

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

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	C Name of organization THE COMMUNITY FOUNDATION OF SARASOTA CO. INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2635 FRUITVILLE ROAD City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL 34237 F Name and address of principal officer: ROXANNE G. JERDE SAME AS C ABOVE	D Employer identification number 59-1956886 E Telephone number 941-955-3000 G Gross receipts \$ 98,839,329. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I 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		
J Website: WWW.CFSARASOTA.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1979 M State of legal domicile: FL

Part I Summary

1	Briefly describe the organization's mission or most significant activities: COMMUNITY IMPACT POWERED BY PHILANTHROPY.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	45
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	72,448.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	13,509.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	45,645,781.	30,133,190.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,287,979.	3,695,700.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,097,794.	11,946,014.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	71,031,554.	45,774,904.
14	Benefits paid to or for members (Part IX, column (A), line 4)	41,450,229.	35,346,060.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	3,536,856.	3,779,882.
b	Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,758,952.	5,783,265.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	51,746,037.	44,909,207.
19	Revenue less expenses. Subtract line 18 from line 12	19,285,517.	865,697.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	386,793,850.	412,504,444.
22	Net assets or fund balances. Subtract line 21 from line 20	39,915,005.	41,975,668.
		346,878,845.	370,528,776.

Part II Signature Block

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

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

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
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 \$ 38,792,976. including grants of \$ 35,346,060.) (Revenue \$ 3,695,700.)
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, SUPPORTING CONSULTING SERVICES, AND OTHER CAPACITY-BUILDING BENEFITS. ADDITIONALLY, OUR ONGOING GRANT OPPORTUNITIES PROVIDE SUPPORT TO LOCAL

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 38,792,976.

Part IV Checklist of Required Schedules

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

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

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Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 45		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	1a 16		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization 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			346,726.	0.	38,005.	
(2) ELIZABETH PENNEWILL GENERAL COUNSEL	40.00			X			195,352.	0.	25,969.	
(3) MISCHA KIRBY VP, STRATEGIC COMM. & MARK	40.00			X			164,667.	0.	21,501.	
(4) ERIN JONES CFO EFF. 7/22/22	40.00			X			159,785.	0.	22,843.	
(5) KIRSTEN RUSSELL VP, COMMUNITY IMPACT	40.00			X			155,053.	0.	22,184.	
(6) LAURA SPENCER CFO/CAO THRU 7/22/22	40.00			X			151,914.	0.	19,295.	
(7) JAY YOUNG VP, PHILANTHROPY	40.00			X			137,088.	0.	32,474.	
(8) RANATA REEDER VP, KNOWLEDGE & EQUITY THRU 9/16/22	40.00			X			107,289.	0.	12,520.	
(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) DR. LAURA MATTIA DIRECTOR	1.00	X					0.	0.	0.	
(16) NELLE MILLER DIRECTOR	1.00	X					0.	0.	0.	
(17) DRAYTON SAUNDERS 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) CHARLES E. WILLIAMS DIRECTOR	1.00	X						0.	0.	0.
(22) MARY LOU WINNICK DIRECTOR	1.00	X						0.	0.	0.
(23) FELICE SCHULANER SECRETARY	1.00	X		X				0.	0.	0.
(24) DANIEL DELEO CHAIR	1.00	X		X				0.	0.	0.
(25) T. ANDREW STULTZ TREASURER	1.00	X		X				0.	0.	0.
(26) MARILYN THOMPSON VICE CHAIR	1.00	X		X				0.	0.	0.
1b Subtotal								1,417,874.	0.	194,791.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,417,874.	0.	194,791.

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
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	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	181,368.
RBC, 200 PARK AVE. 2ND FLOOR, FLORHAM PARK, NJ 07932	INVESTMENT MANAGEMENT	176,191.

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 2

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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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	296,059.			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	29,837,131.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 6,265,305.			
	h	Total. Add lines 1a-1f		30,133,190.			
	Program Service Revenue	2 a	ADMINISTRATIVE FEES	Business Code			
			900099	3,695,700.	3,695,700.		
b							
c							
d							
e							
f		All other program service revenue					
g	Total. Add lines 2a-2f		3,695,700.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		10,632,290.		10,559,842.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	b	Less: cost or other basis and sales expenses		54,378,149.			
	c	Gain or (loss)		53,064,425.			
	d	Net gain or (loss)		1,313,724.		1,313,724.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
b	Less: direct expenses						
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19						
b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a		Business Code				
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total revenue. See instructions			45,774,904.	3,695,700.	72,448.	
						11,873,566.	

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

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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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	32,838,781.	32,838,781.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,507,279.	2,507,279.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,524,104.	469,084.	436,623.	618,397.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,715,098.	637,363.	725,658.	352,077.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	61,535.	25,709.	30,863.	4,963.
9 Other employee benefits	271,237.	95,835.	102,594.	72,808.
10 Payroll taxes	207,908.	71,476.	75,419.	61,013.
11 Fees for services (nonemployees):				
a Management				
b Legal	60,777.	20,894.	22,047.	17,836.
c Accounting	57,281.	19,692.	20,779.	16,810.
d Lobbying	11,626.	3,997.	4,217.	3,412.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	854,902.	293,903.	310,116.	250,883.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,555,765.	1,222,419.	1,289,857.	1,043,489.
12 Advertising and promotion	342,111.	117,613.	124,101.	100,397.
13 Office expenses	64,173.	22,062.	23,279.	18,832.
14 Information technology	93,729.	32,223.	34,000.	27,506.
15 Royalties				
16 Occupancy	70,901.	24,375.	25,719.	20,807.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	60,590.	20,830.	21,979.	17,781.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	99,641.	34,255.	36,145.	29,241.
23 Insurance	65,634.	22,564.	23,809.	19,261.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a GRANT INITIATIVES	242,676.	242,676.		
b REPAIRS AND MAINTENANCE	165,080.	56,752.	59,883.	48,445.
c CREDIT CARD FEES	38,379.	13,194.	13,922.	11,263.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	44,909,207.	38,792,976.	3,381,010.	2,735,221.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> 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)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	4,366,330.	1	4,674,613.
	2 Savings and temporary cash investments	10,034,346.	2	10,287,121.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	79,545.	4	72,427.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	859,033.	7	1,217,002.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	69,231.	9	26,416.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,219,638.		
	b Less: accumulated depreciation	10b 2,137,177.		
	11 Investments - publicly traded securities	2,166,128.	10c	2,082,461.
	12 Investments - other securities. See Part IV, line 11	342,049,767.	11	371,379,595.
	13 Investments - program-related. See Part IV, line 11	3,855,491.	12	3,458,093.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	23,313,979.	14	19,306,716.
16 Total assets. Add lines 1 through 15 (must equal line 33)	386,793,850.	15	412,504,444.	
17 Accounts payable and accrued expenses	289,603.	16	531,979.	
18 Grants payable	2,879,404.	17	2,561,208.	
19 Deferred revenue		18		
20 Tax-exempt bond liabilities		19		
21 Escrow or custodial account liability. Complete Part IV of Schedule D		20		
22 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		21		
23 Secured mortgages and notes payable to unrelated third parties		22		
24 Unsecured notes and loans payable to unrelated third parties		23		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	36,745,998.	24	38,882,481.	
26 Total liabilities. Add lines 17 through 25	39,915,005.	25	41,975,668.	
26 Total liabilities. Add lines 17 through 25		26		
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	311,955,363.	27	335,226,906.
	28 Net assets with donor restrictions	34,923,482.	28	35,301,870.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	346,878,845.	32	370,528,776.
33 Total liabilities and net assets/fund balances	386,793,850.	33	412,504,444.	

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	45,774,904.
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,909,207.
3	Revenue less expenses. Subtract line 2 from line 1	3	865,697.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	346,878,845.
5	Net unrealized gains (losses) on investments	5	22,710,981.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	73,253.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	370,528,776.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
3b	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 _____		

Form 990 (2022)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

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

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	38,526,494.	45,593,190.	22,566,087.	45,645,781.	30,133,190.	182,464,742.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	38,526,494.	45,593,190.	22,566,087.	45,645,781.	30,133,190.	182,464,742.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						23,803,250.
6 Public support. Subtract line 5 from line 4.						158,661,492.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	38,526,494.	45,593,190.	22,566,087.	45,645,781.	30,133,190.	182,464,742.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	8,824,677.	9,664,834.	9,358,467.	11,143,980.	10,632,290.	49,624,248.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			10.			10.
11 Total support. Add lines 7 through 10						232,089,000.
12 Gross receipts from related activities, etc. (see instructions)					12	18,426,904.

13 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

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	68.36 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	68.58 %

16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the 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

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. 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 - 2021. 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

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 for the latest information.

OMB No. 1545-0047

2022

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

- 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)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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 for instructions and the latest information.

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	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number	59-1956886
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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) 2022

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												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">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.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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
1 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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		11,625.
j Total. Add lines 1c through 1i			11,625.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d 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
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 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."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 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 expenditures next year?	4	
5 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 PUBLIC 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

Part IV Supplemental Information *(continued)*

IMPACTS THEY ARE HAVING IN LOCAL COMMUNITIES.

Multiple horizontal lines for supplemental information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Table for conservation easement details (2a-2d). 3-9. Questions regarding modified easements, states, monitoring policies, staff hours, expenses, and reporting requirements.

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.

Form with sections 1a-1b and 2. 1a: Footnote for art collection. 1b: Amounts for art collection. 2: Amounts for art collection for financial gain.

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

Schedule D (Form 990) 2022

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	254,815,128.	290,848,982.	239,979,570.	239,210,243.	227,505,320.
b Contributions	10,725,685.	12,267,213.	1,908,150.	8,946,267.	10,021,887.
c Net investment earnings, gains, and losses	25,687,552.	-33,687,712.	62,619,978.	4,554,230.	12,968,310.
d Grants or scholarships	10,383,605.	11,228,288.	10,903,680.	10,015,397.	8,664,420.
e Other expenditures for facilities and programs				43,061.	107,407.
f Administrative expenses	2,787,780.	3,385,067.	2,755,036.	2,672,712.	2,513,447.
g End of year balance	278,056,980.	254,815,128.	290,848,982.	239,979,570.	239,210,243.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 90.3100 %
 - b Permanent endowment 8.9700 %
 - c Term endowment .7200 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		2,642,449.	1,222,106.	1,420,343.
c Leasehold improvements				
d Equipment		337,129.	273,600.	63,529.
e Other		1,240,060.	641,471.	598,589.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,082,461.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY CONTRACT	2,435,193.
(3) FUNDS HELD AS AGENCY ENDOWMENTS	36,447,288.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	38,882,481.

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...

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

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

1	Total revenue, gains, and other support per audited financial statements	1	72,749,670.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	22,710,981.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	11,307,666.
e	Add lines 2a through 2d	2e	34,018,647.
3	Subtract line 2e from line 1	3	38,731,023.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	685,534.
b	Other (Describe in Part XIII.)	4b	6,358,347.
c	Add lines 4a and 4b	4c	7,043,881.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	45,774,904.

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

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

1	Total expenses and losses per audited financial statements	1	46,284,878.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	7,410,725.
e	Add lines 2a through 2d	2e	7,410,725.
3	Subtract line 2e from line 1	3	38,874,153.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	685,534.
b	Other (Describe in Part XIII.)	4b	5,349,520.
c	Add lines 4a and 4b	4c	6,035,054.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	44,909,207.

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	1,699,090.
DISTRIBUTIONS TO ANNUITANTS	-452,088.
REVENUE OF AFFILIATED ENTITIES INCLUDED IN CONSOLIDATED FINANCIALS	10,060,664.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	11,307,666.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE ON FINANCIAL STMTS	3,459,424.
AGENCY INTEREST AND DIVIDENDS NOT INCLUDED ON FINANCIAL STATEMENTS	920,486.
AGENCY CONTRIBUTIONS NOT INCLUDED ON FINANCIAL STATEMENTS	936,729.
AGENCY REALIZED GAIN NOT INCLUDED ON FINANCIAL STATEMENTS	154,276.
INVESTMENT INCOME REPORTED ON K-1'S	590,773.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT RELATED TO 990S	296,659.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	6,358,347.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY AFFILIATED ENTITIES IN CONSOLIDATED FINANCIALS	7,245,803.
SHARED OPERATIONAL EXPENSES ALLOCATED TO TRUST	164,922.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	7,410,725.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE ON FINANCIAL STMTS	3,459,424.
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Part XIII Supplemental Information (continued)

AGENCY INVESTMENT FEES NOT INCLUDED ON FINANCIAL STATEMENTS	33,969.
INVESTMENT EXPENSES REPORTED ON K-1'S	135,399.
AGENCY GRANTS NOT INCLUDED ON FINANCIAL STATEMENTS	1,422,962.
AGENCY ADMINISTRATIVE FEES NOT INCLUDED ON FINANCIAL STATEMENTS	1,055.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT RELATED TO 990S	296,659.
AGENCY AUDIT & FILING FEES	50.
ROUNDING	2.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	5,349,520.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ABILITY TO INCLUDE, INC. 912 WEE BURN PL SARASOTA, FL 34243-5040	86-3937631	501(C)(3)	12,600.	0.			PROGRAM SUPPORT
ACADIA UNIVERSITY FOUNDATION 15 UNIVERSITY AVE WOLFWILLE, NOVA SCOTIA, CANADA B4P2R6	98-0537324	501(C)(3)	9,093.	0.			GENERAL SUPPORT
ADVENTURE FOR ALL CORPORATION P.O. BOX 645 SARASOTA, FL 34230	86-1243498	501(C)(3)	12,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AGAPE FLIGHTS, INC. 100 AIRPORT AVE E VENICE, FL 34285	59-2057436	501(C)(3)	50,044.	0.			GENERAL SUPPORT
AGASSIZ VILLAGE 185 DEAN STREET NORWOOD, MA 02062	04-2160531	501(C)(3)	12,781.	0.			GENERAL SUPPORT
AGAWAM COUNCIL 6 FUNDY RD., SUITE 100 FALMOUTH, ME 04105	22-2577250	501(C)(3)	12,781.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **523.**

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) 2022

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

Schedule I (Form 990)

