

Form **990**

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

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

▶ 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 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

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 \$ 149,364,619. 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 19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4 19
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 31
6	Total number of volunteers (estimate if necessary)	6 50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 13,070.
7b	Net unrelated business taxable income from Form 990-T, line 38	7b 10,051.
8	Contributions and grants (Part VIII, line 1h)	8 63,222,392. 38,526,494.
9	Program service revenue (Part VIII, line 2g)	9 2,916,204. 3,270,307.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10 27,214,424. 8,464,100.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11 -4,656. -5,069.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12 93,348,364. 50,255,832.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13 31,357,684. 19,184,254.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14 0. 0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15 2,371,157. 2,752,245.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a 0. 0.
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,483,064.	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17 5,572,243. 5,525,428.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18 39,301,084. 27,461,927.
19	Revenue less expenses. Subtract line 18 from line 12	19 54,047,280. 22,793,905.
20	Total assets (Part X, line 16)	20 329,524,762. 351,898,126.
21	Total liabilities (Part X, line 26)	21 47,256,337. 38,124,933.
22	Net assets or fund balances. Subtract line 21 from line 20	22 282,268,425. 313,773,193.

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 LAURA SPENCER, CHIEF FINANCIAL OFFICER Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name REBECCA U. STONER	Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P00585910
	Firm's name ▶ KERKERING, BARBERIO & CO. Firm's address ▶ P.O. BOX 49348 SARASOTA, FL 34230-6348	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 \$ 22,385,815. including grants of \$ 19,184,254.) (Revenue \$ 3,270,307.)
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 INCLUDING 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 COMMUNITY IMPACT TEAM BUILDS THE CAPACITY OF LOCAL ORGANIZATIONS TO ENSURE DONORS' CHARITABLE DOLLARS MAKE AN EVEN BIGGER IMPACT BY OFFERING WORKSHOPS, STRATEGIC CONSULTING SERVICES, AND OTHER CAPACITY-BUILDING BENEFITS. ADDITIONALLY, OUR STREAMLINED IMMEDIATE IMPACT GRANTS PROCESS PROVIDES SUPPORT OF UP TO \$5,000 TO LOCAL NONPROFIT ORGANIZATIONS TO ADDRESS URGENT AND EMERGENCY NEEDS, SO THAT

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

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

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **22,385,815.**

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>	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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
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 in 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 31		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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 in 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 in 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 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

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 in 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 in Schedule O.		
	1a 19		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 19		
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, or 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 in 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 in 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 in 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 in 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 in Schedule O)
- 19** Describe in 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 **LAURA SPENCER - (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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) C.J. FISHMAN DIRECTOR	1.00	X					0.	0.	0.	
(2) PAUL HUDSON DIRECTOR	1.00	X					0.	0.	0.	
(3) DONNA KOFFMAN DIRECTOR	1.00	X					0.	0.	0.	
(4) DR. RODNEY LINFORD DIRECTOR	1.00	X					0.	0.	0.	
(5) KELVIN LUMPKIN DIRECTOR	1.00	X					0.	0.	0.	
(6) JEFFREY R. MCCURDY DIRECTOR	1.00	X					0.	0.	0.	
(7) MICHAEL R. PENDER, JR. DIRECTOR	1.00	X					0.	0.	0.	
(8) MATTHEW SAUER DIRECTOR	1.00	X					0.	0.	0.	
(9) DRAYTON SAUNDERS DIRECTOR	1.00	X					0.	0.	0.	
(10) FELICE SCHULANER DIRECTOR	1.00	X					0.	0.	0.	
(11) RICHARD D. SMITH DIRECTOR	1.00	X					0.	0.	0.	
(12) T. ANDREW STULTZ DIRECTOR	1.00	X					0.	0.	0.	
(13) MARILYN THOMPSON DIRECTOR	1.00	X					0.	0.	0.	
(14) TERRI VITALE DIRECTOR	1.00	X					0.	0.	0.	
(15) MARY LOU WINNICK DIRECTOR	1.00	X					0.	0.	0.	
(16) WILLIAM SEIDER SECRETARY	1.00	X		X			0.	0.	0.	
(17) RICHARD GANS CHAIR	1.00	X		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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) DANIEL DELEO TREASURER	1.00	X		X				0.	0.	0.
(19) NELLE S. MILLER VICE CHAIR	1.00	X		X				0.	0.	0.
(20) ELIZABETH PENNEWILL CORPORATE COUNSEL	32.00			X				130,011.	0.	19,686.
(21) MISCHA KIRBY VP, STRATEGIC COMM. & MARKETING	40.00			X				24,831.	0.	0.
(22) MICHAEL KENNEDY SVP, COMMUNITY INVESTMENT	40.00			X				25,558.	0.	0.
(23) LAURA SPENCER CFO	40.00			X				187,665.	0.	25,821.
(24) MARLO DUFFY-TURNER SVP, DONOR ENGAGEMENT	40.00			X				147,990.	0.	31,750.
(25) ROXANNE JERDE PRESIDENT/CEO	40.00			X				293,517.	0.	33,020.
(26) ERIN JONES VP, FINANCE AND OPERATIONS	40.00					X		110,786.	0.	18,269.
1b Sub-total								920,358.	0.	128,546.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								920,358.	0.	128,546.

