEATRE, INC. 140 TAMPA AVE. W. VENICE, FL 34285	59-6005807	501(C)(3)	159,755.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VENICE TOUCHDOWN CLUB INC PO BOX 997 VENICE, FL 34284-0960	65-0928559	501(C)(3)	7,621.	0.			GENERAL SUPPORT

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule I (Form 990)

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

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VINTAGE PAWS SANCTUARY 7950 SR 72 SARASOTA, FL 34241	45-3687769	501(C)(3)	57,167.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VIRGINIA B. ANDES VOLUNTEER COMMUNITY CLINIC INC - 21297 OLEAN BLVD. UNIT B - PORT CHARLOTTE, FL 33952-6704	65-0958642	501(C)(3)	21,509.	0.			GENERAL SUPPORT
VISIBLE MEN ACADEMY 921 63RD AVENUE EAST BRADENTON, FL 34203	46-0930264	501(C)(3)	129,815.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VIVIAN BEAUMONT THEATER INC DBA LINCOLN CENTER THEATER - 150 WEST 65TH STREET - NEW YORK, NY 10023	13-3004747	501(C)(3)	20,000.	0.			GENERAL SUPPORT
WATER WELL TRUST, INC. P.O. BOX 2399 DAVIDSON, NC 28036	27-1659354	501(C)(3)	8,000.	0.			GENERAL SUPPORT
WE ARE THE RIPPLE 5330 HEIN AVE SE EAST CANTON, OH 44730	87-1614479	501(C)(3)	10,000.	0.			GENERAL SUPPORT
WE CARE MANATEE, INC. 353 6TH AVE W BRADENTON, FL 34205	59-3606103	501(C)(3)	33,706.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WEDU-FLORIDA WEST COAST PUBLIC BROADCASTING INC - 1300 NORTH BOULEVARD - TAMPA, FL 33607-5645	59-0840626	501(C)(3)	157,684.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WEE CARE CHRISTIAN ACADEMY 10540 HAMILTON WAY, PO BOX 147 MYAKKA CITY, FL 34251	26-1792274	501(C)(3)	11,063.	0.			GENERAL SUPPORT

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule I (Form 990)

59-1956886

Page 1

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

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WEST VIRGINIA HEALTH RIGHT, INC. 1520 WASHINGTON ST., E CHARLESTON, WV 25311	31-1066881	501(C)(3)	100,000.	0.			GENERAL SUPPORT
WESTCOAST BLACK THEATRE TROUPE 1012 N. ORANGE AVENUE SARASOTA, FL 34236	65-1040662	501(C)(3)	461,243.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
WILDLIFE, INC P.O. BOX 1449 ANNA MARIA, FL 34216	65-0093613	501(C)(3)	39,637.	0.			GENERAL SUPPORT
WILKINSON ELEMENTARY SCHOOL 3400 WILKINSON ROAD SARASOTA, FL 34231	59-6000847	501(C)(3)	9,570.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WILLIAM CAREY UNIVERSITY 710 WILLIAM CAREY PKWY, WCU BOX #14 HATTIESBURG, MS 39401	64-0329300	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
WILLIAM MONROE ROWLETT ACADEMY FOR ARTS AND COMMUNICATIONS, INC. - 3500 9TH STREET EAST - BRADENTON, FL 34208	46-5521687	501(C)(3)	10,178.	0.			GENERAL SUPPORT
WINGSPAN PRODUCTIONS, INC. 4118 ROBERTS POINT CIRCLE SARASOTA, FL 34242	86-1837793	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
WINTERGARDEN PRESBYTERIAN CHURCH (DBA GARDEN OF EATIN') - 18305 WINTERGARDEN AVE - PORT CHARLOTTE, FL 33948-6119	23-6393377	501(C)(3)	5,079.	0.			GENERAL SUPPORT
WOMEN'S RESOURCE CENTER OF MANATEE, INC. - 1926 MANATEE AVENUE W - BRADENTON, FL 34205-5835	59-3034653	501(C)(3)	70,964.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

Schedule I (Form 990)



**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule I (Form 990)

59-1956886

Page 1

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

(a) Name and address of 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
WOODLAND EARLY CHILDHOOD CENTER, INC. - 9607 STATE ROAD 70 E - BRADENTON, FL 34202	65-0423299	501(C)(3)	89,484.	0.			GENERAL SUPPORT
WOODWELL CLIMATE RESEARCH CENTER 149 WOODS HOLE ROAD FALMOUTH, MA 02540	04-3005094	501(C)(3)	10,000.	0.			GENERAL SUPPORT
WORLD OF CHUCKO LTD 6022 CHAPARRAL AVE SARASOTA, FL 34243-5341	84-2869126	501(C)(3)	13,006.	0.			GENERAL SUPPORT
WSLR INC PO BOX 2540 SARASOTA, FL 34230	56-2485148	501(C)(3)	71,580.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
XAVIER HIGH SCHOOL 181 RANDOLPH ROAD MIDDLETOWN, CT 06457	06-1442909	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
YAH-YAH GIRLS INC DBA THE BACK PACK KIDZ - 1133 BAL HARBOR BLVD #1139 - PUNTA GORDA, FL 33950	37-1475987	501(C)(3)	12,760.	0.			GENERAL SUPPORT
YMCA OF SOUTHWEST FLORIDA INC. 701 CENTER ROAD VENICE, FL 34285	59-1629660	501(C)(3)	193,948.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
YOUNG LIFE EAST MANATEE PO BOX 20835 BRADENTON, FL 34204	84-0385934	501(C)(3)	28,039.	0.			GENERAL SUPPORT
YOUNG LIFE OF MANATEE COUNTY P.O. BOX 14876 BRADENTON, FL 34280-4876	84-0385934	501(C)(3)	49,466.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Schedule I (Form 990)

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11-18-21

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

Schedule I (Form 990) 2021

59-1956886

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	411	764,479.	0.		SCHOLARSHIPS

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

PART I, LINE 2:

CERTAIN GRANTEEES ARE REQUIRED TO SUBMIT WRITTEN FINAL REPORTS IN A SPECIFIC  
FORMAT UPON (I) COMPLETION OF THE GRANT (II) REQUEST BY THE FOUNDATION, OR  
(III) 13 MONTHS FROM THE TIME THE GRANT IS AWARDED, WHICHEVER COMES FIRST.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Employer identification number

**59-1956886**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

**a** The organization? .....

**b** Any related organization? .....

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

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

**a** The organization? .....

**b** Any related organization? .....

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

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

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

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

Yes No

<b>1b</b>		
<b>2</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>		<b>X</b>
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2021

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Schedule J (Form 990) 2021

59-1956886

Page **2**

**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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROXANNE JERDE CEO/PRESIDENT	(i)	269,258.	53,000.	0.	25,043.	11,098.	358,399.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LAURA SPENCER CFO/CAO	(i)	182,953.	34,604.	0.	19,841.	8,514.	245,912.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ELIZABETH PENNEWILL GENERAL COUNSEL	(i)	167,237.	31,052.	0.	17,905.	8,491.	224,685.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MISCHA KIRBY VP, STRATEGIC COMM. & MARKETING	(i)	136,180.	21,191.	0.	13,029.	9,351.	179,751.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KIRSTEN RUSSELL VP, COMMUNITY IMPACT	(i)	131,950.	17,767.	0.	13,475.	7,807.	170,999.	0.
	(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)							

Schedule J (Form 990) 2021

**Part III** Supplemental Information

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

SUPPLEMENTAL OFFICER WAGE INFORMATION

THE OFFICERS OF THE BOARD OF DIRECTORS ANNUALLY REVIEWS AND DETERMINES

THE COMPENSATION PACKAGE OF THE PRESIDENT/CEO.