59-1956886

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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
ALL FAITHS FOOD BANK INC 8171 BLAIKIE COURT SARASOTA, FL 34240-8321	65-0115814	501(C)(3)	349,978.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALL STAR CHILDREN'S FOUNDATION 3300 17TH STREET SARASOTA, FL 34235	20-2182079	501(C)(3)	6,275.	0.			GENERAL SUPPORT
ALLIANCE FRANCAISE DE SARASOTA, INC. - 715 N. WASHINGTON BOULEVARD, SUITE C - SARASOTA, FL 34236-4256	59-2381875	501(C)(3)	16,384.	0.			GENERAL SUPPORT
ALSO FOR GAY YOUTH, INC. 1470 BOULEVARD OF THE ARTS SARASOTA, FL 34236	74-2840470	501(C)(3)	61,662.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALTA VISTA ELEMENTARY SCHOOL 1050 S. EUCLID AVE. SARASOTA, FL 34237	59-6000847	501(C)(3)	39,210.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION, INC. - FLORIDA GULF - 14010 ROOSEVELT BLVD., SUITE 709 - CLEARWATER, FL	13-3039601	501(C)(3)	17,295.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN CANCER SOCIETY, FLORIDA DIVISION - P.O. BOX 17127 - TAMPA, FL 33682	13-1788491	501(C)(3)	23,546.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN CANCER SOCIETY, LEE COUNTY UNIT - PO BOX 17127 - TAMPA, FL 33682	13-1788491	501(C)(3)	20,543.	0.			GENERAL SUPPORT
AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. - 125 BROAD ST, 18TH FLOOR - NEW YORK, NY 10004	13-6213516	501(C)(3)	5,750.	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
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE, INC. - 633 THIRD AVENUE, 20TH FLOOR - NEW YORK CITY, NY 10017	13-1623886	501(C)(3)	5,100.	0.			PROGRAM SUPPORT
AMERICAN FRIENDS OF MAGEN DAVID ADOM - PO BOX 96402 - WASHINGTON, DC 20090-6402	13-1790719	501(C)(3)	15,623.	0.			GENERAL 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
AMERICAN FRIENDS OF THE NATIONAL GALLERY, LONDON - 31 WEST 34TH STREET, 7TH FLR #7010 - NEW YORK, NY 10001	13-3321549	501(C)(3)	10,815.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION SOUTHWEST FLORIDA - 9200 ESTERO PARK COMMONS BOULEVARD, SUITE 7 - ESTERO, FL 33928	13-5613797	501(C)(3)	20,482.	0.			GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE, WEST COAST FLORIDA CHAPTER - 1605 MAIN ST., STE 612 - SARASOTA, FL 34236	13-5563393	501(C)(3)	11,140.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN LUNG ASSOCIATION - TAMPA, FL - 730 SOUTH STERLING AVENUE, SUITE 303 - TAMPA, FL 33609	13-1632524	501(C)(3)	20,482.	0.			GENERAL SUPPORT
AMNESTY INTERNATIONAL USA, INC. 311 W. 43RD STREET, 7TH FLOOR NEW YORK, NY 10036	52-0851555	501(C)(3)	5,194.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ANIMAL RESCUE COALITION, INC. 6320 TOWER LANE SARASOTA, FL 34240	65-0950292	501(C)(3)	22,600.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

Schedule I (Form 990)

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
ANIMAL WELFARE LEAGUE OF CHARLOTTE COUNTY FLORIDA - 3519 DRANCE ST. - PUNTA GORDA, FL 33980-2407	59-1146309	501(C)(3)	9,782.	0.			CAPITAL PURCHASES
ANNANDALE AT SUWANEE INC AKA ANNANDALE VILLAGE - 3500 ANNANDALE LN. - SUWANEE, GA 30024	58-6081470	501(C)(3)	34,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
APPALACHIAN REGIONAL HEALTHCARE FOUNDATION - P.O. BOX 2600 - BOONE, NC 28607	20-4625618	501(C)(3)	6,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
ARCADIA-DESOTO COUNTY HABITAT FOR HUMANITY - P.O. BOX 2096 - ARCADIA, FL 34265	59-3656661	501(C)(3)	109,500.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
ART CENTER SARASOTA 707 N. TAMIAMI TRAIL SARASOTA, FL 34236	59-0706844	501(C)(3)	9,783.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ARTS & CULTURAL ALLIANCE OF SARASOTA COUNTY - 1226 N. TAMIAMI TRAIL, #300 - SARASOTA, FL 34236-2431	59-2710755	501(C)(3)	58,474.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ASIAN COMMUNITY ALLIANCE 7577 CENTRAL PARKE BLVD, STE 126 MASON, OH 45040	56-2465820	501(C)(3)	6,500.	0.			GENERAL SUPPORT
ASOLO REPERTORY THEATRE INC 5555 N. TAMIAMI TRAIL SARASOTA, FL 34243	59-2717909	501(C)(3)	169,214.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ATWATER ELEMENTARY SCHOOL 4701 HUNTSVILLE AVE. NORTH PORT, FL 34288	59-6000847	501(C)(3)	7,512.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF SARASOTA CO.
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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
AUSTEN RIGGS CENTER, INC. P.O. BOX 962 STOCKBRIDGE, MA 01262	04-2103543	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
AZARA BALLET INC 5020 CLARK RD., STE. 504 SARASOTA, FL 34233	88-2493064	501(C)(3)	13,150.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BAYSTATE HEALTH FOUNDATION INC. 280 CHESTNUT STREET SPRINGFIELD, MA 01199	04-3549011	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
BETHANY HEALTH CARE CENTER, INC. 97 BETHANY ROAD FRAMINGHAM, MA 01702	04-2104039	501(C)(3)	20,000.	0.			GENERAL SUPPORT
BEYOND THE SPECTRUM, INC. 7333 INTERNATIONAL PLACE SARASOTA, FL 34240-8418	20-8269622	501(C)(3)	25,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BIG BEND AREA HEALTH EDUCATION CENTER INC. - 2815 REMINGTON GREEN CIRCLE, SUITE 100 - TALLAHASSEE, FL 32308	59-3345711	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
BIG BROTHERS BIG SISTERS OF THE SUN COAST, INC. - 1000 S. TAMIAMI TRAIL, SUITE C - VENICE, FL 34285-4122	59-1361826	501(C)(3)	6,125.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION P.O. BOX 21615 NEW YORK, NY 10087	13-4092050	501(C)(3)	13,850.	0.			GENERAL SUPPORT
BLOWING ROCK METHODIST CHURCH PO BOX 352 BLOWING ROCK, NC 28605	02-0653104	501(C)(3)	10,000.	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
BOOKER HIGH SCHOOL 3201 N. ORANGE AVENUE SARASOTA, FL 34234	59-6000847	501(C)(3)	16,157.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
BOOKER MIDDLE SCHOOL 2250 MYRTLE STREET SARASOTA, FL 34234	59-6000847	501(C)(3)	16,046.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
BOOSTERS FOUNDATION, INC. 2912 ALEX MCKAY PLACE SARASOTA, FL 34240	81-2127166	501(C)(3)	80,000.	0.			GENERAL SUPPORT
BOXSER DIVERSITY INITIATIVE, INC. 2301 GULF OF MEXICO DR, UNIT 63 LONGBOAT KEY, FL 34228	81-3050026	501(C)(3)	21,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUB OF THE PLATEAU PO BOX 1812 CASHIERS, NC 28717	46-5336895	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF CHARLOTTE COUNTY - 21500 GIBRALTER DRIVE, SUITE 10 - PORT CHARLOTTE, FL 33952-5417	65-0725247	501(C)(3)	11,679.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF MANATEE COUNTY, INC. - P.O. BOX 280 - BRADENTON, FL 34206	59-0675141	501(C)(3)	35,681.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF SARASOTA AND DESOTO COUNTIES - 3130 FRUITVILLE ROAD - SARASOTA, FL 34237	59-6211876	501(C)(3)	344,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS TOWN OF CENTRAL FLORIDA 975 OKLAHOMA STREET OVIDA, FL 32765	47-0376606	501(C)(3)	50,000.	0.			PROGRAM SUPPORT

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BRENTWOOD ELEMENTARY SCHOOL 2500 VINSON AVENUE SARASOTA, FL 34232	59-6000847	501(C)(3)	5,811.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
C.G. JUNG SOCIETY OF SARASOTA 935 N. BENEVA RD., SUITE 609 #9 SARASOTA, FL 34232	65-0480102	501(C)(3)	33,438.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CAMP SUNSHINE AT SEBAGO LAKE INC 35 ACADIA RD CASCO, ME 04015	22-2582877	501(C)(3)	12,781.	0.			GENERAL SUPPORT
CAN COMMUNITY HEALTH INC 4440 FRUITVILLE ROAD SARASOTA, FL 34232	65-0278528	501(C)(3)	11,542.	0.			GENERAL SUPPORT
CARDINAL MOONEY CATHOLIC HIGH SCHOOL - 4171 FRUITVILLE ROAD - SARASOTA, FL 34232	59-0900923	501(C)(3)	30,769.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CARDIOVASCULAR CENTER OF SARASOTA FOUNDATION FOR RESEARCH AND EDUCATION - 1950 ARLINGTON STREET, SUITE 300 - SARASOTA, FL	47-4110671	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
CASEY KEY LIBRARY ASSOCIATION, INC. - P.O. BOX 1101 - OSPREY, FL 34229-1101	59-2669039	501(C)(3)	5,455.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES DIOCESE OF VENICE, INC. - 1000 PINEBROOK RD. - VENICE, FL 34285	59-2473176	501(C)(3)	147,709.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES OF DESOTO COUNTY, DISTRICT IV - 1210 E. OAK STREET - ARCADIA, FL 34266-8907	59-2473176	501(C)(3)	50,000.	0.			EMERGENCY ASSISTANCE

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CENTER FOR PUBLIC INTEGRITY P.O. BOX 392988 PITTSBURGH, PA 15251	54-1512177	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CENTER FOR RELIGIOUS TOLERANCE 520 RALPH STREET SARASOTA, FL 34242	20-5782137	501(C)(3)	8,000.	0.			PROGRAM SUPPORT
CENTERPLACE HEALTH INC 1750 17TH STREET, BUILDING N SARASOTA, FL 34234	20-2779327	501(C)(3)	61,500.	0.			PROGRAM SUPPORT
CENTRAL CHRISTIAN COMMUNITY SERVICES INC (DBA JOYFUL FRIENDS PROGRAM) - 4308 32ND ST W - BRADENTON, FL 34205-2737	85-4320072	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
CHARITIES AID FOUNDATION AMERICA AKA CAFAMERICA - 225 REINEKERS LN, STE 375 - ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	9,720.	0.			PROGRAM SUPPORT
CHARLOTTE COUNTY HOMELESS COALITION, INC. - 1476 KENESAW ST. - PORT CHARLOTTE, FL 33948	65-0139525	501(C)(3)	60,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE COUNTY PUBLIC SCHOOLS 1445 EDUCATION WAY PORT CHARLOTTE, FL 33948	59-6000539	501(C)(3)	5,473.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE HARBOR ENVIRONMENTAL CENTER - P.O. BOX 512876 - PUNTA GORDA, FL 33951	59-2853001	501(C)(3)	5,104.	0.			CAPITAL PURCHASES
CHATHAM COUNTY LITERACY COUNCIL INC. - PO BOX 1696 - PITTSBORO, NC 27312	58-1870076	501(C)(3)	17,200.	0.			CAPITAL PURCHASES, GENERAL SUPPORT

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CHICAGO JESUIT ACADEMY 5058 W. JACKSON BLVD. CHICAGO, IL 60644	20-2091040	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
CHILD EVANGELISM FELLOWSHIP OF FLORIDA INC - 4141 DESOTO RD - SARASOTA, FL 34235-3614	59-0837546	501(C)(3)	5,750.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHILD PROTECTION CENTER, INC. 720 S. ORANGE AVE SARASOTA, FL 34236	59-2113850	501(C)(3)	133,976.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
CHILDREN FIRST, INC. 1723 N. ORANGE AVENUE SARASOTA, FL 34234	59-0968249	501(C)(3)	86,945.	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)	40,000.	0.			GENERAL SUPPORT
CHILDREN'S CANCER CENTER, INC. 4901 W. CYPRESS ST. TAMPA, FL 33607	59-1779035	501(C)(3)	42,000.	0.			PROGRAM SUPPORT
CHILDREN'S GUARDIAN FUND INC P.O. BOX 49722 SARASOTA, FL 34230	65-0626074	501(C)(3)	10,486.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
CHILDREN'S HOME SOCIETY OF FLORIDA 5766 S SEMORAN BLVD ORLANDO, FL 32822-4818	59-0192430	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
CHIP IN INC 128 MCBRIDE CEMETARY ROAD FAYETTEVILLE, GA 30215	92-2194275	501(C)(3)	15,000.	0.			PROGRAM SUPPORT

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CHIPOLA COLLEGE FOUNDATION, INC. 3094 INDIAN CIR MARIANNA, FL 32446	59-2074070	501(C)(3)	50,000.	0.			SCHOLARSHIP SUPPORT
CHORAL ARTISTS OF SARASOTA P.O. BOX 52987 SARASOTA, FL 34232	59-1913814	501(C)(3)	16,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHURCH OF THE CROSS 5051 26TH STREET WEST BRADENTON, FL 34207	59-1803986	501(C)(3)	7,013.	0.			GENERAL SUPPORT
CHURCH OF THE INCARNATION 2929 BEE RIDGE ROAD SARASOTA, FL 34239	59-1318386	501(C)(3)	30,000.	0.			GENERAL SUPPORT
CHURCH OF THE PALMS 3224 BEE RIDGE ROAD SARASOTA, FL 34239	59-0995240	501(C)(3)	25,330.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHURCH OF THE REDEEMER 222 S. PALM AVENUE SARASOTA, FL 34236	59-0751911	501(C)(3)	7,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHURCH OF THE TRINITY METROPOLITAN COMMUNITY CHURCH - 7225 LOCKWOOD RIDGE RD. - SARASOTA, FL 34243	65-0612811	501(C)(3)	116,972.	0.			GENERAL SUPPORT
CITY OF NORTH PORT - PARKS & RECREATION DEPARTMENT - 4970 CITY HALL BOULEVARD - NORTH PORT, FL 34286	59-6072227	501(C)(3)	6,784.	0.			GENERAL SUPPORT
CITY OF SARASOTA 1565 1ST STREET SARASOTA, FL 34236	59-6000426	501(C)(3)	10,695.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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COLLEGE OF CENTRAL FLORIDA FOUNDATION, INC. - 3001 SW COLLEGE RD - OCALA, FL 34474	59-6139037	501(C)(3)	90,000.	0.			SCHOLARSHIP SUPPORT
COMMON GROUND 1410 S TELEGRAPH RD BLOOMFIELD HILLS, MI 48302	38-1997712	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
COMMUNITY COALITION ON HOMELESSNESS DBA TURNING POINTS - 701 17TH AVENUE WEST - BRADENTON, FL 34205-7665	59-3340921	501(C)(3)	1,745,100.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY FOUNDATION OF JACKSON HOLE - PO BOX 1523 - DRIGGS, ID 83422	83-0308856	501(C)(3)	20,500.	0.			PROGRAM SUPPORT
COMMUNITY FOUNDATION OF SOUTH LAKE COUNTY - 2150 OAKLEY SEAVER DRIVE - CLERMONT, FL 34711	59-3343026	501(C)(3)	2,215,275.	0.			GENERAL SUPPORT
CONGREGATION OF THE SACRED HEARTS PO BOX 668 SAN DIMAS, CA 91773	04-2160533	501(C)(3)	7,720.	0.			GENERAL SUPPORT
CONSERVATION FOUNDATION OF THE GULF COAST - PO BOX 902 - OSPREY, FL 34229-0902	20-0345249	501(C)(3)	13,400.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CONSTANT CARING FOUNDATION INC. 1941 BOUGAINVILLEA ST SARASOTA, FL 34239	87-4221356	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CORE SRQ FKA OUR Y INC. 1075 S. EUCLID AVENUE SARASOTA, FL 34237	84-2889884	501(C)(3)	8,370.	0.			GENERAL SUPPORT