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 **5**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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	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		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	274,445.

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 **1**

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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	11,100.				
	d Related organizations	1d	6,682,900.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	31,832,494.				
	g Noncash contributions included in lines 1a-1f: \$		13,013,272.				
	h Total. Add lines 1a-1f		38,526,494.				
	Program Service Revenue	2 a ADMINISTRATIVE FEES	Business Code	900099	3,270,307.	3,270,307.	
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f				3,270,307.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			8,837,747.		8,824,677.	
	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					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 11,100. of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses					
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions				50,255,832.	3,270,307.	13,070.	
						8,445,961.	

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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 **X**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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	17,465,861.	17,465,861.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,718,393.	1,718,393.		
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	934,121.	249,587.	235,139.	449,395.
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	1,358,528.	576,807.	500,087.	281,634.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	73,163.	34,846.	28,523.	9,794.
9 Other employee benefits	239,038.	92,439.	79,724.	66,875.
10 Payroll taxes	147,395.	53,964.	47,728.	45,703.
11 Fees for services (non-employees):				
a Management				
b Legal	14,537.	5,322.	4,707.	4,508.
c Accounting	45,660.	16,717.	14,785.	14,158.
d Lobbying	6,900.	2,526.	2,234.	2,140.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	960,414.	351,623.	310,991.	297,800.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	3,097,370.	1,133,997.	1,002,957.	960,416.
12 Advertising and promotion	326,513.	119,542.	105,728.	101,243.
13 Office expenses	104,565.	38,283.	33,859.	32,423.
14 Information technology	105,936.	38,785.	34,303.	32,848.
15 Royalties				
16 Occupancy	49,257.	18,034.	15,950.	15,273.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	80,829.	29,593.	26,173.	25,063.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	165,677.	60,657.	53,648.	51,372.
23 Insurance	113,752.	41,646.	36,834.	35,272.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GRANT INITIATIVES	269,717.	269,717.		
b REPAIRS AND MAINTENANCE	142,455.	52,155.	46,128.	44,172.
c TECHNOLOGY AND CREDIT C	41,846.	15,321.	13,550.	12,975.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	27,461,927.	22,385,815.	2,593,048.	2,483,064.
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 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	12,061,464.	1	
	2 Savings and temporary cash investments	15,250,699.	2	13,471,838.
	3 Pledges and grants receivable, net	396,105.	3	0.
	4 Accounts receivable, net		4	13,389.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	75,307.	9	81,014.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,115,622.		
	b Less: accumulated depreciation	10b 1,752,123.	2,601,616.	10c 2,363,499.
	11 Investments - publicly traded securities	240,706,749.	11	301,531,945.
	12 Investments - other securities. See Part IV, line 11	14,801,225.	12	12,501,605.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	43,631,597.	15	21,934,836.
16 Total assets. Add lines 1 through 15 (must equal line 34)	329,524,762.	16	351,898,126.	
Liabilities	17 Accounts payable and accrued expenses	317,676.	17	417,892.
	18 Grants payable	13,666,626.	18	2,624,400.
	19 Deferred revenue	5,000.	19	0.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	33,267,035.	25	35,082,641.
	26 Total liabilities. Add lines 17 through 25	47,256,337.	26	38,124,933.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	256,009,718.	27	281,605,094.
	28 Temporarily restricted net assets	11,515,193.	28	11,375,594.
	29 Permanently restricted net assets	14,743,514.	29	20,792,505.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	282,268,425.	33	313,773,193.	
34 Total liabilities and net assets/fund balances	329,524,762.	34	351,898,126.	