**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

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

Name of the organization **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.** Employer identification number **59-1956886**

**Part I** **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	99	3,454,972.	STOCK EXCHANGE
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....	X	1	230,000.	INDEPENDENT APPRAISA
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( ) .....				
26 Other ▶ ( ) .....				
27 Other ▶ ( ) .....				
28 Other ▶ ( ) .....				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2021

**Part II**

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

SCHEDULE M, LINE 32B:

INVESTMENT ACCOUNTS ARE HELD AT MAJOR FINANCIAL INSTITUTIONS WITH MONEY  
MANAGERS PROCESSING AND SELLING STOCK CONTRIBUTIONS.



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

Employer identification number  
59-1956886

**FORM 990, PART I, LINE 6 VOLUNTEERS**

THE BOARD MEMBERS ARE NOT PAID AND THEREFORE ARE CONSIDERED VOLUNTEERS.

COMMUNITY VOLUNTEERS ALSO SERVE ON BOARD APPOINTED TASK FORCES AND

COMMITTEES INCLUDING OUR SCHOLARSHIP COMMITTEE.

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**

ABOVE \$10,000 TO LOCAL NONPROFIT ORGANIZATIONS TO ADDRESS INNOVATIVE,

URGENT AND EMERGENCY NEEDS, SO THAT UNEXPECTED OBSTACLES OR

OPPORTUNITIES CAN BE ADDRESSED BY NONPROFITS AS PART OF THE IMPORTANT

WORK THEY DO FOR THE COMMUNITY.

II) THE COMMUNITY FOUNDATION OF SARASOTA COUNTY BELIEVES THAT ALL WHO

WISH TO FURTHER THEIR EDUCATION AND INCREASE FUTURE POTENTIAL FOR

SUCCESS SHOULD HAVE AN EQUAL CHANCE TO TAKE ADVANTAGE OF THE

OPPORTUNITIES AVAILABLE TO THEM. EACH YEAR, THE COMMUNITY FOUNDATION OF

SARASOTA COUNTY AWARDS SCHOLARSHIPS TO A VARIETY OF INDIVIDUALS WHO ARE

PURSuing FURTHER EDUCATION.

III) EACH YEAR, SIGNIFICANT INVESTMENTS ARE MADE TO THE COMMUNITY FROM

THE FUNDS OF DONORS WHO ENSURED SUPPORT OF VARIOUS ORGANIZATIONS AND

CAUSES IN PERPETUITY. SUBSTANTIAL TIME, FUNDING, AND STRATEGIES ARE

COALESCED TO SUPPORT AN ARRAY OF KEY INITIATIVES SPEARHEADED BY THE

COMMUNITY FOUNDATION. WE HAVE DEDICATED OURSELVES TO HELPING THOSE IN

NEED IN OUR COMMUNITIES BY PROVIDING TARGETED FINANCIAL ASSISTANCE

(PRIMARILY FOR MORTGAGE, RENT AND UTILITIES) TO FAMILIES AND

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

Schedule O (Form 990) 2021

Name of the organization	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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INDIVIDUALS ON THE VERGE OF HOMELESSNESS THROUGH THE SEASON OF SHARING  
FUND, AS WELL AS SUPPORTING OUR REGION'S YOUTH THROUGH OUR STUDENT  
EMERGENCY FUND OPERATED IN PARTNERSHIP WITH SARASOTA COUNTY SCHOOLS.  
ADDITIONALLY, OUR EXTENDED WORK IN EDUCATION LEVERAGES NATIONAL  
RESEARCH AND INITIATIVES SUCH AS THE CAMPAIGN FOR GRADE-LEVEL READING  
AND THE REGIONAL COLLABORATIVE PARTNERSHIP OF EDEXPLORESRQ. INSPIRED BY  
ASCEND AT THE ASPEN INSTITUTE, WE HAVE FOCUSED THESE EFFORTS (AND  
OTHERS) THROUGH A TWO-GENERATION LENS, WHICH LOOKS TO ADDRESS THE NEEDS  
OF BOTH VULNERABLE CHILDREN AND THEIR PARENTS TOGETHER IN ORDER TO  
CREATE A COMMUNITY IN WHICH A LEGACY OF ECONOMIC SECURITY AND  
EDUCATIONAL SUCCESS PASSES FROM ONE GENERATION TO THE NEXT.

THE GIVING PARTNER: IN AN EFFORT TO INCREASE TRANSPARENCY AND  
ENCOURAGE INFORMED GIVING, THE COMMUNITY FOUNDATION FUNDS AND MAINTAINS  
A LOCAL ONLINE RESOURCE TO REVIEW NONPROFITS SERVING OUR FOUR-COUNTY  
REGION. MORE THAN 700 NONPROFITS HAVE PROFILES THAT ARE EASILY  
ACCESSED BY POTENTIAL FUNDERS, DONORS AND THE PUBLIC AT  
THEGIVINGPARTNER.ORG. EACH PROFILE SHARES GOVERNANCE, MANAGEMENT,  
FINANCIAL AND PROGRAMMATIC INFORMATION. THIS PLATFORM IS USED TO ASSESS  
GRANT FUNDING BY THE COMMUNITY FOUNDATION, OUR DONORS AND OTHER  
REGIONAL FUNDERS. IT IS ALSO A KEY COMPONENT OF THE REGION'S ONLINE  
GIVING CAMPAIGN, THE GIVING CHALLENGE, WHICH THE FOUNDATION ORGANIZES  
FOR THE COMMUNITY ON A ROLLING SCHEDULE. SINCE 2012, DONORS FROM  
THROUGHOUT OUR REGION HAVE SHOWN THEIR LOVE FOR LOCAL NONPROFIT  
ORGANIZATIONS BY PROVIDING MORE THAN \$75 MILLION IN UNRESTRICTED  
FUNDING TO SUPPORT THEIR MISSIONS THROUGH EIGHT CHALLENGES TO BENEFIT  
MORE THAN 700 NONPROFITS LISTED IN THE GIVING PARTNER.

Name of the organization	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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IN FALL 2020 WE LAUNCHED A NEW DEPARTMENT TO ANALYZE TRENDS IN COMMUNITY NEEDS PROVIDED THROUGH PUBLIC DATABASES, COMBINED WITH OUR DEEP UNDERSTANDING OF AND THE DATA RESOURCES AVAILABLE THROUGH THE GIVING PARTNER. KNOWN AS THE "KNOWLEDGE & EQUITY" DEPARTMENT, THIS TEAM IS ALSO IDENTIFYING OPERATIONAL NEEDS OF NONPROFIT ORGANIZATIONS TO BETTER SERVE THE COMMUNITY AND WILL ADDRESS THOSE NEEDS THROUGH OUTREACH, TRAININGS, OR OTHER MEANS. THESE SERVICES ARE AN EVOLUTION OF THE FOUNDATION'S LONGSTANDING OFFERINGS OF WORKSHOPS AND CONSULTING SERVICES.

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

THE CHIEF FINANCIAL OFFICER AND THE PRESIDENT / CEO INITIALLY REVIEW THE RETURN BEFORE PRESENTING THE RETURN TO THE AUDIT COMMITTEE WHO RECOMMENDS FINAL APPROVAL TO THE BOARD OF DIRECTORS BEFORE FILING THE RETURN.

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

ANNUALLY, BOARD MEMBERS, EMPLOYEES, CONSULTANTS AND VOLUNTEERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE WHICH IS REVIEWED UPON RECEIPT BY THE PRESIDENT/CEO, CFAO OR GENERAL COUNSEL AND AGAIN DURING THE AUDIT PROCESS.

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

THE BOARD OF DIRECTORS ANNUALLY REVIEWS AND DETERMINES THE COMPENSATION PACKAGE OF THE PRESIDENT/CEO.