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CRANBERRY ELEMENTARY SCHOOL 2775 SHALIMAR TERRACE NORTH PORT, FL 34286	59-6000847	501(C)(3)	13,958.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
CREARTE LATINO CULTURAL CENTER CORP - 8251 15TH STREET E, SUITE I - SARASOTA, FL 34243	30-0969540	501(C)(3)	15,975.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CREEKSIDE CHRISTIAN CHURCH, INC. 92 LIFESPRING WAY ST. JOHNS, FL 32259	01-0697890	501(C)(3)	60,000.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
CROSSROADS FARM 5520 W. CARD RD. READING, MI 49274	38-3477455	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
DEEP CREEK ELEMENTARY SCHOOL 26900 HARBORVIEW ROAD PUNTA GORDA, FL 33983	59-6000539	501(C)(3)	9,000.	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, PROGRAM SUPPORT
DIAL HOPE FOUNDATION INC PO BOX 953 SARASOTA, FL 34230	26-4326614	501(C)(3)	21,671.	0.			GENERAL SUPPORT
DIOCESE OF VENICE IN FLORIDA INC 1000 PINEBROOK ROAD VENICE, FL 34285	27-1988145	501(C)(3)	6,360.	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

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DOCTORS WITHOUT BORDERS USA, INC. P.O. BOX 5030 HAGERSTOWN, MD 21741-5030	13-3433452	501(C)(3)	7,425.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
DONORS OF DISTINCTION INC 1990 MAIN ST STE 725 SARASOTA, FL 34236	86-3969121	501(C)(3)	5,931.	0.			GENERAL SUPPORT
DREAMERS ACADEMY INC 1050 S. TUTTLE AVE SARASOTA, FL 34237	82-2813068	501(C)(3)	13,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EARLY LEARNING COALITION OF MANATEE COUNTY INC - 600 8TH AVE W, SUITE 100 - PALMETTO, FL 34221	65-0811318	501(C)(3)	6,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EARLY LEARNING COALITION OF SARASOTA COUNTY - 1750 17TH STREET BUILDING L - SARASOTA, FL 34234-8690	65-1110174	501(C)(3)	84,572.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EASTER SEALS SOUTHWEST FLORIDA INC 350 BRADEN AVENUE SARASOTA, FL 34243	59-0638490	501(C)(3)	133,373.	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)	56,653.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EMBRACING OUR DIFFERENCES INC PO BOX 2559 SARASOTA, FL 34230	20-3581293	501(C)(3)	83,313.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EMBRACING OUR DIFFERENCES SE MICHIGAN INC - P.O. BOX 130853 - ANN ARBOR, MI 48113	87-3289021	501(C)(3)	7,500.	0.			PROGRAM SUPPORT

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EMMA E. BOOKER ELEMENTARY SCHOOL 2350 DR. MARTIN LUTHER KING WAY SARASOTA, FL 34234	59-6000847	501(C)(3)	23,720.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
EMMA WILLARD SCHOOL 285 PAWLING AVENUE TROY, NY 12180	14-1338390	501(C)(3)	21,400.	0.			GENERAL SUPPORT
ENDOWMENT FUND OF TEMPLE EMANU-EL 151 MCINTOSH ROAD SARASOTA, FL 34232	65-0488747	501(C)(3)	5,536.	0.			GENERAL SUPPORT
ENSEMBLENEWSRQ PO BOX 15372 SARASOTA, FL 34277	81-0734331	501(C)(3)	15,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ENTERTAINMENT INDUSTRY FOUNDATION PO BOX 845346 LOS ANGELES, CA 90084	95-1644609	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
ENVIRONMENTAL DEFENSE FUND, INC. 257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)(3)	6,049.	0.			GENERAL SUPPORT
ENVISION UNLIMITED 8 S. MICHIGAN AVE, STE. 1700 CHICAGO, IL 60603	36-2544178	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
EPILEPSY SERVICES OF SW FLORIDA INC - 1750 17TH ST., BUILDING I-2 - SARASOTA, FL 34234	59-3281492	501(C)(3)	91,000.	0.			GENERAL SUPPORT
EXCHANGE CLUB FAMILY PARTNERSHIP CENTER OF MANATEE COUNTY, INC. DBA PARENTI - 602 3RD ST E - BRADENTON, FL 34208	65-0374386	501(C)(3)	21,542.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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FAIRVIEW HOSPITAL 29 LEWIS AVENUE GREAT BARRINGTON, MA 01230	04-2133860	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
FAITH AND LEARNING INTERNATIONAL NFP - P.O. BOX 480 - WHEATON, IL 60187	20-0743864	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
FAMILY PROMISE OF SARASOTA INC 8499 TAMiami TrL PMB 267 SARASOTA, FL 34238	20-5058968	501(C)(3)	26,775.	0.			GENERAL SUPPORT
FAMILY PROMISE OF SOUTH SARASOTA COUNTY - 850 COCKRILL STREET - VENICE, FL 34285-3511	46-4906213	501(C)(3)	12,000.	0.			GENERAL SUPPORT
FANCONI ANEMIA RESEARCH FUND, INC. 360 E. 10TH AVENUE, SUITE 201 EUGENE, OR 97401	93-0995453	501(C)(3)	7,250.	0.			GENERAL SUPPORT
FANDANGO SANCTUARY INC. 616 PINTO TRAIL ENGLEWOOD, FL 34223	84-3425595	501(C)(3)	10,250.	0.			GENERAL SUPPORT
FARMHOUSE ANIMAL & NATURE SANCTUARY INC - 2807 DUETTE RD - MYAKKA CITY, FL 34251	82-3481291	501(C)(3)	22,100.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
FCNL EDUCATION FUND 245 SECOND ST. NE WASHINGTON, DC 20002	52-1254489	501(C)(3)	6,743.	0.			GENERAL SUPPORT
FEEDING AMERICA TAMPA BAY INC DBA FEEDING TAMPA BAY - 4702 TRANSPORT DRIVE, BUILDING 6 - TAMPA, FL 33605-5940	59-2116576	501(C)(3)	15,000.	0.			GENERAL SUPPORT

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FINE ARTS SOCIETY OF SARASOTA INC PO BOX 1432 SARASOTA, FL 34230-1432	23-7098475	501(C)(3)	8,348.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
FIRST FEDERATED CHURCH OF PEORIA 3601 N SHERIDAN RD PEORIA, IL 61604	23-6393377	501(C)(3)	8,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH 2050 OAK STREET SARASOTA, FL 34237	23-6393377	501(C)(3)	11,016.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH - ASHEVILLE - 40 CHURCH STREET - ASHEVILLE, NC 28801	23-6393377	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH OF FROSTPROOF - 150 DEVANE STREET - FROSTPROOF, FL 33843	31-1813333	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
FLORIDA CANCER SPECIALISTS FOUNDATION, INC. - 5985 SILVER FALLS RUN STE 210 - BRADENTON, FL 34211	20-4616813	501(C)(3)	20,000.	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)	36,358.	0.			GENERAL SUPPORT
FLORIDA GULF COAST UNIVERSITY FOUNDATION INC DBA WGCU-TV PUBLIC BROADCASTIN - 10501 FGCU BLVD. S. - FT. MYERS, FL 33965-6565	65-0403969	501(C)(3)	5,250.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
FLORIDA RISING TOGETHER INC. 10800 BISCAYNE BLVD STE 1050 MIAMI, FL 33161	45-3956785	501(C)(3)	8,000.	0.			GENERAL SUPPORT

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FLORIDA SHERIFFS YOUTH RANCHES INC PO BOX 2000 BOYS RANCH, FL 32064	23-7303117	501(C)(3)	73,234.	0.			GENERAL SUPPORT
FLORIDA STUDIO THEATRE INC. 1241 N. PALM AVENUE SARASOTA, FL 34236	23-7362760	501(C)(3)	72,794.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
FORTY CARROTS FAMILY CENTER 1500 S. TUTTLE AVENUE SARASOTA, FL 34239	65-0405988	501(C)(3)	97,703.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
FOUNDATION FOR FLORIDA GATEWAY COLLEGE, INC. - 149 SE COLLEGE PLACE - LAKE CITY, FL 32025	59-1627997	501(C)(3)	50,000.	0.			SCHOLARSHIP SUPPORT
FRIENDS OF AMANI US, INC. 11 SOUTH MAIN STREET, SUITE 501 CONCORD, NH 03301	27-3621599	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FRIENDS OF MYAKKA RIVER, INC. 13208 STATE ROAD 72 SARASOTA, FL 34241	65-0448875	501(C)(3)	5,750.	0.			GENERAL SUPPORT
FRIENDS OF THE FRANCES T. BOURNE JACARANDA PUBLIC LIBRARY - 4143 WOODMERE PARK BLVD. - VENICE, FL 34293	65-0350944	501(C)(3)	5,624.	0.			PROGRAM SUPPORT
FRIENDS OF THE LAKEWOOD RANCH LIBRARY INC - P.O. BOX 110221 - LAKEWOOD RANCH, FL 34211-0003	83-2152443	501(C)(3)	16,913.	0.			GENERAL SUPPORT, PROGRAM 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

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRUITVILLE ELEMENTARY SCHOOL 601 HONORE AVE. SARASOTA, FL 34232	59-6000847	501(C)(3)	6,342.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
FSU/ASOLO CONSERVATORY FOR ACTOR TRAINING - 5555 N. TAMIAMI TRAIL - SARASOTA, FL 34243-2141	59-6152180	501(C)(3)	6,750.	0.			GENERAL SUPPORT
FUNDUCATION, INC. 11161 EAST STATE ROAD 70, SUITE 110 LAKEWOOD RANCH, FL 34202	83-4704098	501(C)(3)	32,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GALATIANS 6-2 INC DBA AVENUE941 518 13TH STREET WEST BRADENTON, FL 34205	65-0729731	501(C)(3)	11,826.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GALATIANS 6-2 INC DBA HOPE 4 COMMUNITIES - 518 13TH STREET W - BRADENTON, FL 34205	65-0729731	501(C)(3)	5,768.	0.			GENERAL SUPPORT
GARDEN ELEMENTARY SCHOOL 700 CENTER RD. VENICE, FL 34285	59-6000847	501(C)(3)	6,000.	0.			EMERGENCY ASSISTANCE
GATOR WILDERNESS CAMP SCHOOL 44930 FARABEE ROAD PUNTA GORDA, FL 33982-9536	65-0704638	501(C)(3)	10,364.	0.			GENERAL SUPPORT
GIRL SCOUTS OF GULF COAST FLORIDA INC - 4780 CATTLEMEN ROAD - SARASOTA, FL 34233	59-0760212	501(C)(3)	5,322.	0.			GENERAL SUPPORT
GIRLS INCORPORATED OF SARASOTA COUNTY - 201 S. TUTTLE AVENUE - SARASOTA, FL 34237-6333	23-7363275	501(C)(3)	108,302.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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GLASSER-SCHOENBAUM HUMAN SERVICES CENTER - 1750 17TH STREET, BUILDING J-1 - SARASOTA, FL 34234-8666	59-2707877	501(C)(3)	3,087,525.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
GLENALLEN ELEMENTARY SCHOOL 7050 GLENALLEN BLVD. NORTH PORT, FL 34287	59-6000847	501(C)(3)	7,805.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
GOCIO ELEMENTARY SCHOOL 3450 GOCIO ROAD SARASOTA, FL 34235	59-6000847	501(C)(3)	107,312.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
GOOD NEWS TV, INC. DBA NO BLUES NEWS - 3314 ISLAND DATE CIR. - SARASOTA, FL 34232	92-1566092	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GOOD SAMARITAN PHARMACY & HEALTH SERVICES INC - 2502 TAMIAAMI TRL N - NOKOMIS, FL 34275	26-2295558	501(C)(3)	24,580.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH, INC. - 5659 HONORE AVE. - SARASOTA, FL 34233	59-2170050	501(C)(3)	89,475.	0.			GENERAL SUPPORT
GOODWILL INDUSTRIES MANASOTA INC 2705 51ST AVE EAST BRADENTON, FL 34203	59-2074391	501(C)(3)	15,258.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
GRACE COMMUNITY CHURCH 4080 LAKEWOOD RANCH BLVD N LAKEWOOD RANCH, FL 34240	35-2388990	501(C)(3)	10,500.	0.			GENERAL SUPPORT
GREATER SARASOTA CHAMBER OF COMMERCE FOUNDATION INC - 1945 FRUITVILLE ROAD - SARASOTA, FL 34236-4203	26-1563145	501(C)(3)	10,000.	0.			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.			GENERAL SUPPORT
GULF COAST PARTNERSHIP INC 408 TAMIAMI TRL UNIT 121 PUNTA GORDA, FL 33950-4847	38-3913077	501(C)(3)	78,470.	0.			PROGRAM SUPPORT
GULF COAST STATE COLLEGE FOUNDATION, INC. - 5230 WEST HIGHWAY 98 - PANAMA CITY, FL 32401	59-1682455	501(C)(3)	90,000.	0.			SCHOLARSHIP SUPPORT
H. LEE MOFFITT CANCER CENTER AND RESEARCH INSTITUTE FOUNDATION INC. - 12902 MAGNOLIA DRIVE - TAMPA, FL 33612	59-3238636	501(C)(3)	231,802.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HABITAT FOR HUMANITY SARASOTA INC 1757 NORTH EAST AVENUE SARASOTA, FL 34234	59-2495597	501(C)(3)	48,204.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA, INC. - 40 WALL STREET - NEW YORK, NY 10005	13-1656651	501(C)(3)	9,666.	0.			GENERAL SUPPORT
HARBOR 58 MINISTRIES INC 5215 LORRAINE RD BRADENTON, FL 34211-9289	47-3419578	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
HARVEST TABERNACLE OF SARASOTA D/B/A HARVEST HOUSE TRANSITIONAL CENTERS - 3650 17TH ST. - SARASOTA, FL 34235	59-2186807	501(C)(3)	89,055.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HEALTHY TEENS, INC. 1023 MANATEE AVE W SUITE 306 BRADENTON, FL 34205-7816	45-0990646	501(C)(3)	16,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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HEMOPHILIA FOUNDATION OF GREATER FLORIDA INC. - 1350 ORANGE AVE, SUITE 227 - WINTER PARK, FL 32789	59-3418827	501(C)(3)	88,663.	0.			PROGRAM SUPPORT
HERMITAGE ARTIST RETREAT INC 6630 MANASOTA KEY ROAD ENGLEWOOD, FL 34223	30-0104608	501(C)(3)	172,368.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HERON CREEK MIDDLE SCHOOL 6501 W. PRICE BLVD. NORTH PORT, FL 34291	59-6000847	501(C)(3)	7,500.	0.			EMERGENCY ASSISTANCE
HERSHORIN SCHIFF DAY SCHOOLS OF TOMORROW INC DBA HERSHORIN SCHIFF COMMUNITY - 4335 WILKINSON ROAD - SARASOTA, FL 34233	47-3558984	501(C)(3)	5,400.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
HILL-STEAD MUSEUM 35 MOUNTAIN RD FARMINGTON, CT 06032	06-0646673	501(C)(3)	8,000.	0.			GENERAL SUPPORT
HISTORICAL SOCIETY OF SARASOTA COUNTY - PO BOX 1632 - SARASOTA, FL 34230	59-6169574	501(C)(3)	5,861.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
HOLY FAMILY CATHOLIC SCHOOLS 2005 KANE STREET DUBUQUE, IA 52001	42-0792429	501(C)(3)	40,000.	0.			GENERAL SUPPORT
HONOR SANCTUARY INC DBA HONOR ANIMAL RESCUE - 4951 LORRAINE RD - BRADENTON, FL 34211	26-0878064	501(C)(3)	27,532.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HOPE INTERNATIONAL MINISTRIES, INC. - 11415 HOPE INTERNATIONAL DRIVE - TAMPA, FL 33625	62-0879012	501(C)(3)	5,068.	0.			GENERAL SUPPORT