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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	50,255,832.
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,461,927.
3	Revenue less expenses. Subtract line 2 from line 1	3	22,793,905.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	282,268,425.
5	Net unrealized gains (losses) on investments	5	9,970,128.
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 in Schedule O)	9	-1,259,265.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	313,773,193.

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 in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
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			
2b	Were the organization's financial statements audited by an independent accountant?	X	
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			
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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		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 in Schedule O and describe any steps taken to undergo such audits		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	37,550,467.	7,428,449.	36,973,333.	63,222,392.	38,526,494.	183,701,135.
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	37,550,467.	7,428,449.	36,973,333.	63,222,392.	38,526,494.	183,701,135.
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)						41,844,914.
6 Public support. Subtract line 5 from line 4.						141,856,221.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	37,550,467.	7,428,449.	36,973,333.	63,222,392.	38,526,494.	183,701,135.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	6,759,600.	651,064.	6,012,722.	7,922,411.	8,824,677.	30,170,474.
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.)						
11 Total support. Add lines 7 through 10						213,871,609.
12 Gross receipts from related activities, etc. (see instructions)					12	10,300,096.
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	66.33 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	65.25 %
16a 33 1/3% support test - 2018. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 in 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 five 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 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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 in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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 in (2), 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 government entity (see instructions).			
2 Activities Test. Answer (a) and (b) 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 in (a) 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 (a) and (b) 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? 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 1-1/2% 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 .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 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.

Schedule A (Form 990 or 990-EZ) 2018 INC.

59-1956886 Page 7

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

THE COMMUNITY FOUNDATION OF SARASOTA CO.

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.)

Horizontal lines for supplemental information input.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

Name of the organization

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

Employer identification number

59-1956886

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private 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 or 990-EZ), 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

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 or 990-EZ) 2018

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 (grass roots 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) 2015	(b) 2016	(c) 2017	(d) 2018	(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		6,900.
j Total. Add lines 1c through 1i			6,900.
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 expenditure 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.

Lined area 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

2018

Open to Public Inspection

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	400	
2 Aggregate value of contributions to (during year)	19,667,056.	
3 Aggregate value of grants from (during year)	7,722,704.	
4 Aggregate value at end of year	60,768,653.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

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

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

Yes No

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

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

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

Yes No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

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

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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Schedule D (Form 990) 2018

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 are a 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 programs
 - 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	227,505,320.	177,914,924.	156,772,252.	158,083,345.	141,873,715.
b Contributions	10,021,887.	43,176,674.	11,815,946.	8,993,973.	32,485,996.
c Net investment earnings, gains, and losses	12,968,310.	12,706,858.	17,499,345.	-1,909,663.	8,374,715.
d Grants or scholarships	8,664,420.	10,602,564.	6,705,398.	6,814,410.	23,395,150.
e Other expenditures for facilities and programs	107,407.	-6,416,591.	130,175.	92,997.	33,085.
f Administrative expenses	2,513,447.	2,107,163.	1,337,046.	1,487,996.	1,222,846.
g End of year balance	239,210,243.	227,505,320.	177,914,924.	156,772,252.	158,083,345.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 90.35 %
- b Permanent endowment 1.01 %
- c Temporarily restricted endowment 8.64 %

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:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

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		2,619,672.	932,393.	1,687,279.
c Leasehold improvements				
d Equipment		255,890.	186,258.	69,632.
e Other		1,240,060.	633,472.	606,588.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,363,499.

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) SPLIT INTEREST AGREEMENTS	9,354,283.
(2) OTHER NONCURRENT ASSETS	466,331.
(3) CHARITABLE REMAINDER TRUST	1,459,607.
(4) ESTATES RECEIVABLE	10,385,911.
(5) LIFE INSURANCE RECIEVABLE	268,704.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	21,934,836.

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	4,288,959.
(3) FUNDS HELD AS AGENCY ENDOWMENTS	30,793,682.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	35,082,641.

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 FIN 48 (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	55,658,863.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	9,970,128.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	8,901,931.	
e	Add lines 2a through 2d	2e		18,872,059.
3	Subtract line 2e from line 1	3		36,786,804.
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	593,166.	
b	Other (Describe in Part XIII.)	4b	12,875,862.	
c	Add lines 4a and 4b	4c		13,469,028.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		50,255,832.