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

THE ORGANIZATION MAKES ALL DOCUMENTS AVAILABLE UPON REQUEST.

Name of the organization	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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## FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-1,131,549.
DISTRIBUTIONS TO ANNUITANTS	-637,293.
OPERATING EXPENSES ALLOCATED TO TRUST	-155,677.
CURRENT YEAR AGENCY ACTIVITY	-785,606.
NET INVESTMENT INCOME ON K-1'S RECEIVED	-717,899.
TOTAL TO FORM 990, PART XI, LINE 9	-3,428,024.

## FORM 990, PART XII, LINE 2C AUDIT REVIEW PROCESS

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.** Employer identification number **59-1956886**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFSC ASSET COMPANY, LLC - 02-0630928 2635 FRUITVILLE ROAD SARASOTA, FL 34237	ASSET HOLDING COMPANY	FLORIDA	2,025,363.	4,146,191.	N/A

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
MANATEE COMMUNITY FOUNDATION, INC. - 65-0833500, 2820 MANATEE AVENUE WEST, BRADENTON, FL 34205	GRANTMAKING	FLORIDA	501(C)(3)	LINE 12A, I	N/A		X
COMMUNITY FOUNDATION TRUST OF SARASOTA COUNTY - 65-0173371, 2635 FRUITVILLE RD, SARASOTA, FL 34237	GRANTMAKING	FLORIDA	501(C)(3)	LINE 12A, I	N/A		X
WETHERINGTON FOUNDATION, INC. - 37-1472181 2635 FRUITVILLE RD SARASOTA, FL 34237	GRANTMAKING	FLORIDA	501(C)(3)	LINE 12A, I	N/A		X

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

Schedule R (Form 990) 2021



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

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

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			





Provide additional information for responses to questions on Schedule R. See instructions.



FEIN: 59-1956886

A B C D E F G H I J K L M N O P Q R R S T U V W

Form **990-W**  
(Worksheet)Department of the Treasury  
Internal Revenue Service**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

(and on Investment Income for Private Foundations) FORM 990-T

OMB No. 1545-0047

**2022**

- Go to [www.irs.gov/Form990W](http://www.irs.gov/Form990W) for instructions and the latest information.  
► Keep for your records. Do not send to the Internal Revenue Service.

**FOR YOUR RECORDS****DO NOT FILE**

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1. See instructions for tax computation .....	2	
3	Alternative minimum tax for trusts. See instructions .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits. See instructions .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes. See instructions .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels. See instructions .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....	10a	
b	Enter the tax shown on the 2021 return. See instructions. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	1,981.
c	<b>2022 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	2,000.

		(a)	(b)	(c)	(d)
11	Installment due dates. See instructions .....	11		03/15/23	06/15/23
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." .....	12		1,500.	500.
13	2021 Overpayment. See instructions .....	13			
14	Payment due (Subtract line 13 from line 12) .....	14		1,500.	500.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)**FOR YOUR RECORDS****DO NOT FILE**

Form **8879-TE****IRS e-file Signature Authorization  
for a Tax Exempt Entity**

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022**2021**Department of the Treasury  
Internal Revenue Service▶ **Do not send to the IRS. Keep for your records.**▶ **Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**Name of filer **THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**EIN or SSN  
**59-1956886**Name and title of officer or person subject to tax **ERIN JONES  
CFO****Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

<b>1a</b> Form 990 check here .....	<input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> .....
<b>2a</b> Form 990-EZ check here ...	<input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9) .....	<b>2b</b> .....
<b>3a</b> Form 1120-POL check here ▶	<input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22) .....	<b>3b</b> .....
<b>4a</b> Form 990-PF check here ...	<input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part V, line 5) .....	<b>4b</b> .....
<b>5a</b> Form 8868 check here .....	<input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c) .....	<b>5b</b> .....
<b>6a</b> Form 990-T check here .....	<input checked="" type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4) .....	<b>6b</b> <u>1,981.</u>
<b>7a</b> Form 4720 check here .....	<input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1) .....	<b>7b</b> .....
<b>8a</b> Form 5227 check here .....	<input type="checkbox"/>	<b>b</b> FMV of assets at end of tax year (Form 5227, Item D) .....	<b>8b</b> .....
<b>9a</b> Form 5330 check here .....	<input type="checkbox"/>	<b>b</b> Tax due (Form 5330, Part II, line 19) .....	<b>9b</b> .....
<b>10a</b> Form 8038-CP check here ▶	<input type="checkbox"/>	<b>b</b> Amount of credit payment requested (Form 8038-CP, Part III, line 22) .....	<b>10b</b> .....

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

☒ I authorize **KERKERING, BARBERIO & CO.** to enter my PIN **15607**  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

**Part III Certification and Authentication**

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**56249519908**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form - See Instructions****Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

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

OMB No. 1545-0047

- **File a separate application for each return.**  
► **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. <b>THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</b>	Taxpayer identification number (TIN) <b>59-1956886</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>2635 FRUITVILLE ROAD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SARASOTA, FL 34237</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) **07**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

**ERIN JONES**

- The books are in the care of ► **2635 FRUITVILLE ROAD - SARASOTA, FL 34237**

Telephone No. ► **(941) 955-3000**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐ **►**
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **►** ☐ . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until **MAY 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year **►** or  
► ☒ tax year beginning **JUL 1, 2021**, and ending **JUN 30, 2022**.

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

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>1,708.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>0.</b>

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

EXTENDED TO MAY 15, 2023

Form **990-T****Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0047

**2021**For calendar year 2021 or other tax year beginning **JUL 1, 2021**, and ending **JUN 30, 2022**▶ Go to **www.irs.gov/Form990T** for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for  
501(c)(3) Organizations OnlyDepartment of the Treasury  
Internal Revenue Service

<b>A</b> <input type="checkbox"/> Check box if address changed.	<b>Print or Type</b>	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</b>	<b>D</b> Employer identification number <b>59-1956886</b>
<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A		Number, street, and room or suite no. If a P.O. box, see instructions. <b>2635 FRUITVILLE ROAD</b>	<b>E</b> Group exemption number (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code <b>SARASOTA, FL 34237</b>	<b>F</b> <input type="checkbox"/> Check box if an amended return.
		<b>C</b> Book value of all assets at end of year ..... <b>386,793,850.</b>	
<b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust			
<b>H</b> Check if filing only to ▶ <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439			
<b>I</b> Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... ▶ <input type="checkbox"/>			
<b>J</b> Enter the number of attached Schedules A (Form 990-T) ..... <b>1</b>			
<b>K</b> During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation. ▶			
<b>L</b> The books are in care of ▶ <b>ERIN JONES</b> Telephone number ▶ <b>(941) 955-3000</b>			

**Part I Total Unrelated Business Taxable Income**

<b>1</b> Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	<b>1</b>	<b>10,432.</b>
<b>2</b> Reserved .....	<b>2</b>	
<b>3</b> Add lines 1 and 2 .....	<b>3</b>	<b>10,432.</b>
<b>4</b> Charitable contributions (see instructions for limitation rules) .....	<b>4</b>	<b>0.</b>
<b>5</b> Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	<b>5</b>	<b>10,432.</b>
<b>6</b> Deduction for net operating loss. See instructions .....	<b>6</b>	
<b>7</b> Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	<b>7</b>	<b>10,432.</b>
<b>8</b> Specific deduction (generally \$1,000, but see instructions for exceptions) .....	<b>8</b>	<b>1,000.</b>
<b>9</b> <b>Trusts.</b> Section 199A deduction. See instructions .....	<b>9</b>	
<b>10</b> <b>Total deductions.</b> Add lines 8 and 9 .....	<b>10</b>	<b>1,000.</b>
<b>11</b> <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	<b>11</b>	<b>9,432.</b>