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HORSE PROTECTION ASSOCIATION OF FLORIDA INC. - 20690 NW 130TH AVENUE - MICANOPY, FL 32667	65-0191969	501(C)(3)	42,500.	0.			PROGRAM SUPPORT
HUMAN RIGHTS WATCH, INC. 350 5TH AVE., 34TH FLOOR NEW YORK, NY 10118	13-2875808	501(C)(3)	6,000.	0.			GENERAL SUPPORT
HUMANE SOCIETY AT LAKEWOOD RANCH INC - 26920 GOPHER HILL RD - MYAKKA CITY, FL 34251	27-3937966	501(C)(3)	12,500.	0.			CAPITAL PURCHASES
HUMANE SOCIETY OF SARASOTA COUNTY INC - 2331 15TH STREET - SARASOTA, FL 34237-2909	59-6014943	501(C)(3)	152,293.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HUNGERS END INC P.O. BOX 742 PALMETTO, FL 34220	47-3038591	501(C)(3)	6,548.	0.			PROGRAM SUPPORT
ILLINOIS SAINT ANDREW SOCIETY 2800 DES PLAINES AVENUE NORTH RIVERSIDE, IL 60546	36-2182150	501(C)(3)	50,000.	0.			GENERAL SUPPORT
IMPACT 100 SRQ, INC. PO BOX 49887 SARASOTA, FL 34230	82-1754541	501(C)(3)	5,330.	0.			GENERAL SUPPORT
IN CHARACTER SCHOOL OF MINISTRY PO BOX 8092 NORTH PORT, FL 34290	46-3203965	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
INCLUSION REVOLUTION INC 111 SOUTH PINEAPPLE AVE, SUITE 601 SARASOTA, FL 34236	84-3132691	501(C)(3)	6,450.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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INDIANA UNIVERSITY 107 S. INDIANA AVE. BLOOMINGTON, IN 47405	35-6001673	501(C)(3)	32,571.	0.			PROGRAM SUPPORT
INTERROGATING JUSTICE INC. 11 SOUTH 12TH STREET RICHMOND, VA 23219	32-0656757	501(C)(3)	7,000.	0.			GENERAL SUPPORT
J5 EXPERIENCE, INC. 2700 LEON AVE SARASOTA, FL 34234-4714	82-2991546	501(C)(3)	22,895.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JAZZ CLUB OF SARASOTA, INC. 330 S. PINEAPPLE AVENUE, #111 SARASOTA, FL 34236	59-1997114	501(C)(3)	6,180.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JERSEY COUNTY HISTORICAL SOCIETY 601 NORTH STATE STREET JERSEYVILLE, IL 62052	51-0153238	501(C)(3)	20,184.	0.			GENERAL SUPPORT
JERSEYVILLE PUBLIC LIBRARY 105 N. LIBERTY ST. JERSEYVILLE, IL 62052	37-1175704	501(C)(3)	10,095.	0.			GENERAL SUPPORT
JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO, THE PENINSULA, MARIN & SONOMA - 121 STEUART STREET - SAN FRANCISCO, CA 94105	94-1156533	501(C)(3)	3,000,000.	0.			PROGRAM SUPPORT
JEWISH CONGREGATION OF VENICE, INC. - 600 N. AUBURN RD. - VENICE, FL 34292	59-2019151	501(C)(3)	6,000.	0.			GENERAL SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE OF THE SUNCOAST, INC. - 2688 FRUITVILLE ROAD - SARASOTA, FL 34237-5223	59-2693318	501(C)(3)	81,426.	0.			EMERGENCY ASSISTANCE, 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)	93,019.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
JOSH PROVIDES EPILEPSY ASSISTANCE FOUNDATION, INC. - 5428 SUNDEW DRIVE - SARASOTA, FL 34238	46-2322505	501(C)(3)	17,819.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JUDICIAL WATCH, INC. P.O. BOX 96234 WASHINGTON, DC 20090	52-1885088	501(C)(3)	10,000.	0.			GENERAL SUPPORT
JUNIOR LEAGUE OF SARASOTA, INC. 3300 S. TAMiami TRAIL, #3 SARASOTA, FL 34239-5100	59-6159037	501(C)(3)	62,225.	0.			GENERAL SUPPORT
JUSTICE DEFENDERS 2093 PHILADELPHIA PIKE #6214 CLAYMONT, DE 19703	36-4787320	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
KEY CHORALE, INC. 1900 MAIN STREET, SUITE 211 SARASOTA, FL 34236	59-2779200	501(C)(3)	41,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
LA MUSICA DI ASOLO, INC. P.O. BOX 5442 SARASOTA, FL 34277-5442	65-0005948	501(C)(3)	12,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LAMARQUE ELEMENTARY SCHOOL 3415 LAMARQUE AVE NORTH PORT, FL 34286	59-6000847	501(C)(3)	20,962.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
LAUREL CIVIC ASSOCIATION, INC. PO BOX 511 LAUREL, FL 34272	65-0187752	501(C)(3)	119,488.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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LAUREL NOKOMIS SCHOOL 1900 E. LAUREL ROAD NOKOMIS, FL 34275	59-6000847	501(C)(3)	5,486.	0.			PROGRAM SUPPORT
LEE & BOB PETERSON FOUNDATION, INC. - P.O. BOX 49201 - SARASOTA, FL 34230	83-3723361	501(C)(3)	17,750.	0.			PROGRAM SUPPORT
LIBRARY FOUNDATION FOR SARASOTA COUNTY, INC. - P.O. BOX 17903 - SARASOTA, FL 34276	45-2585429	501(C)(3)	257,064.	0.			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)	5,250.	0.			GENERAL SUPPORT
LIGHT OF THE WORLD INTERNATIONAL CHURCH - P.O. BOX 1594 - SARASOTA, FL 34230	83-0499021	501(C)(3)	11,500.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
LIGHTSHARE BEHAVIORAL WELLNESS & RECOVERY INC. - 4579 NORTHGATE COURT - SARASOTA, FL 34234	59-1304472	501(C)(3)	9,858.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
LINKS TO SUCCESS P.O. BOX 864 ARCADIA, FL 34265	45-3572522	501(C)(3)	27,450.	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)	21,599.	0.			PROGRAM 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)	71,049.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST - 1266 FIRST STREET, SUITE 1 - SARASOTA, FL 34236	14-6285967	501(C)(3)	47,714.	0.			GENERAL SUPPORT
LOVELAND CENTER, INC. 157 SOUTH HAVANA ROAD VENICE, FL 34292-3104	59-1011392	501(C)(3)	84,166.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
LSU ALUMNI ASSOCIATION 3838 W LAKESHORE DR BATON ROUGE, LA 70808	72-6027430	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
LUPUS RESEARCH ALLIANCE, INC. 270 MADISON AVENUE, SUITE 300 NEW YORK, NY 10016	58-2492929	501(C)(3)	10,000.	0.			GENERAL SUPPORT
LUTHERAN SERVICES FLORIDA, INC. 3627 W. WATERS AVE TAMPA, FL 33614	59-2198911	501(C)(3)	18,580.	0.			GENERAL SUPPORT
MAINEHEALTH DBA MAINE MEDICAL CENTER - 22 BRAMHALL STREET - PORTLAND, ME 04102	01-0238552	501(C)(3)	7,500.	0.			PROGRAM SUPPORT
MAKING AN IMPACT INC 11161 EAST STATE ROAD 70, SUITE 110 LAKEWOOD RANCH, FL 34202	85-0834801	501(C)(3)	19,420.	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)	225,958.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
MANASOTA ASALH P.O. BOX 2356 SARASOTA, FL 34230-2356	45-3969420	501(C)(3)	17,845.	0.			PROGRAM SUPPORT

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MANATEE COMMUNITY FOUNDATION, INC. 2820 MANATEE AVE W BRADENTON, FL 34205	65-0833500	501(C)(3)	18,099.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY BOARD OF COUNTY COMMISSIONERS - 1112 MANATEE AVENUE WEST - BRADENTON, FL 34205	59-6000727	501(C)(3)	11,060.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY CLERK OF THE CIRCUIT COURT AND COMPTROLLER - P. O. BOX 25400 - BRADENTON, FL 34206-1000	59-6000729	501(C)(3)	5,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY GIRLS CLUB, INC. DBA JUST FOR GIRLS - 3809 59TH STREET WEST - BRADENTON, FL 34209	59-1271332	501(C)(3)	24,753.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE SHERIFFS CHARITY INC 600 301 BLVD. WEST, SUITE 202 BRADENTON, FL 34205	82-2616247	501(C)(3)	8,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANHATTAN COLLEGE 4513 MANHATTAN COLLEGE PARKWAY RIVERDALE, NY 10471	13-1740468	501(C)(3)	20,000.	0.			GENERAL SUPPORT
MARGWINE ORGANIZATION INC. PO BOX 1486 SARASOTA, FL 34230	82-2275811	501(C)(3)	16,275.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MARIE SELBY BOTANICAL GARDENS INC 1534 MOUND STREET SARASOTA, FL 34236	59-1848965	501(C)(3)	257,343.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MARQUETTE UNIVERSITY P.O. BOX 1881 MILWAUKEE, WI 53201	39-0806251	501(C)(3)	15,000.	0.			PROGRAM SUPPORT