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	26,599,982.
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	4,639,378.	
e	Add lines 2a through 2d	2e		4,639,378.
3	Subtract line 2e from line 1	3		21,960,604.
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	593,166.	
b	Other (Describe in Part XIII.)	4b	4,908,157.	
c	Add lines 4a and 4b	4c		5,501,323.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		27,461,927.

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 V - EXPLANATION OF CHANGES TO PRIOR YEAR ENDOWMENT FUNDS

DURING THE TAX YEAR IT WAS DETERMINED THAT CERTAIN ADDITIONAL FUNDS SHOULD HAVE BEEN CLASSIFIED AS BEING PART OF THE ORGANIZATION'S ENDOWMENT. ACCORDINGLY, THE AMOUNTS REPORTED IN SCHEDULE D PART V HAVE BEEN RECLASSIFIED FOR THE FULL 5-YEAR PERIOD FOR BOTH TAX AND AUDIT.

PART X, LINE 2:

UNDER THE INCOME TAXES TOPIC OF THE FASB ACCOUNTING STANDARDS

Part XIII Supplemental Information (continued)

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 XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN SPLIT-INTEREST AGREEMENT VALUES	1,039,696.
DISTRIBUTIONS TO ANNUITANTS	-668,675.
REVENUE OF AFFILIATED ENTITIES INCLUDED IN CONSOLIDATED FINANCIALS	8,530,910.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	8,901,931.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE ON FINANCIAL STMTS	3,034,356.
AGENCY INTEREST AND DIVIDENDS NOT INCLUDED ON FINANCIAL STATEMENTS	773,518.
AGENCY CONTRIBUTIONS NOT INCLUDED ON FINANCIAL STATEMENTS	1,484,752.
AGENCY REALIZED LOSS NOT INCLUDED ON FINANCIAL STATEMENTS	-206,019.
SPECIAL EVENT EXPENSE INCLUDED ON PART VIII LINE 8C	-21,434.
INVESTMENT INCOME REPORTED ON K-1'S	1,114,841.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT REPORT RELATED TO 990S	187,921.
CONTRIBUTIONS FROM RELATED ENTITIES	6,507,928.
ROUNDING	-1.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	12,875,862.

Part XIII Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY AFFILIATED ENTITIES IN CONSOLIDATED

FINANCIALS	4,470,572.
SPECIAL EVENTS EXPENSE REPORTED ON PART VIII LINE 8C	21,434.
SHARED OPERATIONAL EXPENSES ALLOCATED TO TRUST	147,372.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	4,639,378.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ADMINISTRATIVE EXPENSE NETTED WITH ADMINISTRATIVE REVENUE

ON FINANCIAL STMTS	3,034,356.
AGENCY INVESTMENT FEES NOT INCLUDED ON FINANCIAL STATEMENTS	45,353.
INVESTMENT EXPENSES REPORTED ON K-1'S	321,895.
AGENCY GRANTS NOT INCLUDED ON FINANCIAL STATEMENTS	1,317,331.
AGENCY ADMINISTRATIVE FEES NOT INCLUDED ON FINANCIAL STATEMENTS	1,200.
INTERCOMPANY GRANTS ELIMINATED FOR AUDIT REPORT RELATED TO 990S	187,921.
AGENCY AUDIT & FILING FEES	100.
ROUNDING	1.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	4,908,157.

THE COMMUNITY FOUNDATION OF SARASOTA CO.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		JOE TURNESA GOLF TOURNAM (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	27,465.			27,465.
	2 Less: Contributions	11,100.			11,100.
	3 Gross income (line 1 minus line 2)	16,365.			16,365.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	4,210.			4,210.
	7 Food and beverages	6,622.			6,622.
	8 Entertainment				
	9 Other direct expenses	10,602.			10,602.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				21,434.
11 Net income summary. Subtract line 10 from line 3, column (d)				-5,069.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

Part IV Supplemental Information (continued)

Multiple horizontal lines for supplemental information.