**Part II Tax Computation**

<b>1</b> <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	<b>1</b>	<b>1,981.</b>
<b>2</b> <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	<b>2</b>	
<b>3</b> <b>Proxy tax.</b> See instructions .....	<b>3</b>	
<b>4</b> Other tax amounts. See instructions .....	<b>4</b>	
<b>5</b> Alternative minimum tax (trusts only) .....	<b>5</b>	
<b>6</b> <b>Tax on noncompliant facility income.</b> See instructions .....	<b>6</b>	
<b>7</b> <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	<b>7</b>	<b>1,981.</b>

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2021)

**Part III Tax and Payments**

<b>1a</b>	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	<b>1a</b>		
<b>b</b>	Other credits (see instructions)	<b>1b</b>		
<b>c</b>	General business credit. Attach Form 3800 (see instructions)	<b>1c</b>		
<b>d</b>	Credit for prior year minimum tax (attach Form 8801 or 8827)	<b>1d</b>		
<b>e</b>	<b>Total credits.</b> Add lines 1a through 1d	<b>1e</b>		
<b>2</b>	Subtract line 1e from Part II, line 7	<b>2</b>		1,981.
<b>3</b>	Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	<b>3</b>		
<b>4</b>	<b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	<b>4</b>		1,981.
<b>5</b>	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	<b>5</b>		0.
<b>6a</b>	Payments: A 2020 overpayment credited to 2021	<b>6a</b>	1,708.	
<b>b</b>	2021 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	<b>6b</b>		
<b>c</b>	Tax deposited with Form 8868	<b>6c</b>		
<b>d</b>	Foreign organizations: Tax paid or withheld at source (see instructions)	<b>6d</b>		
<b>e</b>	Backup withholding (see instructions)	<b>6e</b>		
<b>f</b>	Credit for small employer health insurance premiums (attach Form 8941)	<b>6f</b>		
<b>g</b>	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	<b>6g</b>		
<b>7</b>	<b>Total payments.</b> Add lines 6a through 6g	<b>7</b>		1,708.
<b>8</b>	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	<b>8</b>		5.
<b>9</b>	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed <b>STATEMENT 3</b>	<b>9</b>		278.
<b>10</b>	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	<b>10</b>		
<b>11</b>	Enter the amount of line 10 you want: <b>Credited to 2022 estimated tax</b> <b>Refunded</b>	<b>11</b>		

**Part IV Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b>	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
			X
<b>2</b>	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
<b>3</b>	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
<b>4</b>	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 4.		
<b>5</b>	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
	523000	\$ 114,825.	
		\$	
<b>6a</b>	Did the organization change its method of accounting? (see instructions)		X
<b>b</b>	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	CFO Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	REBECCA U. STONER			PTIN P00585910
	Firm's name <b>KERKERING, BARBERIO &amp; CO.</b>	Firm's EIN <b>59-1753337</b>		
	P.O. BOX 49348			
	Firm's address <b>SARASOTA, FL 34230-6348</b>	Phone no. <b>941-365-4617</b>		



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FORM 990-T	LATE PAYMENT INTEREST	STATEMENT	1
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DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE	11/15/22	273.	273.	.0600	46	2.
INTEREST RATE CHANGE	12/31/22	0.	275.	.0700	135	7.
DATE FILED	05/15/23		282.			
TOTAL LATE PAYMENT INTEREST						9.

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FORM 990-T	LATE PAYMENT PENALTY	STATEMENT	2
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DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY
TAX DUE	11/15/22	273.	273.	6	8.
DATE FILED	05/15/23		273.		
TOTAL LATE PAYMENT PENALTY					8.

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FORM 990-T	INTEREST AND PENALTIES	STATEMENT	3
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TAX FROM FORM 990-T, PART IV	273.
UNDERPAYMENT PENALTY	5.
LATE PAYMENT INTEREST	9.
LATE PAYMENT PENALTY	8.
TOTAL AMOUNT DUE	295.

**SCHEDULE A  
(Form 990-T)**

Department of the Treasury  
Internal Revenue Service

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1  
OMB No. 1545-0047

**2021**

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> Name of the organization INC.	<b>B</b> Employer identification number 59-1956886
<b>C</b> Unrelated business activity code (see instructions) ▶ 523000	<b>D</b> Sequence: 1 of 1

**E** Describe the unrelated trade or business ▶ **MAKENA CAPITAL SPLITTER X, L.P.**

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)		<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b>		
<b>4 a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions		<b>4a</b> 30,515.		30,515.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions		<b>4b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <b>STATEMENT 4</b>		<b>5</b> 66,863.		66,863.
<b>6</b> Rent income (Part IV)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)		<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)		<b>10</b>		
<b>11</b> Advertising income (Part IX)		<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)		<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12		<b>13</b> 97,378.		97,378.

**Part II Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)	<b>1</b>	
<b>2</b> Salaries and wages	<b>2</b>	
<b>3</b> Repairs and maintenance	<b>3</b>	
<b>4</b> Bad debts	<b>4</b>	
<b>5</b> Interest (attach statement). See instructions	<b>5</b>	
<b>6</b> Taxes and licenses	<b>6</b>	113.
<b>7</b> Depreciation (attach Form 4562). See instructions	<b>7</b>	
<b>8</b> Less depreciation claimed in Part III and elsewhere on return	<b>8a</b>	<b>8b</b>
<b>9</b> Depletion	<b>9</b>	
<b>10</b> Contributions to deferred compensation plans	<b>10</b>	
<b>11</b> Employee benefit programs	<b>11</b>	
<b>12</b> Excess exempt expenses (Part VIII)	<b>12</b>	
<b>13</b> Excess readership costs (Part IX)	<b>13</b>	
<b>14</b> Other deductions (attach statement) <b>SEE STATEMENT 5</b>	<b>14</b>	45,105.
<b>15 Total deductions.</b> Add lines 1 through 14	<b>15</b>	45,218.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	<b>16</b>	52,160.
<b>17</b> Deduction for net operating loss. See instructions <b>STATEMENT 6</b>	<b>17</b>	41,728.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16	<b>18</b>	10,432.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

**Part III Cost of Goods Sold**Enter method of inventory valuation 

1	Inventory at beginning of year .....	1	
2	Purchases .....	2	
3	Cost of labor .....	3	
4	Additional section 263A costs (attach statement) .....	4	
5	Other costs (attach statement) .....	5	
6	<b>Total.</b> Add lines 1 through 5 .....	6	
7	Inventory at end of year .....	7	
8	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and in Part I, line 2 .....	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)**

1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Rent received or accrued	A	B	C	D
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) .....				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) .....				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D .....				
3	Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) .....	0.			
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) .....				
5	Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) .....				0.

**Part V Unrelated Debt-Financed Income** (see instructions)

1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Gross income from or allocable to debt-financed property .....	A	B	C	D
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement) .....				
b	Other deductions (attach statement) .....				
c	Total deductions (add lines 3a and 3b, columns A through D) .....				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement) .....				
5	Average adjusted basis of or allocable to debt-financed property (attach statement) .....				
6	Divide line 4 by line 5 .....	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6 .....				
8	<b>Total gross income</b> (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) .....	0.			
9	Allocable deductions. Multiply line 3c by line 6 .....				
10	<b>Total allocable deductions.</b> Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .....	0.			
11	<b>Total dividends-received deductions</b> included in line 10 .....	0.			

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						

  

Nonexempt Controlled Organizations				
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
<b>Totals</b>			0.	0.

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
	Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>	0.			0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4	
5	Gross income from activity that is not unrelated business income .....	5	
6	Expenses attributable to income entered on line 5 .....	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7	

Schedule A (Form 990-T) 2021

**1** Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

<b>A</b>	
<b>B</b>	
<b>C</b>	
<b>D</b>	

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
<b>2</b> Gross advertising income .....				
Add columns A through D. Enter here and on Part I, line 11, column (A) .....				0.