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MASONIC HOME FOR CHILDREN AT OXFORD - 600 COLLEGE STREET - OXFORD, NC 27565	56-0603924	501(C)(3)	43,878.	0.			GENERAL SUPPORT
MAYORS' FEED THE HUNGRY PROGRAM, INC. - P.O. BOX 1992 - SARASOTA, FL 34230	65-0369363	501(C)(3)	6,300.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MAZOLU ANIMAL SANCTUARY 215 MAIN ST. SOUTH WINDSOR, CT 06074	86-1638816	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
MEALS ON WHEELS OF SARASOTA INC 421 NORTH LIME AVENUE SARASOTA, FL 34237	59-1391249	501(C)(3)	52,712.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MEALS ON WHEELS PLUS OF MANATEE, INC. - 811 23RD AVENUE E. - BRADENTON, FL 34208	59-1420986	501(C)(3)	53,172.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MEMORIAL SLOAN-KETTERING CANCER CENTER - PO BOX 27106 - NEW YORK, NY 10087	13-1924236	501(C)(3)	23,000.	0.			PROGRAM SUPPORT
METROPOLITAN MINISTRIES - PASCO COUNTY - 3214 US HWY 19 - HOLIDAY, FL 34691	59-1477007	501(C)(3)	15,000.	0.			GENERAL SUPPORT
MILITARY HERITAGE MUSEUM INC 900 WEST MARION AVE PUNTA GORDA, FL 33950-5308	65-1036360	501(C)(3)	5,500.	0.			GENERAL SUPPORT
MINORITIES IN SHARK SCIENCES PO BOX 10493 BRADENTON, FL 34282	85-2192211	501(C)(3)	20,275.	0.			PROGRAM SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSION & WELFARE INTERNATIONAL P.O. BOX 1135 BATTLE GROUND, WA 98604-1135	20-0239517	501(C)(3)	53,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
MOTE MARINE FOUNDATION 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-2226800	501(C)(3)	39,249.	0.			GENERAL SUPPORT
MOTE MARINE LABORATORY & AQUARIUM, INC. - 1600 KEN THOMPSON PKWY - SARASOTA, FL 34236	59-0756643	501(C)(3)	402,067.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MOUNTAIN ASSOCIATION FOR COMMUNITY ECONOMIC DEVELOPMENT INC DBA MOUNTAIN AS - 433 CHESTNUT ST. - BEREA, KY 40403	31-0900246	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MULTICULTURAL HEALTH INSTITUTE 1781 DR. MARTIN LUTHER KING, JR. WA SARASOTA, FL 34234	68-0384071	501(C)(3)	34,725.	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)	21,408.	0.			GENERAL SUPPORT
NAMI SARASOTA AND MANATEE COUNTIES INC - 2911 FRUITVILLE RD. - SARASOTA, FL 34237	59-2464505	501(C)(3)	31,168.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NATIONAL ACADEMY OF HUMAN RESOURCES FOUNDATION - 5420 CHALLEN PLACE - DOWNERS GROVE, IL 60515	85-0427733	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN/SARASOTA-MANATEE SECTION - PO BOX 3641 - SARASOTA, FL 34230-3641	59-1940872	501(C)(3)	6,350.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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NATIONAL MULTIPLE SCLEROSIS SOCIETY/MID FLORIDA CHAPTER - 2701 MAITLAND CENTER PKWY STE 100 - MAITLAND, FL 32751	13-5661935	501(C)(3)	18,080.	0.			GENERAL SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY/NATIONAL - 900 S. BROADWAY, 2ND FLOOR - DENVER, CO 80209	13-5661935	501(C)(3)	19,622.	0.			GENERAL SUPPORT
NATIONAL PSORIASIS FOUNDATION 6600 SW 92ND AVE. SUITE 300 PORTLAND, OR 97223	93-0571472	501(C)(3)	9,372.	0.			GENERAL SUPPORT
NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION, SARAMANA CHAPTER - 149 BIG PASS LANE - SARASOTA, FL 34242-1606	59-6177703	501(C)(3)	9,648.	0.			GENERAL SUPPORT
NAVIGATOR HOMES OF MARTHAS VINEYARD INC. - PO BOX 1356 - VINEYARD HAVEN, MA 02568	84-5182763	501(C)(3)	25,000.	0.			GENERAL SUPPORT
NEURO CHALLENGE FOUNDATION INC 722 APEX RD, STE A SARASOTA, FL 34240	26-2311656	501(C)(3)	7,600.	0.			GENERAL SUPPORT
NEW AVENUES FOR YOUTH, INC. 1220 SW COLUMBIA STREET PORTLAND, OR 97201	93-0910213	501(C)(3)	41,000.	0.			PROGRAM SUPPORT
NEW COLLEGE FOUNDATION, INC. 5800 BAY SHORE ROAD SARASOTA, FL 34243-2109	59-0911744	501(C)(3)	98,292.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
NEWTOWN NATION, INC. PO BOX 2111 SARASOTA, FL 34230	47-3465787	501(C)(3)	18,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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NORTH FLORIDA COMMUNITY COLLEGE FOUNDATION, INC. - 325 NW TURNER DAVIS DR. - MADISON, FL 32340	59-6179948	501(C)(3)	90,000.	0.			SCHOLARSHIP SUPPORT
NORTH FLORIDA SCHOOL OF SPECIAL EDUCATION - 223 MILL CREEK RD. - JACKSONVILLE, FL 32211	59-3126545	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
NORTH PORT HIGH SCHOOL 6400 WEST PRICE BLVD. NORTH PORT, FL 34291	59-6000847	501(C)(3)	6,550.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
OAXACA STREET CHILDREN GRASSROOTS, INC. - PO BOX 2219 - BENTON, AR 72018	35-1988669	501(C)(3)	7,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
OHIO MASONIC HOME 2655 W. NATIONAL ROAD SPRINGFIELD, OH 45504-3658	31-0536997	501(C)(3)	5,023.	0.			GENERAL SUPPORT
OLV CHARITIES 780 RIDGE RD. LACKAWANNA, NY 14218	16-0743191	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
ON THE SPOT AID INC 12161 MERCADO DRIVE VENICE, FL 34293	85-1931026	501(C)(3)	8,770.	0.			PROGRAM SUPPORT
ONEBLOOD FOUNDATION, INC. 10100 DR. MLK JR. STREET N ST. PETERSBURG, FL 33716-3806	59-2216675	501(C)(3)	50,678.	0.			GENERAL SUPPORT
OPERATION KINDNESS OF FLORIDA INC 601 YARDARM LANE LONGBOAT KEY, FL 34228-3529	47-2377526	501(C)(3)	6,000.	0.			GENERAL SUPPORT

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OPERATION WARRIOR RESOLUTION 242 S. WASHINGTON BLVD. #130 SARASOTA, FL 34236	82-3982294	501(C)(3)	48,330.	0.			PROGRAM SUPPORT
OSPREY FIRST BAPTIST CHURCH PO BOX 808 OSPREY, FL 34229	65-0108914	501(C)(3)	22,800.	0.			GENERAL SUPPORT
OTSEGO COUNTY FOOD PANTRY P.O. BOX 1976 GAYLORD, MI 49734	38-3374066	501(C)(3)	10,000.	0.			GENERAL SUPPORT
OVERLAND MISSIONS INC. 11 RIVERSIDE DRIVE, SUITE 201 COCOA, FL 32922	59-3648501	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
OXFAM AMERICA 77 NORTH WASHINGTON STREET, SUITE 5 BOSTON, MA 02114	23-7069110	501(C)(3)	6,000.	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)	50,000.	0.			SCHOLARSHIP SUPPORT
PAUL A & VERONICA H GROSS WILDLIFE CENTER OF SOUTHWEST FLORIDA - 925 NORTH JACKSON ROAD - VENICE, FL 34292	20-1065695	501(C)(3)	25,400.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
PEACE RIVER ELEMENTARY SCHOOL 4070 BEAVER LANE PORT CHARLOTTE, FL 33952	59-6000539	501(C)(3)	6,500.	0.			GENERAL SUPPORT
PENNSYLVANIA STATE UNIVERSITY 2583 GATEWAY DRIVE, SUITE 130 STATE COLLEGE, PA 16801	24-6000376	501(C)(3)	174,050.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

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PERLMAN MUSIC PROGRAM SUNCOAST, INC. - PO BOX 3407 - SARASOTA, FL 34230-3407	26-2714384	501(C)(3)	9,460.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PINE SHORES PRESBYTERIAN CHURCH 6135 BEECHWOOD AVENUE SARASOTA, FL 34231	59-0794839	501(C)(3)	5,523.	0.			GENERAL SUPPORT
PINE VIEW SCHOOL ONE PYTHON PATH OSPREY, FL 34229	59-6000847	501(C)(3)	8,788.	0.			PROGRAM SUPPORT
PINES OF SARASOTA FOUNDATION, INC. 1501 N. ORANGE AVENUE SARASOTA, FL 34236-2631	59-2988752	501(C)(3)	109,239.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA, INC. - 736 CENTRAL AVENUE - SARASOTA, FL 34236	59-1274328	501(C)(3)	192,016.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PLYMOUTH HARBOR, INC 700 JOHN RINGLING BOULEVARD SARASOTA, FL 34236-1542	59-1031820	501(C)(3)	29,823.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PREGNANCY SOLUTIONS, INC. 504 E VENICE AVENUE VENICE, FL 34285	65-1085310	501(C)(3)	22,000.	0.			PROGRAM SUPPORT
PROJECT 180 SARASOTA, INC. PO BOX 25684 SARASOTA, FL 34277	26-3092460	501(C)(3)	86,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PROJECT PRIDE SRQ P.O BOX 48635 SARASOTA, FL 34230	84-3878767	501(C)(3)	7,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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PROSPECT RIDING CENTER PO BOX 424 MYAKKA CITY, FL 34251	45-5236589	501(C)(3)	9,200.	0.			CAPITAL PURCHASES
PUNTA GORDA HISTORIC MURAL SOCIETY P.O. BOX 510506 PUNTA GORDA, FL 33951-0506	65-0563402	501(C)(3)	13,000.	0.			PROGRAM SUPPORT
QUEENS BRIGADE, INC. 828 EVANS RIDGE ROAD LAKE TOXAWAY, NC 28747	84-4161461	501(C)(3)	52,000.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
REALIZE BRADENTON, INC. P.O. BOX 9114 BRADENTON, FL 34206-9114	27-1330078	501(C)(3)	24,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
REGENTS OF THE UNIVERSITY OF MICHIGAN DBA UNIVERSITY OF MICHIGAN SCHOOL OF - 2005 BAITS DR. - ANN ARBOR, MI 48109	38-6006309	501(C)(3)	25,000.	0.			SCHOLARSHIP SUPPORT
RENOWN HEALTH FOUNDATION 1155 MILL ST, MAIL STOP Z-9 RENO, NV 89502	94-2972749	501(C)(3)	2,000,000.	0.			CAPITAL PURCHASES
RESILIENT RETREAT, INC. 3500 JOURNEY LANE SARASOTA, FL 34240	83-1677056	501(C)(3)	71,911.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RESURRECTION HOUSE, INC. 507 KUMQUAT CT. SARASOTA, FL 34236	65-0096171	501(C)(3)	9,023.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RINGLING COLLEGE LIBRARY ASSOCIATION, INC. - P.O. BOX 4071 - SARASOTA, FL 34230-4071	51-0173628	501(C)(3)	16,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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RINGLING COLLEGE OF ART AND DESIGN 2700 N. TAMiami TRAIL SARASOTA, FL 34234	59-0637903	501(C)(3)	216,410.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
RIVERVIEW HIGH SCHOOL FOUNDATION 1 RAM WAY SARASOTA, FL 34231	59-2229914	501(C)(3)	19,350.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROSKAMP INSTITUTE, INC. 2040 WHITFIELD AVENUE SARASOTA, FL 34243-3956	27-1397124	501(C)(3)	108,344.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROTARY CLUB OF SARASOTA BAY FOUNDATION, INC. - P.O. BOX 1311 - SARASOTA, FL 34230-1311	59-2687165	501(C)(3)	40,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROTARY CLUB OF SARASOTA FOUNDATION, INC. - PO BOX 2766 - SARASOTA, FL 34230	59-6153330	501(C)(3)	23,528.	0.			GENERAL SUPPORT
ROTARY FUTURES PROGRAM INC. 1 INDIAN AVENUE, ROOM 406 VENICE, FL 34285-2632	02-0583160	501(C)(3)	6,000.	0.			SCHOLARSHIP SUPPORT
SAFE CHILDREN'S COALITION, INC. 1500 INDEPENDENCE BOULEVARD, STE. 21 SARASOTA, FL 34234-2171	59-1618413	501(C)(3)	27,352.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAFE PLACE AND RAPE CRISIS CENTER INC (SPARCC) - 2139 MAIN STREET - SARASOTA, FL 34237	59-1943399	501(C)(3)	42,477.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAINT MARY'S COLLEGE 110 LE MANS HALL NOTRE DAME, IN 46556-5001	35-0868158	501(C)(3)	12,500.	0.			SCHOLARSHIP SUPPORT