**a**

3 Direct advertising costs by periodical .....					
a Add columns A through D. Enter here and on Part I, line 11, column (B)					0.

**4** Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.

<b>5</b>	Readership costs .....				
<b>6</b>	Circulation income .....				
<b>7</b>	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero .....				
<b>8</b>	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				

**a** Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on  
Part II, line 13 ..... **0.**

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

**Total.** Enter here and on Part II, line 1 0.

[illegible]

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	4
DESCRIPTION		NET INCOME OR (LOSS)	
MAKENA CAPITAL SPLITTER X, L.P. - ORDINARY BUSINESS INCOME (LOSS)		55,342.	
MAKENA CAPITAL SPLITTER X, L.P. - NET RENTAL REAL ESTATE INCOME		3,912.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER NET RENTAL INCOME (LOSS)		1.	
MAKENA CAPITAL SPLITTER X, L.P. - INTEREST INCOME		493.	
MAKENA CAPITAL SPLITTER X, L.P. - DIVIDEND INCOME		1,387.	
MAKENA CAPITAL SPLITTER X, L.P. - ROYALTIES		1,245.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER PORTFOLIO INCOME (LOSS)		4,471.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER INCOME (LOSS)		12.	
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		66,863.	

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT	5
DESCRIPTION		AMOUNT	
SECTION 179 DEDUCTION		54.	
CONTRIBUTIONS		52.	
INVESTMENT INTEREST EXPENSE		351.	
SECTION 59(E)(2) EXPENDITURES		42,493.	
OTHER DEDUCTIONS		2,155.	
TOTAL TO SCHEDULE A, PART II, LINE 14		45,105.	

FORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT	6
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PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
114,825.	41,728.	73,097.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION	STATEMENT	7
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TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	80,283.	1,479.	78,804.	78,804.
06/30/20	36,021.	0.	36,021.	36,021.
NOL CARRYOVER AVAILABLE THIS YEAR			114,825.	114,825.

**SCHEDULE D  
(Form 1120)**Department of the Treasury  
Internal Revenue Service**Capital Gains and Losses**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,  
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.  
▶ Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2021**

Name

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Employer identification number

**59-1956886**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**See instructions for how to figure the amounts  
to enter on the lines below.This form may be easier to complete if you  
round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				<b>988.</b>
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>4</b>	
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>5</b>	
<b>6</b> Unused capital loss carryover (attach computation) .....			<b>6</b>	( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....			<b>7</b>	<b>988.</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**See instructions for how to figure the amounts  
to enter on the lines below.This form may be easier to complete if you  
round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				<b>16,833.</b>
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....			<b>11</b>	<b>12,694.</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>12</b>	
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>13</b>	
<b>14</b> Capital gain distributions .....			<b>14</b>	
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....			<b>15</b>	<b>29,527.</b>

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	<b>988.</b>
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	<b>29,527.</b>
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	<b>30,515.</b>

**Note:** If losses exceed gains, see *Capital Losses* in the instructions.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2021





59-1956886

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

[illegible]Form **8949** (2021)

Form **4797**Department of the Treasury  
Internal Revenue Service**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts  
Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

OMB No. 1545-0184

**2021**Attachment  
Sequence No. **27**

Name(s) shown on return

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Identifying number

**59-1956886****1a** Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S  
(or substitute statement) that you are including on line 2, 10, or 20 .....**1a****b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of  
MACRS assets .....**1b****c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS  
assets .....**1c****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other  
Than Casualty or Theft-Most Property Held More Than 1 Year** (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	<b>MAKENA CAPITAL SPLITTER X, L.P.</b>						<b>12,694.</b>

**3** Gain, if any, from Form 4684, line 39 .....**3****4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....**4****5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....**5****6** Gain, if any, from line 32, from other than casualty or theft .....**6****7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....**7****12,694.****Partnerships and S corporations.** Report the gain or (loss) following the instructions for Form 1065, Schedule K,  
line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount  
from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section  
1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on  
the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.**8** Nonrecaptured net section 1231 losses from prior years. See instructions .....**8****9** Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If  
line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term  
capital gain on the Schedule D filed with your return. See instructions .....**9****12,694.****Part II Ordinary Gains and Losses** (see instructions)**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


**11** Loss, if any, from line 7 .....**11**

( )

**12** Gain, if any, from line 7 or amount from line 8, if applicable .....**12****13** Gain, if any, from line 31 .....**13****14** Net gain or (loss) from Form 4684, lines 31 and 38a .....**14****15** Ordinary gain from installment sales from Form 6252, line 25 or 36 .....**15****16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....**16****17** Combine lines 10 through 16 .....**17****18** For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines  
a and b below. For individual returns, complete lines a and b below.**a** If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the  
loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used  
as an employee.) Identify as from "Form 4797, line 18a." See instructions .....**18a****b** Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1  
(Form 1040), Part I, line 4 .....**18b**

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2021)

**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255** (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
<b>These columns relate to the properties on lines 19A through 19D.</b>		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20 Gross sales price ( <b>Note:</b> See line 1a before completing.)	20		
21 Cost or other basis plus expense of sale	21		
22 Depreciation (or depletion) allowed or allowable	22		
23 Adjusted basis. Subtract line 22 from line 21	23		
24 Total gain. Subtract line 23 from line 20	24		
<b>25 If section 1245 property:</b>			
a Depreciation allowed or allowable from line 22	25a		
b Enter the <b>smaller</b> of line 24 or 25a	25b		
<b>26 If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.			
a Additional depreciation after 1975. See instructions	26a		
b Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b		
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c		
d Additional depreciation after 1969 and before 1976	26d		
e Enter the <b>smaller</b> of line 26c or 26d	26e		
f Section 291 amount (corporations only)	26f		
g Add lines 26b, 26e, and 26f	26g		
<b>27 If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.			
a Soil, water, and land clearing expenses	27a		
b Line 27a multiplied by applicable percentage	27b		
c Enter the <b>smaller</b> of line 24 or 27b	27c		
<b>28 If section 1254 property:</b>			
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a		
b Enter the <b>smaller</b> of line 24 or 28a	28b		
<b>29 If section 1255 property:</b>			
a Applicable percentage of payments excluded from income under section 126. See instructions	29a		
b Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b		

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

**Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less** (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation. See instructions	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

**SCHEDULE D  
(Form 1120)**Department of the Treasury  
Internal Revenue Service**Capital Gains and Losses**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,  
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.  
▶ Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2021**

Name

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Employer identification number

**59-1956886**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**See instructions for how to figure the amounts  
to enter on the lines below.This form may be easier to complete if you  
round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				<b>988.</b>
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>4</b>	
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>5</b>	
<b>6</b> Unused capital loss carryover (attach computation) .....			<b>6</b>	( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....			<b>7</b>	<b>988.</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**See instructions for how to figure the amounts  
to enter on the lines below.This form may be easier to complete if you  
round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				<b>16,833.</b>
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....			<b>11</b>	<b>12,694.</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>12</b>	
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>13</b>	
<b>14</b> Capital gain distributions .....			<b>14</b>	
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....			<b>15</b>	<b>29,527.</b>

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	<b>988.</b>
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	<b>29,527.</b>
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	<b>30,515.</b>

**Note:** If losses exceed gains, see *Capital Losses* in the instructions.

## Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

2021

Attachment Sequence No. **12A**

► Go to [www.irs.gov/Form8949](http://www.irs.gov/Form8949) for instructions and the latest information.

Name(s) shown on return

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

**Social security number or taxpayer identification no.**

59-1956886

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part I Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

[illegible]

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

59-1956886

THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

☒ (F) Long-term transactions not reported to you on Form 1099-B

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

# Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return.

FORM 990-T

OMB No. 1545-0123

**2021**

▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.**

Employer identification number  
**59-1956886**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

## Part I Required Annual Payment

1	Total tax (see instructions)	1	1,981.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty	3	1,981.
4	Enter the tax shown on the corporation's 2020 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	
5	Required annual payment. Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	1,981.

## Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☐ The corporation is using the annualized income installment method.
- 8 ☐ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

## Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	10/15/21	12/15/21	03/15/22	06/15/22
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	495.	496.	495.	495.
11 <b>Estimated tax paid or credited for each period.</b> For column (a) only, enter the amount from line 11 on line 15. See instructions	11	1,708.			
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column	12		1,213.	717.	222.
13 Add lines 11 and 12	13		1,213.	717.	222.
14 Add amounts on lines 16 and 17 of the preceding column	14				
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	1,708.	1,213.	717.	222.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	0.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17				273.
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	1,213.	717.	222.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.



**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2021 and before 7/1/2021	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$	<b>22</b>	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2021 and before 10/1/2021	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$	<b>24</b>	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2021 and before 1/1/2022	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$	<b>26</b>	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2021 and before 4/1/2022	<b>27</b>	SEE ATTACHED WORKSHEET		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$	<b>28</b>	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2022 and before 7/1/2022	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	<b>30</b>	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	<b>32</b>	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	<b>34</b>	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2022 and before 3/16/2023	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	<b>36</b>	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36	<b>37</b>	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	<b>38</b>			
		\$		5.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

FORM 990-T  
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s) <b>THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</b>					Identifying Number <b>** - ***6886</b>
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
10/15/21	495.	495.			
10/15/21	-1,708.	-1,213.			
12/15/21	496.	-717.			
03/15/22	495.	-222.			
03/31/22	0.	-222.	76	.000109589	
06/15/22	495.	273.	15	.000109589	
06/30/22	0.	273.	92	.000136986	3.
09/30/22	0.	273.	46	.000164384	2.
Penalty Due (Sum of Column F). .....					5.

\* Date of estimated tax payment, withholding  
credit date or installment due date.

Form **4797**Department of the Treasury  
Internal Revenue Service**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts  
Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

OMB No. 1545-0184

**2021**Attachment  
Sequence No. **27**

Name(s) shown on return

**THE COMMUNITY FOUNDATION OF SARASOTA CO.  
INC.**

Identifying number

**59-1956886****1a** Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S  
(or substitute statement) that you are including on line 2, 10, or 20 .....**1a****b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of  
MACRS assets .....**1b****c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS  
assets .....**1c****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other  
Than Casualty or Theft-Most Property Held More Than 1 Year** (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	<b>MAKENA CAPITAL SPLITTER X, L.P.</b>						<b>12,694.</b>

**3** Gain, if any, from Form 4684, line 39 .....**3****4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....**4****5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....**5****6** Gain, if any, from line 32, from other than casualty or theft .....**6****7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....**7****12,694.****Partnerships and S corporations.** Report the gain or (loss) following the instructions for Form 1065, Schedule K,  
line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount  
from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section  
1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on  
the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.**8** Nonrecaptured net section 1231 losses from prior years. See instructions .....**8****9** Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If  
line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term  
capital gain on the Schedule D filed with your return. See instructions .....**9****12,694.****Part II Ordinary Gains and Losses** (see instructions)**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


**11** Loss, if any, from line 7 .....**11**

( )

**12** Gain, if any, from line 7 or amount from line 8, if applicable .....**12****13** Gain, if any, from line 31 .....**13****14** Net gain or (loss) from Form 4684, lines 31 and 38a .....**14****15** Ordinary gain from installment sales from Form 6252, line 25 or 36 .....**15****16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....**16****17** Combine lines 10 through 16 .....**17****18** For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines  
a and b below. For individual returns, complete lines a and b below.**a** If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the  
loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used  
as an employee.) Identify as from "Form 4797, line 18a." See instructions .....**18a****b** Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1  
(Form 1040), Part I, line 4 .....**18b**

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2021)

**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255** (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
<b>These columns relate to the properties on lines 19A through 19D.</b>		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20 Gross sales price ( <b>Note:</b> See line 1a before completing.)	20		
21 Cost or other basis plus expense of sale	21		
22 Depreciation (or depletion) allowed or allowable	22		
23 Adjusted basis. Subtract line 22 from line 21	23		
24 Total gain. Subtract line 23 from line 20	24		
<b>25 If section 1245 property:</b>			
a Depreciation allowed or allowable from line 22	25a		
b Enter the <b>smaller</b> of line 24 or 25a	25b		
<b>26 If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.			
a Additional depreciation after 1975. See instructions	26a		
b Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b		
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c		
d Additional depreciation after 1969 and before 1976	26d		
e Enter the <b>smaller</b> of line 26c or 26d	26e		
f Section 291 amount (corporations only)	26f		
g Add lines 26b, 26e, and 26f	26g		
<b>27 If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.			
a Soil, water, and land clearing expenses	27a		
b Line 27a multiplied by applicable percentage	27b		
c Enter the <b>smaller</b> of line 24 or 27b	27c		
<b>28 If section 1254 property:</b>			
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a		
b Enter the <b>smaller</b> of line 24 or 28a	28b		
<b>29 If section 1255 property:</b>			
a Applicable percentage of payments excluded from income under section 126. See instructions	29a		
b Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b		

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

**Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less** (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation. See instructions	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Florida Tentative Income / Franchise Tax Return  
and Application for Extension of Time to File Return

1019  
F-7004  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

FOR YOUR RECORDS  
Information for Filing Florida Form F-7004

F-7004  
R. 01/17

**When to file** - File this application on or before the original due date of the taxpayer's corporate income tax or partnership return. Do not file before the end of the tax year.

To file online go to [www.floridarevenue.com](http://www.floridarevenue.com)

**Penalties** - If you are required to pay tax with this application, failure to pay will void any extension of time and subject the taxpayer to penalties and interest. There is also a penalty for late-file return when no tax is due.

**Signature** - A person authorized by the taxpayer must sign Florida Form F-7004. They must be an officer or partner of the taxpayer; a person currently enrolled to practice before the Internal Revenue Service (IRS); or attorney or Certified Public Accountant qualified to practice before the IRS under Public Law 89-332.

**The Florida Form F-7004 must be filed** - To receive an extension of time to file your Florida return, Florida Form F-7004 must be timely filed, even if you have already filed a federal extension request. A federal extension by itself does not extend the time to file a Florida return.

An extension for Florida tax purposes may be granted, even though no federal extension was granted. See Rule 12C-1.0222, F.A.C., for information on the requirements that must be met for your request for an extension of time to be valid.

A. If applicable, state the reason you need the extension:

B. Type of federal return filed: 990-T  
Contact person for questions: ROXANNE G. JERDE  
Telephone number: 941-955-3000  
Contact Person email address: EJONES@CFSARASOTA.ORG

Extension of Time Request	Florida Income/Franchise Tax Due
1. Tentative amount of Florida tax for the taxable year	1. 0.00
2. LESS: Estimated tax payments for the taxable year	2. 0.00
3. Balance due - You must pay 100% of the tax tentatively determined due with this extension request.	3. 0.00

Transfer the amount on Line 3 to **Tentative tax due**.