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SALISBURY SINGERS, INC. 370 MAIN STREET, SUITE 1200 WORCESTER, MA 01608	04-2619664	501(C)(3)	11,719.	0.			GENERAL SUPPORT
SALLIE JONES ELEMENTARY SCHOOL 1230 NARRANJA STREET PUNTA GORDA, FL 33950	59-6000539	501(C)(3)	7,000.	0.			GENERAL SUPPORT
SALVATION ARMY - MANATEE 1204 14TH STREET WEST BRADENTON, FL 34205	58-0660607	501(C)(3)	7,478.	0.			GENERAL SUPPORT
SALVATION ARMY - SARASOTA PO BOX 2792 SARASOTA, FL 34230	58-0660607	501(C)(3)	153,082.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SALVATION ARMY - VENICE PO BOX 69 VENICE, FL 34284-0069	58-0660607	501(C)(3)	90,648.	0.			GENERAL SUPPORT
SAMARITAN COUNSELING SERVICES OF THE GULF COAST, INC. - 3224 BEE RIDGE RD. - SARASOTA, FL 34239-7201	59-3457923	501(C)(3)	49,050.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SAN PEDRO PARISH OF THE DIOCESE OF VENICE - 14380 TAMiami TRAIL - NORTH PORT, FL 34287	59-2473176	501(C)(3)	55,424.	0.			GENERAL SUPPORT
SARASOTA AFRICAN AMERICAN CULTURAL COALITION, INC. - PO BOX 686 - SARASOTA, FL 34230-0686	83-3573603	501(C)(3)	19,039.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA BALLET OF FLORIDA, INC. 5555 N TAMiami TRAIL SARASOTA, FL 34243-2141	65-0135900	501(C)(3)	244,461.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SARASOTA BAY WATCH INC PO BOX 1141 OSPREY, FL 34229	26-2521889	501(C)(3)	15,467.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA CONCERT ASSOCIATION, INC. PO BOX 211 SARASOTA, FL 34230-0211	59-2850861	501(C)(3)	99,511.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA COUNTY LIBRARIES 1660 RINGLING BLVD SARASOTA, FL 34236	59-6000848	501(C)(3)	17,339.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA COUNTY PARKS, RECREATION AND NATURAL RESOURCES - 1660 RINGLING BLVD., 5TH FLOOR - SARASOTA, FL 34236	59-6000848	501(C)(3)	28,269.	0.			GENERAL SUPPORT
SARASOTA FILM FESTIVAL INC 332 COCOANUT AVE SARASOTA, FL 34236	65-0826229	501(C)(3)	12,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA GARDEN CLUB INC 1131 BLVD OF THE ARTS SARASOTA, FL 34236-4809	59-0968250	501(C)(3)	28,189.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SARASOTA HIGH SCHOOL 2155 BAHIA VISTA ST. SARASOTA, FL 34239	59-6000847	501(C)(3)	9,059.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
SARASOTA HOUSING FUNDING CORPORATION - 269 S. OSPREY AVENUE SUITE 100 - SARASOTA, FL 34236-6805	80-0418699	501(C)(3)	29,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA INSTITUTE OF LIFETIME LEARNING, INC. - 8499 SOUTH TAMIA MI TRAIL - SARASOTA, FL 34238	59-2344325	501(C)(3)	70,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SARASOTA MANATEE ASSOCIATION FOR RIDING THERAPY - 4640 COUNTY ROAD 675 E - BRADENTON, FL 34211-9600	65-0043354	501(C)(3)	32,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
SARASOTA MEDICAL PREGNANCY CENTER, INC. - 1762 HAWTHORNE STREET, #5 - SARASOTA, FL 34239	05-0533818	501(C)(3)	10,608.	0.			GENERAL SUPPORT
SARASOTA MEMORIAL HEALTHCARE FOUNDATION, INC. - 1515 S. OSPREY AVENUE, SUITE B4 - SARASOTA, FL 34239-2919	51-0188568	501(C)(3)	189,285.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MILITARY ACADEMY 801 N. ORANGE AVENUE SARASOTA, FL 34236	65-1149763	501(C)(3)	18,750.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA OPERA ASSOCIATION, INC. 61 N. PINEAPPLE AVE SARASOTA, FL 34236-5716	23-7089047	501(C)(3)	130,296.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA ORCHESTRA 709 N. TAMIAMI TRAIL SARASOTA, FL 34236	59-2603081	501(C)(3)	285,462.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
SARASOTA PERFORMING ARTS CENTER FOUNDATION INC. - 777 NORTH TAMIAMI TRAIL 3RD FLOOR - SARASOTA, FL 34236-4047	59-2807055	501(C)(3)	25,161.	0.			GENERAL SUPPORT, PROGRAM 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 TECHNOLOGY USERS GROUP P.O. BOX 15889 SARASOTA, FL 34277-1889	59-2456855	501(C)(3)	11,650.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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SACHEL'S LAST RESORT 8101 COASH RD SARASOTA, FL 34241-9347	04-3585931	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
SAVE OUR SEABIRDS, INC. 1708 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-3078536	501(C)(3)	35,296.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SAVE THE REDWOODS LEAGUE 111 SUTTER STREET, 11TH FLOOR SAN FRANCISCO, CA 94104	94-0843915	501(C)(3)	5,100.	0.			GENERAL SUPPORT
SCHOOL BOARD OF SARASOTA COUNTY 1960 LANDINGS BLVD. SARASOTA, FL 34231-3331	59-6000847	501(C)(3)	64,949.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SCHOOL DISTRICT OF MANATEE COUNTY 215 MANATEE AVE WEST BRADENTON, FL 34205	59-6000728	501(C)(3)	28,275.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SECOND CHANCE-LAST OPPORTUNITY PO BOX 1027 SARASOTA, FL 34230-1027	65-0699257	501(C)(3)	39,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SECOND HEART HOMES INC PO BOX 3886 SARASOTA, FL 34230	84-1848246	501(C)(3)	42,055.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SELAH FREEDOM, INC. PO BOX 1801 SARASOTA, FL 34230	45-5189165	501(C)(3)	64,555.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
SEMINOLE BOOSTERS, INC. P.O. BOX 1353 TALLAHASSEE, FL 32302	59-1561180	501(C)(3)	35,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SENIOR FRIENDSHIP CENTERS FOUNDATION, INC. - 1888 BROTHER GEENEN WAY - SARASOTA, FL 34236	65-0364819	501(C)(3)	23,127.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SENIOR FRIENDSHIP CENTERS, INC. 1888 BROTHER GEENEN WAY SARASOTA, FL 34236-7118	59-1522614	501(C)(3)	131,348.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SHELBURNE MUSEUM, INC. P.O. BOX 10 SHELBURNE, VT 05482	03-0179436	501(C)(3)	5,027.	0.			GENERAL SUPPORT
SHRINERS HOSPITALS FOR CHILDREN - TAMPA UNIT - 2900 ROCKY POINT DRIVE - TAMPA, FL 33607	04-2121377	501(C)(3)	61,097.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SIESTA KEY CHAPEL PRESBYTERIAN 4615 GLEASON AVENUE SARASOTA, FL 34242	59-1399716	501(C)(3)	10,975.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SIMMARON RESEARCH INC 948 INCLINE WAY INCLINE VILLAGE, NV 89451	45-2191464	501(C)(3)	250,000.	0.			GENERAL SUPPORT
SISTER CITIES ASSOCIATION OF SARASOTA, INC. - 1617 KEELY LANE - SARASOTA, FL 34232	65-0178684	501(C)(3)	10,180.	0.			GENERAL SUPPORT
SIXTEEN HANDS HORSE SANCTUARY 712 ROY MOORE RD. ONA, FL 33865-9577	26-1224137	501(C)(3)	10,375.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SMALLCIRCLE INC. 4373 REFLECTIONS PKWY. SARASOTA, FL 34233	84-2387119	501(C)(3)	20,391.	0.			PROGRAM SUPPORT

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SOAR LEARNING CENTER, INC. 2731 NORTH LINKS AVE. SARASOTA, FL 34234	81-4840233	501(C)(3)	93,037.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOCIETY OF ST. VINCENT DE PAUL SOUTH PINELLAS INC - 384 15TH ST N - ST PETERSBURG, FL 33705-2016	59-2380770	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
SOKA GAKKAI INTERNATIONAL - USA 606 WILSHIRE BOULEVARD SANTA MONICA, CA 90401	95-2265667	501(C)(3)	40,000.	0.			GENERAL SUPPORT
SOUTH FLORIDA STATE COLLEGE FOUNDATION, INC. - 13 E. MAIN STREET - AVON PARK, FL 33825	59-3050497	501(C)(3)	90,000.	0.			SCHOLARSHIP SUPPORT
SOUTHEASTERN GUIDE DOGS, INC. 4210 77TH STREET E. PALMETTO, FL 34221	59-2252352	501(C)(3)	134,605.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOUTHFACE ENERGY INSTITUTE INC. 5800 BAYSHORE RD SARASOTA, FL 34233	58-1357547	501(C)(3)	53,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST JAMES OF BATON ROUGE FOUNDATION INC - 333 LEE DRIVE - BATON ROUGE, LA 70808	58-2198010	501(C)(3)	50,000.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
ST. ANTHONY'S HOSPITAL FOUNDATION 1200 7TH AVENUE NORTH ST. PETERSBURG, FL 33705	59-2043026	501(C)(3)	50,678.	0.			GENERAL SUPPORT
ST. ARMANDS KEY LUTHERAN CHURCH, INC. - 40 N. ADAMS DR. - SARASOTA, FL 34236-1403	59-1835982	501(C)(3)	10,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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ST. AUGUSTINE'S EPISCOPAL CHURCH 1140 WILMETTE AVENUE WILMETTE, IL 60091	36-2334635	501(C)(3)	6,500.	0.			GENERAL SUPPORT
ST. COLUMBKILLE CATHOLIC PARISH 1240 RUSH STREET DUBUQUE, IA 52003	42-0680317	501(C)(3)	13,000.	0.			GENERAL SUPPORT
ST. FRANCIS ANIMAL RESCUE OF VENICE - 1925 S. TAMIAMI TRAIL - VENICE, FL 34293-5003	65-0409317	501(C)(3)	13,372.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. FRANCIS OF ASSISI CATHOLIC CHURCH - 5265 PLACIDA RD. - GROVE CITY, FL 34224	59-1933467	501(C)(3)	6,668.	0.			GENERAL SUPPORT
ST. JOSEPH CATHOLIC SCHOOL 2990 26TH STREET WEST BRADENTON, FL 34211	59-1351248	501(C)(3)	7,900.	0.			GENERAL 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)	25,096.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. MATTHEW SCHOOL 33 WELCH DRIVE FORESTVILLE, CT 06010	53-0196617	501(C)(3)	10,000.	0.			CAPITAL PURCHASES
ST. PAUL PARISH 147 NORTH STREET HINGHAM, MA 02043	53-0196617	501(C)(3)	10,000.	0.			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)	15,203.	0.			GENERAL SUPPORT
ST. PETERSBURG FREE CLINIC, INC. 863 3RD AVE N. ST. PETERSBURG, FL 33701	23-7208280	501(C)(3)	53,815.	0.			GENERAL SUPPORT
ST. ROBERT BELLARMINE CHURCH 310 N. CHERRY STREET FLUSHING, MI 48433	38-1443389	501(C)(3)	8,891.	0.			GENERAL SUPPORT
ST. THOMAS MORE CATHOLIC CHURCH 2506 GULF GATE DRIVE SARASOTA, FL 34231-5731	59-1992896	501(C)(3)	89,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
STATE COLLEGE OF FLORIDA FOUNDATION - 5840 26TH STREET WEST - BRADENTON, FL 34207	59-1843274	501(C)(3)	43,358.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
STEP UP SUNCOAST 6428 PARKLAND DR. SARASOTA, FL 34243	59-6208766	501(C)(3)	845,569.	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)	10,200.	0.			GENERAL SUPPORT
SUNCOAST BLACK ARTS COLLABORATIVE, INC. - PO BOX 21185 - BRADENTON, FL 34204	85-0847497	501(C)(3)	51,275.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST CHARITIES FOR CHILDREN INC - 5317 FRUITVILLE ROAD, SUITE 43 - SARASOTA, FL 34232	65-0397846	501(C)(3)	6,000.	0.			PROGRAM SUPPORT

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SUNCOAST TECHNICAL COLLEGE 4748 S. BENEVA ROAD SARASOTA, FL 34233	59-6000847	501(C)(3)	7,220.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
SUNCOAST WATERKEEPER INC P O BOX 1028 SARASOTA, FL 34230	30-0753993	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
SUNCOAST YOUTH FOR CHRIST PO BOX 123 BRADENTON, FL 34206	59-0999771	501(C)(3)	6,550.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
SUPREME COUNCIL BENEVOLENT FOUNDATION - P.O. BOX 519 - LEXINGTON, MA 02420-0519	04-6116088	501(C)(3)	5,027.	0.			GENERAL SUPPORT
TAKE STOCK IN CHILDREN OF MANATEE COUNTY INC - P.O. BOX 325 - PALMETTO, FL 34220	46-1337168	501(C)(3)	5,750.	0.			GENERAL SUPPORT
TAKE STOCK IN CHILDREN OF SARASOTA COUNTY, INC. - PO BOX 48186 - SARASOTA, FL 34230	33-1012774	501(C)(3)	138,675.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TAYLOR RANCH ELEMENTARY SCHOOL 2500 TAYLOR RANCH TRAIL VENICE, FL 34293	59-6000847	501(C)(3)	6,276.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
TBS ENDOWMENT FUND INC 1050 SOUTH TUTTLE AVE. SARASOTA, FL 34237	26-1421638	501(C)(3)	16,739.	0.			GENERAL SUPPORT
TEAMUP VOLUNTEER & PARTNERSHIP COUNCIL - 5112 FLICKER FIELD CIRCLE - SARASOTA, FL 34231-3300	59-2354722	501(C)(3)	16,039.	0.			PROGRAM SUPPORT

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TEEN COURT OF SARASOTA, INC. P.O. BOX 48927 SARASOTA, FL 34230	65-0108304	501(C)(3)	32,002.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE BETH SHOLOM & JEWISH CENTER, INC. - 1050 S. TUTTLE AVENUE - SARASOTA, FL 34237	23-7156328	501(C)(3)	9,748.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE EMANU-EL 151 MCINTOSH ROAD SARASOTA, FL 34232	59-1145961	501(C)(3)	6,871.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE ACADEMY AT GLENGARY, INC. 1910 GLENGARY ST. SARASOTA, FL 34231-3603	83-0608910	501(C)(3)	12,000.	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)	13,250.	0.			GENERAL SUPPORT
THE AMERICAN UNIVERSITY - WASHINGTON COLLEGE OF LAW - 4300 NEBRASKA AVENUE NW, C305 - WASHINGTON, DC 20016	53-0196549	501(C)(3)	7,000.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
THE BAY PARK CONSERVANCY INC 655 N. TAMIAMI TRAIL SARASOTA, FL 34236	81-4653473	501(C)(3)	338,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE CIRCUS ARTS CONSERVATORY, INC. 2075 BAHIA VISTA ST. SARASOTA, FL 34239-2302	65-0786312	501(C)(3)	207,955.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
THE CLASSICAL ACADEMY OF SARASOTA INC - 8350 BEE RIDGE RD. BOX 223 - SARASOTA, FL 34241	46-3754462	501(C)(3)	8,750.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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THE D. L. RANDALL FOUNDATION, INC. 1523 72ND ST. EAST RUBONIA, FL 34221	47-4988613	501(C)(3)	5,219.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE DALI MUSEUM, INC. 1 DALI BLVD. ST. PETERSBURG, FL 33701	59-2015192	501(C)(3)	15,203.	0.			GENERAL SUPPORT
THE FLORIDA CENTER FOR EARLY CHILDHOOD - 4620 17TH STREET - SARASOTA, FL 34235	59-1947024	501(C)(3)	177,691.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE JEWISH FEDERATION OF SARASOTA-MANATEE - 580 MCINTOSH ROAD - SARASOTA, FL 34232-1957	59-1227747	501(C)(3)	104,595.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETY, INC. - PO BOX 22324 - NEW YORK, NY 10087	13-5644916	501(C)(3)	22,127.	0.			GENERAL SUPPORT
THE LITERACY CENTER FOR DYSLEXIA 695 OLD ENGLEWOOD ROAD ENGLEWOOD, FL 34223	86-3805695	501(C)(3)	7,500.	0.			CAPITAL PURCHASES
THE LITERACY COUNCIL OF SARASOTA, INC. - 1750 17TH ST., BLDG K-3 - SARASOTA, FL 34234-8666	59-1911680	501(C)(3)	29,280.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE MAC PARKMAN FOUNDATION FOR ADOLESCENT CONCUSSIVE TRAUMA INC. - PO BOX 1228 - ANNA MARIA, FL 34216	86-2638747	501(C)(3)	9,688.	0.			PROGRAM SUPPORT
THE MEDICAL COLLEGE OF WISCONSIN INC. - P.O. BOX 26509 - WAUWATOSA, WI 53226	39-0806261	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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THE WAREHOUSE OF VENICE, INC. PO BOX 844 VENICE, FL 34284-0844	57-1176809	501(C)(3)	7,860.	0.			PROGRAM SUPPORT
THOMAS JEFFERSON UNIVERSITY -- MEDICAL COLLEGE - P.O. BOX 71331 DEPT 825434 - PHILADELPHIA, PA 19176	23-1352651	501(C)(3)	9,958.	0.			GENERAL SUPPORT
THROUGH WOMENS EYES INC. PO BOX 4102 SARASOTA, FL 34230	92-0759083	501(C)(3)	10,075.	0.			GENERAL SUPPORT
THURGOOD MARSHALL COLLEGE FUND, INC. - 901 F STREET, NW, SUITE 700 - WASHINGTON, DC 20004	41-1750692	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
TIDEWELL FOUNDATION INC. 5955 RAND BLVD SARASOTA, FL 34238	85-0729071	501(C)(3)	458,121.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TOLEDO BLADE ELEMENTARY SCHOOL 1201 GERANIUM AVENUE NORTH PORT, FL 34288	59-6000847	501(C)(3)	10,481.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
TRULY VALUED INC P.O. BOX 381 PALMETTO, FL 34220	81-2755747	501(C)(3)	17,270.	0.			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)	6,905.	0.			GENERAL SUPPORT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - PO BOX 71332 - PHILADELPHIA, PA 19176	23-1352685	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT

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TUTTLE ELEMENTARY SCHOOL 2863 8TH STREET SARASOTA, FL 34237	59-6000847	501(C)(3)	12,948.	0.			CAPITAL PURCHASES, EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
UNIDOSNOW, INC. 1750 17TH ST., BLDG C 2 SARASOTA, FL 34234	27-4102169	501(C)(3)	33,550.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
UNITARIAN UNIVERSALIST CHURCH OF SARASOTA - 3975 FRUITVILLE RD. - SARASOTA, FL 34232	59-0954128	501(C)(3)	8,850.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED COMMUNITY CENTERS, INC. 922 24TH ST. E. BRADENTON, FL 34208	65-0282384	501(C)(3)	12,536.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED POLICYHOLDERS 917 IRVING STREET, SUITE 4 SAN FRANCISCO, CA 94122	94-3162024	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
UNITED STATES SAILING CENTER OF MARTIN COUNTY INC. - 1955 NE INDIAN RIVER DRIVE - JENSEN BEACH, FL 34957	65-0377617	501(C)(3)	15,936.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
UNITED WAY OF CHARLOTTE COUNTY 17831 MURDOCK CIRCLE, STE A PORT CHARLOTTE, FL 33948	59-1149995	501(C)(3)	1,112,833.	0.			CAPITAL PURCHASES, EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
UNITED WAY OF SOUTH SARASOTA COUNTY, INC. - 4242 SOUTH TAMIAMI TRAIL - VENICE, FL 34293	59-1100846	501(C)(3)	7,100.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITED WAY SUNCOAST INC. 4925 INDEPENDENCE PARKWAY, SUITE 12 TAMPA, FL 33634	59-3725701	501(C)(3)	11,997.	0.			GENERAL SUPPORT

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UNIVERSITY MUSICAL SOCIETY 881 NORTH UNIVERSITY AVENUE ANN ARBOR, MI 48109	38-1545881	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION - 1995 UNIVERSITY AVE, SUITE 400 - BERKELEY, CA 94704	94-6090626	501(C)(3)	80,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF MINNESOTA FOUNDATION P.O. BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	15,640.	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)	78,205.	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)	19,700.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF SOUTHERN CALIFORNIA 1150 SOUTH OLIVE STREET, 25TH FLOOR LOS ANGELES, CA 90015	95-1642394	501(C)(3)	15,140.	0.			GENERAL SUPPORT
UNIVERSITY OF ST. FRANCIS 500 WILCOX STREET JOLIET, IL 60435	36-2170999	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
UNIVERSITY OF THE CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769-1372	61-0470593	501(C)(3)	44,532.	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)	18,600.	0.			PROGRAM SUPPORT
UPLIFT FLORIDA 1888 BROTHER GEENEN WAY SARASOTA, FL 34236	87-2938023	501(C)(3)	22,500.	0.			GENERAL SUPPORT
URBANITE THEATRE INC. 1487 2ND STREET SARASOTA, FL 34236	46-5554467	501(C)(3)	52,874.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE - PMB 407727 NASHVILLE, TN 37240-7727	62-0476822	501(C)(3)	9,093.	0.			GENERAL SUPPORT
VENICE CAT COALITION PO BOX 991 VENICE, FL 34284-0991	26-3193138	501(C)(3)	12,500.	0.			PROGRAM SUPPORT
VENICE MAIN STREET INC. 101 W. VENICE AVE. #23 VENICE, FL 34285-1940	59-2815346	501(C)(3)	37,500.	0.			GENERAL SUPPORT
VENICE NOKOMIS ROTARY FOUNDATION, INC. - 229 NOKOMIS AVE. S. - VENICE, FL 34285	65-0211976	501(C)(3)	17,628.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
VENICE SYMPHONY, INC. P.O. BOX 1561 VENICE, FL 34284-1561	59-1710244	501(C)(3)	36,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VERMONT FOODBANK 33 PARKER RD BARRE, VT 05641	22-3021942	501(C)(3)	5,929.	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.)

(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
VISIBLE MEN ACADEMY 921 63RD AVENUE EAST BRADENTON, FL 34203	46-0930264	501(C)(3)	5,275.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
VOLUNTEER FLORIDA FOUNDATION INC. 1545 RAYMOND DIEHL ROAD, STE. 250 TALLAHASSEE, FL 32308	01-0973168	501(C)(3)	5,600.	0.			PROGRAM SUPPORT
WATER WELL TRUST, INC. P.O. BOX 2399 DAVIDSON, NC 28036	27-1659354	501(C)(3)	8,000.	0.			GENERAL SUPPORT
WEDU-FLORIDA WEST COAST PUBLIC BROADCASTING INC - 1300 NORTH BOULEVARD - TAMPA, FL 33607-5645	59-0840626	501(C)(3)	82,840.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WELLS OF LIFE, INC. 200 SPECTRUM CENTER DRIVE, #300 IRVINE, CA 92618	45-1496631	501(C)(3)	8,000.	0.			CAPITAL PURCHASES
WEST VIRGINIA HEALTH RIGHT, INC. 1520 WASHINGTON ST., E CHARLESTON, WV 25311	31-1066881	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
WESTCOAST BLACK THEATRE TROUPE 1012 N. ORANGE AVENUE SARASOTA, FL 34236	65-1040662	501(C)(3)	120,329.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WET MOUNTAIN BROADCASTING CORP. - KLZR - 103 SOUTH 2ND STREET SUITE A - WESTCLIFFE, CO 81252	26-3825042	501(C)(3)	25,000.	0.			GENERAL SUPPORT
WILKINSON ELEMENTARY SCHOOL 3400 WILKINSON ROAD SARASOTA, FL 34231	59-6000847	501(C)(3)	7,787.	0.			GENERAL SUPPORT, PROGRAM 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.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLIAM CAREY UNIVERSITY 710 WILLIAM CAREY PKWY WCU BOX #141 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)	15,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WINTERGARDEN PRESBYTERIAN CHURCH (DBA GARDEN OF EATIN') - 18305 WINTERGARDEN AVE - PORT CHARLOTTE, FL 33948-6119	23-6393377	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
WOMEN'S RESOURCE CENTER OF MANATEE, INC. - 1926 MANATEE AVENUE W - BRADENTON, FL 34205-5835	59-3034653	501(C)(3)	74,583.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WOMENS HEALTH CENTER OF WEST VIRGINIA, INC. - 510 W. WASHINGTON ST. - CHARLESTON, WV 25302	55-0559874	501(C)(3)	10,000.	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 CENTRAL KITCHEN, INC. 200 MASS AVE NW, 7TH FLOOR WASHINGTON, DC 20001	27-3521132	501(C)(3)	17,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WORLD OF CHUCKO LTD 6022 CHAPARRAL AVE SARASOTA, FL 34243-5341	84-2869126	501(C)(3)	5,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WSLR INC PO BOX 2540 SARASOTA, FL 34230	56-2485148	501(C)(3)	8,811.	0.			GENERAL SUPPORT, PROGRAM 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
YMCA OF SOUTHWEST FLORIDA INC. 701 CENTER ROAD VENICE, FL 34285	59-1629660	501(C)(3)	92,568.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

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	619	2,507,279.	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 for instructions and the latest information.

OMB No. 1545-0047

2022

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

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <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	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <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?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
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?	5a	X
b Any related organization?	5b	X
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?	6a	X
b Any related organization?	6b	X
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	7	X
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	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2022

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

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)	290,726.	56,000.	0.	27,095.	10,910.	384,731.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELIZABETH PENNEWILL GENERAL COUNSEL	(i)	174,598.	20,754.	0.	17,699.	8,270.	221,321.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MISCHA KIRBY VP, STRATEGIC COMM. & MARK	(i)	143,375.	21,292.	0.	13,654.	7,847.	186,168.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ERIN JONES CFO EFF. 7/22/22	(i)	150,827.	8,958.	0.	14,643.	8,200.	182,628.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KIRSTEN RUSSELL VP, COMMUNITY IMPACT	(i)	138,710.	16,343.	0.	14,021.	8,163.	177,237.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LAURA SPENCER CFO/CAO THRU 7/22/22	(i)	114,063.	37,851.	0.	13,910.	5,385.	171,209.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JAY YOUNG VP, PHILANTHROPY	(i)	121,371.	15,717.	0.	11,059.	21,415.	169,562.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

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)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

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	92	6,265,305.	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				
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 3 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) 2022

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 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

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

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 IMMEDIATE, TARGETED FINANCIAL
ASSISTANCE (PRIMARYLY FOR MORTGAGE, RENT AND UTILITIES) TO FAMILIES AND
INDIVIDUALS ON THE VERGE OF HOMELESSNESS THROUGH THE SEASON OF SHARING

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

Schedule O (Form 990) 2022

Name of the organization THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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FUND, AS WELL AS SUPPORTING OUR REGION'S YOUTH THROUGH OUR STUDENT EMERGENCY FUND OPERATED IN PARTNERSHIP WITH SARASOTA COUNTY SCHOOLS. TO ADDRESS LONG-TERM NEEDS REVEALED THROUGH EMERGENCIES, OUR SUNCOCAST DISASTER RECOVERY FUND SUPPORTS EFFORTS TO IMPROVE INDIVIDUAL, FAMILY, AND COMMUNITY RESILIENCY. ADDITIONALLY, OUR EXTENSIVE WORK IN EDUCATION LEVERAGES NATIONAL RESEARCH AND INITIATIVES SUCH AS THE CAMPAIGN FOR GRADE-LEVEL READING, THE REGIONAL COLLABORATIVE PARTNERSHIP OF EDEXPLORESRQ, AND THE STRAUSS LITERACY INITIATIVE LED BY THE COMMUNITY FOUNDATION. 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

Name of the organization	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number	59-1956886
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FUNDING TO SUPPORT THEIR MISSIONS THROUGH EIGHT CHALLENGES TO BENEFIT MORE THAN 700 NONPROFITS LISTED IN THE GIVING PARTNER.

IN FALL 2020 WE LAUNCHED A NEW EFFORT 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. THE SCOPE OF WORK IN THIS AREA EXTENDED IN 2023 TO A COMMUNITY LEADERSHIP ROLE TO BRING ATTENTION TO KEY ISSUES REVEALED THROUGH OUR PUBLICLY-AVAILABLE COMMUNITY INDICATORS DASHBOARD.

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, CFO 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	1,699,090.
DISTRIBUTIONS TO ANNUITANTS	-452,088.
OPERATING EXPENSES ALLOCATED TO TRUST	-164,922.
CURRENT YEAR AGENCY ACTIVITY	-553,453.
NET INVESTMENT INCOME ON K-1'S RECEIVED	-455,374.
TOTAL TO FORM 990, PART XI, LINE 9	73,253.

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 for instructions and the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization	THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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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	92,522.	4,136,426.	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) 2022

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
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on 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)			

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

June 30, 2023

Prepared for	The Community Foundation of Sarasota CO. Inc. 2635 Fruitville Road Sarasota, FL 34237
Prepared by	Kerkering, Barberio & CO. P.O. Box 49348 Sarasota, FL 34230-6348
Amount due or refund	Balance due of \$892
Make check payable to	Payments should be made using the Electronic Federal Tax Payment System (EFTPS).
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2022

For calendar year 2022 or other tax year beginning **JUL 1, 2022**, and ending **JUN 30, 2023**.

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).

Department of the Treasury
Internal Revenue Service

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

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	D Employer identification number 59-1956886
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. 2635 FRUITVILLE ROAD	E Group exemption number (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL 34237	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year 412,504,444.	
G 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 <input type="checkbox"/> State college/university			
H Check if filing only to <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439			
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>			
J Enter the number of attached Schedules A (Form 990-T) 1			
K 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.			
L The books are in care of ERIN JONES		Telephone number (941) 955-3000	

Part I Total Unrelated Business Taxable Income		
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	14,509.
2 Reserved	2	
3 Add lines 1 and 2	3	14,509.
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	14,509.
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	14,509.
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	13,509.

Part II Tax Computation		
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	2,837.
2 Trusts taxable at trust rates. 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)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	2,837.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		2,837.
3	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)	3		
4	Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4		2,837.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		0.
6a	Payments: A 2021 overpayment credited to 2022	6a		
b	2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	2,000.	
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	6g		
7	Total payments. Add lines 6a through 6g	7		2,000.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		21.
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed STATEMENT 4	9		858.
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		
11	Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded	11		

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

1	At any time during the 2022 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
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	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 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available 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	\$ 73,097.	
		\$	
6a	Did the organization change its method of accounting? (see instructions)		X
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.

Sign Here

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 _____ Title **CFO**

May the IRS discuss this return with the preparer shown below (see instructions)? **Yes** **No**

Paid Preparer Use Only

Print/Type preparer's name **REBECCA U. STONER** Preparer's signature _____ Date _____ Check if self-employed PTIN **P00585910**

Firm's name **KERKERING, BARBERIO & CO.** Firm's EIN **59-1753337**

Firm's address **P.O. BOX 49348** Phone no. **941-365-4617**

SARASOTA, FL 34230-6348

FORM 990-T		LATE PAYMENT INTEREST			STATEMENT		2
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST	
TAX DUE	11/15/23	837.	837.	.0800	94	17.	
DATE FILED	02/17/24		854.				
TOTAL LATE PAYMENT INTEREST						17.	