**Make checks payable and mail to:**

FLORIDA DEPARTMENT OF REVENUE, 5050 W TENNESSEE STREET, TALLAHASSEE FL 32399-0135

144961  
09-27-21

Florida Department of Revenue - Corporate Income Tax  
Florida Tentative Income / Franchise Tax Return  
and Application for Extension of Time to File Return

1019  
F-7004  
R. 01/17

Name **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.**  
Address **2635 FRUITVILLE ROAD**  
City/State/ZIP **SARASOTA, FL 34237**

FEIN **59-1956886**  
Taxable Year End **06/30/22**  
FILING STATUS Partnership ☐ S-corporation ☒  
All other federal returns to be filed ☒  
Tentative Tax Due \$ **0.00**

Under penalties of perjury, I declare that I have been authorized by the above named taxpayer to make this application, that to the best of my knowledge and belief the statements herein are true and correct:

Sign Here: \_\_\_\_\_

Date: \_\_\_\_\_

591956886 0 0 0  
3 0 0 0  
20220630 0 0 0  
0 0 0 0  
012 0 0 0  
0 0 0 0  
0 0 0 0  
0 0 0 0

0

8133 0 20220630 0002005030 6 3591956886 0000 0

**Florida Corporate Income/Franchise Tax Return**F-1120, R. 01/22 **1019**FEIN **59-1956886**For calendar year 2021  
or tax year beginning**JUL 1**, 2021  
ending**JUN 30, 2022**Rule 12C-1.051  
Florida Administrative Code  
Effective 01/22  
Page 1 of 6

813302022063000020050379359195688600000

**THE COMMUNITY FOUNDATION OF SARASOTA CO.**Name **INC.**Address **2635 FRUITVILLE ROAD**City/State/ZIP **SARASOTA, FL 34237**☐ Check here if any changes have been made to name or address**Computation of Florida Net Income Tax**

- |  |                        |                 |          |
|--|------------------------|-----------------|----------|
| 1. Federal taxable income (see instructions) - <b>Attach pages 1-5 of federal return</b>   | Check here if negative | _____           | 9,432.00 |
| 2. State income taxes deducted in computing federal taxable income<br>(attach schedule)  | Check here if negative | _____           |          |
| 3. Additions to federal taxable income (from Schedule I)   | Check here if negative | _____           |          |
| 4. Total of Lines 1, 2 and 3   | Check here if negative | _____           | 9,432.00 |
| 5. Subtractions from federal taxable income (from Schedule II)   | Check here if negative | _____           |          |
| 6. Adjusted federal income (Line 4 minus Line 5)   | Check here if negative | _____           | 9,432.00 |
| 7. Florida portion of adjusted federal income (see instructions)   | Check here if negative | _____           | 9,432.00 |
| 8. Nonbusiness income allocated to Florida (from Schedule R)   | Check here if negative | _____           |          |
| 9. <b>Florida exemption</b>  |                        |                 | 9,432.00 |
| 10. Florida net income (Line 7 plus Line 8 minus Line 9)   |                        |                 | 0.00     |
| 11. Tax due: 3.535% of Line 10   |                        |                 | 0.00     |
| 12. Credits against the tax (from Schedule V)  |                        |                 |          |
| 13. Total corporate income/franchise tax due (Line 11 minus Line 12)   |                        |                 | 0.00     |
| 14. a) Penalty: F-2220 _____ b) Other _____  |                        |                 |          |
| c) Interest: F-2220 _____ d) Other _____   |                        | Line 14 Total ▶ |          |
| 15. Total of Lines 13 and 14   |                        |                 |          |
| 16. Payment credits: Estimated tax payments 16a \$ <input type="text"/>  |                        |                 |          |
| Tentative tax payment 16b \$ <input type="text"/>  |                        |                 |          |
| 17. Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due here and on payment coupon.<br>If the amount is negative (overpayment), enter on Line 18 and/or Line 19 |                        |                 |          |
| 18. Credit: Enter amount of overpayment <b>credited</b> to next year's estimated tax here and on payment coupon  |                        |                 |          |
| 19. Refund: Enter amount of overpayment to be <b>refunded</b> here and on payment coupon   |                        |                 |          |

144081 10-21-21

**Payment Coupon for Florida Corporate Income Tax Return****Do Not Detach**YEAR ENDING **06/30/22****1019**  
F-1120  
R. 01/22

To ensure proper credit to your account, enclose your check with tax return when mailing.

**THE COMMUNITY FOUNDATION OF S**Name **INC.**Address **2635 FRUITVILLE ROAD**City/State/ZIP **SARASOTA, FL 34237**If 6/30 year end, return is due 1st day of the 4th month after the close of the  
taxable year, otherwise return is due 1st day of the 5th month after the close  
of the taxable year.

591956886	0	0	0
20210701	0	0	0
20220630	943200	0	0
00000000	0.000000	0	0
012	0	0	0
201	0	0	0
943200	0	0	0
0	943200	0	0

0

8133 0 20220630 0002005037 9 3591956886 0000 0



## THE COMMUNITY FOUNDATION OF SARASOTA

FEIN 59-1956886

1019  
F-1120  
R. 01/22  
Page 2 of 6  
06/30/22**This return is considered incomplete unless a copy of the federal return is attached.**

If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign here	Signature of officer (must be an original signature)	Date	Title	CFO
Paid preparers only	Preparer's signature	Date	Preparer check if self-employed <input type="checkbox"/>	Preparer's PTIN P00585910
	Firm's name (or yours if self-employed) and address KERKERING, BARBERIO & CO. P.O. BOX 49348 SARASOTA, FL			FEIN 59-1753337 ZIP 34230-6348

**All Taxpayers Must Answer Questions A through M Below - See Instructions**

- A. State of incorporation: **FLORIDA**
- B. Florida Secretary of State document number: **749965**
- C. Florida consolidated return? YES ☐ NO ☒
- D. ☐ Initial return ☐ Final return (final federal return filed)
- E. Principal Business Activity Code (as pertains to Florida)  
**523000**
- F. A Florida extension of time was timely filed? YES ☒ NO ☐
- G-1. Corporation is a member of a controlled group? YES ☐ NO ☒ If yes, attach list.
- G-2. Part of a federal consolidated return? YES ☐ NO ☒ If yes, provide:  
FEIN from federal consolidated return: \_\_\_\_\_  
Name of corporation: \_\_\_\_\_
- G-3. The federal common parent has sales, property, or payroll in Florida? YES ☐ NO ☒
- H. Location of corporate books:  
**2635 FRUITVILLE ROAD**  
City, State, ZIP: **SARASOTA, FL 34237**
- I. Taxpayer is a member of a Florida partnership or joint venture? YES ☐ NO ☒
- J. Enter date of latest IRS audit: \_\_\_\_\_  
a) List years examined: \_\_\_\_\_
- K. Contact person concerning this return: **ROXANNE G. JERDE**  
a) Contact person telephone number: **941-955-3000**  
b) Contact person e-mail address: **EJONES@CFSARASOTA.ORG**
- L. Type of federal return filed ☐ 1120 ☐ 1120S or **990-T**

**Where to Send Payments and Returns**

Make check payable to and mail with return to:

Florida Department of Revenue  
5050 W Tennessee Street  
Tallahassee FL 32399-0135If you are requesting a **refund** (Line 19), send your return to:Florida Department of Revenue  
PO Box 6440  
Tallahassee FL 32314-6440**Remember:**

- ✓ **Make your check payable to the Florida Department of Revenue.**
- ✓ **Write your FEIN on your check.**
- ✓ **Sign your check and return.**
- ✓ **Attach a copy of your federal return.**
- ✓ **Attach a copy of your Florida Form F-7004 (extension of time) if applicable.**



NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/22

### Schedule I - Additions and/or Adjustments to Federal Taxable Income

1. Interest excluded from federal taxable income (see instructions)	1.
2. Undistributed net long-term capital gains (see instructions)	2.
3. Net operating loss deduction (attach schedule)	3.
4. Net capital loss carryover (attach schedule)	4.
5. Excess charitable contribution carryover (attach schedule)	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.
9. Guaranty association assessment(s) credit	9.
10. Rural and/or urban high crime area job tax credits	10.
11. State housing tax credit	11.
12. Florida Tax Credit Scholarship Program Credits (AKA credit for contributions for nonprofit scholarship-funding organizations)	12.
13. Florida Renewable energy production tax credit	13.
14. New markets tax credit	14.
15. Entertainment industry tax credit	15.
16. Research and Development tax credit	16.
17. Energy Economic Zone tax credit	17.
18. s. 168(k) IRC special bonus depreciation	18.
19. Qualified Improvement Property Decoupling.	19.
20. Business Meal Expenses at a Restaurant.	20.
21. Film, Television, and Live theatrical production expenses.	21.
22. Other additions (attach schedule)	22.
23. Total Lines 1 through 22. Enter total on Line 23 and on Page 1, Line 3.	23.

### Schedule II - Subtractions from Federal Taxable Income

1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC income \$ _____ (b) plus s. 862, IRC dividends \$ _____ (c) plus s. 951A, IRC, income \$ _____ (d) less direct and indirect expenses and related amounts deducted under s. 250, IRC \$ _____ Total ►	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income \$ _____ (b) less direct and indirect expenses \$ _____ Total ►	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3. Florida net operating loss carryover deduction (see instructions)	3.
4. Florida net capital loss carryover deduction (see instructions)	4.
5. Florida excess charitable contribution carryover (see instructions)	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.
8. Eligible net income of an international banking facility (see instructions)	8.
9. s. 179, IRC expense (see instructions)	9.
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.
11. Depreciation of qualified improvement property	11.
12. Film, Television, and Live Theatrical Expenses.	12.
13. Other subtractions (attach statement)	13.
14. Total Lines 1 through 13. Enter total on Line 14 and on Page 1, Line 5.	14.





NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/22

<b>Schedule III - Apportionment of Adjusted Federal Income</b>					
<b>III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.</b>					
	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight <small>If any factor in Column (b) is zero, see note on Pg 9 of the instructions.</small>	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)				X 25% or	
2. Payroll				X 25% or	
3. Sales (Schedule III-C below)				X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column (e)). Enter here and on Schedule IV, Line 2.					<b>1.000000</b>
<b>III-B For use in computing average value of property (use original cost).</b>		WITHIN FLORIDA		TOTAL EVERYWHERE	
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year	
1. Inventories of raw material, work in process, finished goods					
2. Buildings and other depreciable assets					
3. Land owned					
4. Other tangible and intangible (financial org. only) assets (attach schedule)					
5. Total (Lines 1 through 4)					
6. Average value of property					
a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) ..... 6a. _____					
b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) ..... 6b. _____					
7. Rented property (8 times net annual rent)					
a. Rented property in Florida ..... 7a. _____					
b. Rented property Everywhere ..... 7b. _____					
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).					
a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida ..... 8a. _____					
b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere ..... 8b. _____					
<b>III-C Sales Factor</b>			(a) TOTAL WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	
1. Sales (gross receipts)			<b>N/A</b>		
2. Sales delivered or shipped to Florida purchasers				<b>N/A</b>	
3. Other gross receipts (rents, royalties, interest, etc. when applicable)					
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns (a) and (b))					
<b>III-D Special Apportionment Fractions (see instructions)</b>		(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ((a) ÷ (b)) Rounded to Six Decimal Places	
1. Insurance companies (attach copy of Schedule T - Annual Report)					
2. Transportation services					

<b>Schedule IV - Computation of Florida Portion of Adjusted Federal Income</b>	
1. Apportionable adjusted federal income from Page 1, Line 6	1.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.



NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/22

Schedule V - Credits Against the Corporate Income/Franchise Tax	
1. Florida health maintenance organization credit (attach assessment notice)	1.
2. Capital investment tax credit (attach certification letter)	2.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4. Community contribution tax credit (attach certification letter)	4.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6. Rural job tax credit (attach certification letter)	6.
7. Urban high crime area job tax credit (attach certification letter)	7.
8. Hazardous waste facility tax credit	8.
9. Florida alternative minimum tax (AMT) credit	9.
10. Contaminated site rehabilitation tax credit (AKA voluntary cleanup tax credit) (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida Tax Credit: Scholarship Program Credits. (AKA credit for contributions to nonprofit scholarship-funding organizations) (attach certificate)	12.
13. Florida renewable energy production tax credit	13.
14. New markets tax credit	14.
15. Entertainment industry tax credit	15.
16. Research and Development tax credit	16.
17. Energy Economic Zone tax credit	17.
18. Other credits (attach schedule)	18.
19. Total credits against the tax (sum of Lines 1 through 18 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	19.

**Schedule R - Nonbusiness Income**

**Line 1. Nonbusiness income (loss) allocated to Florida**

Type	Amount
_____	_____
_____	_____
_____	_____
Total allocated to Florida ..... 1.	_____
(Enter here and on Page 1, Line 8)	

**Line 2. Nonbusiness income (loss) allocated elsewhere**

Type	State/country allocated to	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total allocated elsewhere ..... 2.		_____

**Line 3. Total nonbusiness income**

Grand total. Total of Lines 1 and 2 ..... 3.	_____
(Enter here and on Schedule II, Line 7)	



NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/22

**Estimated Tax Worksheet**  
**For Taxable Years Beginning On or After January 1,**

- |  |    |    |                 |
|--|----|----|-----------------|
| 1. Florida income expected in taxable year .....   | 1. | \$ | <u>9,432.00</u> |
| 2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N) ..... | 2. | \$ | <u>9,432.00</u> |
| 3. Estimated Florida net income (Line 1 less Line 2) .....   | 3. | \$ | _____           |
| 4. Total Estimated Florida tax (5.5% of Line 3) .....  |    | \$ | _____           |
| Less: Credits against the tax .....  | 4. | \$ | _____           |
5. Computation of installments:
- |                       |  |           |
|-----------------------|--|-----------|
| Payment due dates and | If 6/30 year end, last day of 4th month,                     |           |
| payment amounts:      | otherwise last day of 5th month - Enter 0.25 of Line 4 ..... | 5a. _____ |
|                       | Last day of 6th month - Enter 0.25 of Line 4 .....           | 5b. _____ |
|                       | Last day of 9th month - Enter 0.25 of Line 4 .....           | 5c. _____ |
|                       | Last day of fiscal year - Enter 0.25 of Line 4 .....         | 5d. _____ |

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

- |  |        |    |       |
|--|--------|----|-------|
| 1. Amended estimated tax .....   | 1.     | \$ | _____ |
| 2. Less:   |        |    |       |
| (a) Amount of overpayment from last year elected for credit to estimated tax and applied to date ..... | 2a. -- | \$ | _____ |
| (b) Payments made on estimated tax declaration (Florida Form F-1120ES) .....                           | 2b. -- | \$ | _____ |
| (c) Total of Lines 2(a) and 2(b) .....   | 2c.    | \$ | _____ |
| 3. Unpaid balance (Line 1 less Line 2(c)) .....  | 3.     | \$ | _____ |
| 4. Amount to be paid (Line 3 divided by number of remaining installments) .....                        | 4.     | \$ | _____ |

**References**

*The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at [floridarevenue.com/forms](http://floridarevenue.com/forms).*

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated Income/Franchise Tax	Rule 12C-1.051, F.A.C.



THE COMMUNITY FOUNDATION OF SARASOTA CO.

1019  
F-1120  
R. 01/22

FEIN 59-1956886  
DATA Page 1 of 2

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THE COMMUNITY FOUNDATION OF SARASOTA CO.

1019  
F-1120  
R. 01/22

FEIN 59-1956886

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DATA Page 2 of 2

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