FORM 990-T		LATE PAYMENT PENALTY			STATEMENT		3
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY		
TAX DUE	11/15/23	837.	837.	4	17.		
DATE FILED	02/17/24		837.				
TOTAL LATE PAYMENT PENALTY						17.	

FORM 990-T		INTEREST AND PENALTIES			STATEMENT		4
TAX FROM FORM 990-T, PART IV						837.	
UNDERPAYMENT PENALTY						21.	
LATE PAYMENT INTEREST						17.	
LATE PAYMENT PENALTY						17.	
TOTAL AMOUNT DUE						892.	

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

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

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

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 Only

A Name of the organization THE COMMUNITY FOUNDATION OF SARASOTA CO INC.	B Employer identification number 59-1956886
C Unrelated business activity code (see instructions) 523000	D Sequence: 1 of 1

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

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance			
2 Cost of goods sold (Part III, line 8)	1c			
3 Gross profit. Subtract line 2 from line 1c	2			
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	3			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4a	52,252.		52,252.
c Capital loss deduction for trusts	4b			
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 5	4c			
6 Rent income (Part IV)	5	85,603.		85,603.
7 Unrelated debt-financed income (Part V)	6			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	7			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	8			
10 Exploited exempt activity income (Part VIII)	9			
11 Advertising income (Part IX)	10			
12 Other income (see instructions; attach statement)	11			
13 Total. Combine lines 3 through 12	12	137,855.		137,855.
	13			

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

1 Compensation of officers, directors, and trustees (Part X)				
2 Salaries and wages				
3 Repairs and maintenance				
4 Bad debts				
5 Interest (attach statement). See instructions				
6 Taxes and licenses				32.
7 Depreciation (attach Form 4562). See instructions	7			
8 Less depreciation claimed in Part III and elsewhere on return	8a			
9 Depletion				
10 Contributions to deferred compensation plans				
11 Employee benefit programs				
12 Excess exempt expenses (Part VIII)				
13 Excess readership costs (Part IX)				
14 Other deductions (attach statement) SEE STATEMENT 6	14			65,277.
15 Total deductions. Add lines 1 through 14	15			65,309.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			72,546.
17 Deduction for net operating loss. See instructions STMT 7 STMT 9	17			58,037.
18 Unrelated business taxable income. Subtract line 17 from line 16	18			14,509.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

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 Total. Add lines 1 through 5	6	
7 Inventory at end of year	7	
8 Cost of goods sold. 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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 _____

B _____

C _____

D _____

	A	B	C	D
2 Rent received or accrued				
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 _____

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
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 Total gross income (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 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11 Total dividends-received deductions 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			
		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	6. Deductions directly connected with income in column 5
(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)	
Totals			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)
Totals		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	

Part IX Advertising Income

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

A
B
C
D

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

	A	B	C	D
2 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				
5 Readership costs				
6 Circulation income				
7 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				
8 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.			

Part X Compensation of Officers, Directors, and Trustees (see instructions)

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.

Part XI Supplemental Information (see instructions)

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	5
DESCRIPTION		NET INCOME OR (LOSS)	
MAKENA CAPITAL SPLITTER X, L.P. - ORDINARY BUSINESS INCOME (LOSS)		78,127.	
MAKENA CAPITAL SPLITTER X, L.P. - NET RENTAL REAL ESTATE INCOME		1,086.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER NET RENTAL INCOME (LOSS)		4.	
MAKENA CAPITAL SPLITTER X, L.P. - INTEREST INCOME		553.	
MAKENA CAPITAL SPLITTER X, L.P. - DIVIDEND INCOME		334.	
MAKENA CAPITAL SPLITTER X, L.P. - ROYALTIES		1,706.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER PORTFOLIO INCOME (LOSS)		3,793.	
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		85,603.	

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT	6
DESCRIPTION		AMOUNT	
CONTRIBUTIONS		46.	
INVESTMENT INTEREST EXPENSE		201.	
SECTION 59(E)(2) EXPENDITURES		62,586.	
OTHER DEDUCTIONS		2,444.	
TOTAL TO SCHEDULE A, PART II, LINE 14		65,277.	

FORM 990-T (A) POST 2017 NOL SCHEDULE STATEMENT 7

PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
<u>73,097.</u>	<u>58,037.</u>	<u>15,060.</u>

990-T SCH A POST-2017 NET OPERATING LOSS DEDUCTION STATEMENT 8

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	80,283.	43,207.	37,076.	37,076.
06/30/20	36,021.	0.	36,021.	36,021.
NOL CARRYOVER AVAILABLE THIS YEAR			<u>73,097.</u>	<u>73,097.</u>

SCH A (990-T)	SCHEDULE A NOL DETAIL	STATEMENT	9
TAXABLE INCOME FROM ALL ENTITIES		72,546.	
THIS ENTITIES PORTION OF TAXABLE INCOME		72,546.	
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS		100.00%	
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS		0.	
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS		72,546.	
80% INCOME LIMITATION		58,037.	
POST-2017 AVAILABLE		73,097.	
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION		58,037.	

**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 for instructions and the latest information.

OMB No. 1545-0123

2022

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)
1a 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				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				1,006.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7	1,006.

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)
8a 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				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				9,166.
11 Enter gain from Form 4797, line 7 or 9			11	42,080.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15	51,246.

Part III Summary of Parts I and II				
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)			16	1,006.
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)			17	51,246.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns			18	52,252.

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

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment
Sequence No. **12A**

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	MAKENA CAPITAL SPLITTER X, L.P.							1,006.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)								1,006.

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.

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 for instructions and the latest information.

Name(s) shown on return THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Identifying number 59-1956886
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1a Enter the gross proceeds from sales or exchanges reported to you for 2022 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)
	MAKENA CAPITAL SPLITTER X, L.P.						42,080.

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

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

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.

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			
These columns relate to the properties on lines 19A through 19D.			
		Property A	Property B
		Property C	Property D
20	Gross sales price (Note: 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	
25 If section 1245 property:			
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the smaller of line 24 or 25a	25b	
26 If section 1250 property: 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 smaller 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 smaller of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
27 If section 1252 property: 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 smaller of line 24 or 27b	27c	
28 If section 1254 property:			
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 smaller of line 24 or 28a	28b	
29 If section 1255 property:			
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a	
b	Enter the smaller 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 for instructions and the latest information.

OMB No. 1545-0123

2022

Name THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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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)
1a 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				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				1,006.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7	1,006.

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)
8a 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				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				9,166.
11 Enter gain from Form 4797, line 7 or 9			11	42,080.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15	51,246.

Part III Summary of Parts I and II				
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)			16	1,006.
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)			17	51,246.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns			18	52,252.

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

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment
Sequence No. **12A**

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	MAKENA CAPITAL SPLITTER X, L.P.							1,006.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)								1,006.

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.

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return. **FORM 990-T**

2022

Go to www.irs.gov/Form2220 for instructions and the latest information.

Name THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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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	2,837.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b 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		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c	2d		
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	2,837.
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. Caution: 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	1,981.
5 Required annual payment. Enter the smaller 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 Installment due dates. 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	10/15/22	12/15/22	03/15/23	06/15/23
10 Required installments. 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 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11			2,000.	
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				514.
13 Add lines 11 and 12	13			2,000.	514.
14 Add amounts on lines 16 and 17 of the preceding column	14		495.	991.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	1,009.	514.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		495.	0.	
17 Underpayment. 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	495.	496.		
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18			514.	

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)
19 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	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2022 and before 7/1/2022	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 4\% (0.04)}{365}$	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2022 and before 10/1/2022	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2022 and before 1/1/2023	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 6\% (0.06)}{365}$	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2022 and before 4/1/2023	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 7\% (0.07)}{365}$	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2023 and before 7/1/2023	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2023 and before 10/1/2023	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2023 and before 1/1/2024	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2023 and before 3/16/2024	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. 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	38			\$ 21.

* 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. You can also call 1-800-829-4933 to get interest rate information.

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 for instructions and the latest information.

Name(s) shown on return THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Identifying number 59-1956886
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1a Enter the gross proceeds from sales or exchanges reported to you for 2022 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)
	MAKENA CAPITAL SPLITTER X, L.P.						42,080.

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

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

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.

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					
These columns relate to the properties on lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price (Note: 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			
25 If section 1245 property:					
a	Depreciation allowed or allowable from line 22	25a			
b	Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property: 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 smaller 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 smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b, 26e, and 26f	26g			
27 If section 1252 property: 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 smaller of line 24 or 27b	27c			
28 If section 1254 property:					
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 smaller of line 24 or 28a	28b			
29 If section 1255 property:					
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a			
b	Enter the smaller 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 Corporate Income/Franchise Tax Return

F-1120, R. 01/23 1019

FEIN 59-1956886

Rule 12C-1.051
Florida Administrative Code
Effective 01/23
Page 1 of 6

For calendar year 2022 or tax year beginning JUL 1, 2022 ending JUN 30, 2023

833302023063000020050374359195688600000

Name THE COMMUNITY FOUNDATION OF SARASOTA CO. 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

Table with 3 columns: Description, Check here if negative, Amount. Rows include Federal taxable income, State income taxes, Additions, Subtractions, Florida exemption, and BALANCE DUE.

244081 10-04-22

Payment Coupon for Florida Corporate Income Tax Return

1019
F-1120
R. 01/23

Do Not Detach

YEAR ENDING 06/30/23

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

Name THE COMMUNITY FOUNDATION OF S 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.

Table with 4 columns of numbers: 591956886, 20220701, 20230630, 00000000, 012, 202, 1350900, 0, 5803700, 0, 7154600, 0.000000, 0, 0, 0, 0, 5000000, 0, 0, 0, 118500, 0, 0, 0, 0, 118500

118500

8333 0 20230630 0002005037 4 3591956886 0000 0



THE COMMUNITY FOUNDATION OF SARASOTA

FEIN 59-1956886

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Page 2 of 6
06/30/23

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, 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 L Below - See Instructions

- A. State of incorporation: FLORIDA
B. Florida Secretary of State document number: 749965
C. Florida consolidated return? YES NO X
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 X
G-1. Corporation is a member of a controlled group? YES NO X If yes, attach list.
G-2. Part of a federal consolidated return? YES NO X 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 X
H. Location of corporate books: 2635 FRUITVILLE ROAD, SARASOTA, FL 34237
I. Taxpayer is a member of a Florida partnership or joint venture? YES NO X
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.OR
L. Type of federal return filed 1120 1120S or 990-T

L

T

Online Information Reporting Requirement

Visit the Department website to obtain a list of the required information, due date, penalty rate and application to enter the information. (See section 220.27, Florida Statutes)

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 32399-0135

If 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 06/30/23

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. 58,037.00
4. Net capital loss carryover (attach schedule) STATEMENT 1	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 an 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 credit (credit for contributions to nonprofit scholarship-funding organizations)	12.
13. New worlds reading initiative credit	13.
14. Strong families tax credit (credit for contributions to eligible charitable organizations)	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and development tax credit	17.
18. Energy economic zone tax credit	18.
19. s. 168(k), IRC, special bonus depreciation	19.
20. Depreciation of qualified improvement property (see instructions)	20.
21. Expenses for business meals provided by a restaurant (see instructions)	21.
22. Film, television, and live theatrical production expenses (see instructions)	22.
23. Internship tax credit	23.
24. Other additions (attach schedule)	24.
25. Total Lines 1 through 24. Enter total on this line and on Page 1, Line 3.	25. 58,037.00

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 \$ _____	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC, subpart F income \$ _____ (b) less direct and indirect expenses \$ _____	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. 168(k), IRC, special bonus depreciation (see instructions)	9.
10. Depreciation of qualified improvement property (see instructions)	10.
11. Film, television, and live theatrical production expenses (see instructions)	11.
12. Other subtractions (attach schedule)	12.
13. Total Lines 1 through 12. Enter total on this line and on Page 1, Line 5.	13.



NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/23

Schedule III - Apportionment of Adjusted Federal Income					
III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.					
	(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.					1.000000
III-B For use in computing average value of property (use original cost).	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.	_____				
III-C Sales Factor	(a) TOTAL WITHIN FLORIDA (Numerator)		(b) TOTAL EVERYWHERE (Denominator)		
1. Sales (gross receipts)	N/A		N/A		
2. Sales delivered or shipped to Florida purchasers			N/A		
3. Other gross receipts (rents, royalties, interest, etc. when applicable)					
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns (a) and (b))					
III-D Special Apportionment Fractions (see instructions)	(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					

Schedule IV - Computation of Florida Portion of Adjusted Federal Income	
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 06/30/23

Schedule V - Credits Against the Corporate Income/Franchise Tax	
1. Florida health maintenance organization consumer assistance assessment 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 (voluntary cleanup tax credit) (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations) (attach certificate)	12.
13. New worlds reading initiative credit (attach certificate)	13.
14. Strong families tax credit (credit for contributions to eligible charitable organizations) (attach certificate)	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and development tax credit	17.
18. Energy economic zone tax credit	18.
19. Internship tax credit	19.
20. Other credits (attach schedule)	20.
21. Total credits against the tax (sum of Lines 1 through 20 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	21.

Schedule R - Nonbusiness Income

Line 1. Nonbusiness income (loss) allocated to Florida

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

Line 2. Nonbusiness income (loss) allocated elsewhere

<u>Type</u>	<u>State/country allocated to</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
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 06/30/23

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

1. Florida income expected in taxable year	1.	\$	<u>71,546.00</u>
2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N)	2.	\$	<u>50,000.00</u>
3. Estimated Florida net income (Line 1 less Line 2)	3.	\$	<u>21,546.00</u>
4. Total Estimated Florida tax (5.5% of Line 3)		\$	<u>1,185.00</u>
Less: Credits against the tax	4.	\$	<u>1,185.00</u>

5. Computation of installments:

Payment due dates and payment amounts:	If 6/30 year end, last day of 4th month,	
	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.

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.

FL F-1120	FEDERAL CARRYOVER DEDUCTIONS	STATEMENT	1
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CARRYOVERS DEDUCTED IN FEDERAL TAXABLE INCOME	AMOUNT
NET OPERATING LOSS	58,037.00
NET CAPITAL LOSS	
EXCESS CHARITABLE CONTRIBUTION	
EXCESS EMPLOYEE BENEFIT PLAN CONTRIBUTION	



THE COMMUNITY FOUNDATION OF SARASOTA CO.

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7154600	0	0	0
2154600	0	0	0
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118500	0	0	0
0	5803700	0	0
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