**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

2018

**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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ADULT & COMMUNITY ENRICHMENT CENTER AT SUNCOAST TECHNICAL COLLEGE - 4748 BENEVA RD - SARASOTA, FL 34233	59-6000847	501(C)(3)	5,250.	0.			PROGRAM SUPPORT
ALL FAITHS FOOD BANK INC 8171 BLAIKIE COURT SARASOTA, FL 34240	65-0115814	501(C)(3)	145,307.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALL STAR CHILDREN'S FOUNDATION 1221 S. TAMiami TRL SARASOTA, FL 34239	20-2182079	501(C)(3)	60,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALSO FOR GAY YOUTH, INC. 1470 BOULEVARD OF THE ARTS SARASOTA, FL 34236	74-2840470	501(C)(3)	11,538.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ALTA VISTA ELEMENTARY SCHOOL 1050 S. EUCLID AVE. SARASOTA, FL 34237	59-6000847	501(C)(3)	35,532.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
AMERICAN CANCER SOCIETY, INC. NATIONAL OFFICE OF PROBATE AND TRUST MGMT SERV., P.O. BOX 720366 - OKLAHOMA	13-1788491	501(C)(3)	6,620.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 388.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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Schedule I (Form 990) (2018)

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY, LEE COUNTY UNIT - 4575 VIA ROYALE STE 110 - FT. MYERS, FL 33919	13-1788491	501(C)(3)	19,089.	0.			GENERAL SUPPORT
AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. - 125 BROAD ST, 18TH FLOOR - NEW YORK, NY 10004	13-6213516	501(C)(3)	50,800.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
AMERICAN FRIENDS OF THE NATIONAL GALLERY, LONDON - 275 MADISON AVE, 6TH FLOOR - NEW YORK, NY 10016	13-3321549	501(C)(3)	12,000.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION GREATER SOUTHEAST AFFILIATE - 11207 BLUE HERON BLVD N - ST. PETERSBURG, FL 33716	13-5613797	501(C)(3)	19,157.	0.			GENERAL SUPPORT
AMERICAN ISRAEL EDUCATION FOUNDATION - 251 H ST NW - WASHINGTON, DC 20001	52-1623781	501(C)(3)	25,000.	0.			GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE, WEST COAST FLORIDA CHAPTER - 1605 MAIN ST., STE 612 - SARASOTA, FL 34236	13-5563393	501(C)(3)	13,835.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
AMERICAN LUNG ASSOCIATION OF GULF COAST FLORIDA - P.O. BOX 07142 - FORT MYERS, FL 33919	13-1632524	501(C)(3)	19,032.	0.			GENERAL SUPPORT
AMERICAN NATIONAL RED CROSS P.O. BOX 37839 BOONE, IA 50037-0839	53-0196605	501(C)(3)	26,350.	0.			GENERAL SUPPORT, EMERGENCY ASSISTANCE
AMERICAN RED CROSS SOUTHWEST FLORIDA CHAPTER - 2001 CANTU COURT - SARASOTA, FL 34232-6239	53-0196605	501(C)(3)	8,915.	0.			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 Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMNESTY INTERNATIONAL USA, INC. 5 PENN PLAZA, 16TH FLR NEW YORK, NY 10001	52-0851555	501(C)(3)	33,600.	0.			GENERAL SUPPORT
ANGELS AMONG US D/B/A MY CHOICE PREGNANCY CENTER - 5277 N TAMIAMI TRL - SARASOTA, FL 34234	27-5563456	501(C)(3)	9,800.	0.			GENERAL SUPPORT
ANIMAL RESCUE COALITION, INC. 6320 TOWER LANE SARASOTA, FL 34240	65-0950292	501(C)(3)	18,350.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ANIMAL WELFARE LEAGUE OF CHARLOTTE COUNTY FLORIDA - 3519 DRANCE ST. - PORT CHARLOTTE, FL 33980	59-1146309	501(C)(3)	6,000.	0.			PROGRAM SUPPORT
APPALSHOP, INC. 91 MADISON AVE. WHITESBURG, KY 41858	61-0890210	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
ART CENTER SARASOTA 707 N TAMIAMI TRL SARASOTA, FL 34236	59-0706844	501(C)(3)	6,300.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
ART LEAGUE OF MANATEE COUNTY DBA ART CENTER MANATEE - 209 9TH STREET WEST - BRADENTON, FL 34205	59-0967824	501(C)(3)	6,700.	0.			PROGRAM SUPPORT
ARTIST SERIES CONCERTS OF SARASOTA, INC. - 1226 N. TAMIAMI TRL, SUITE 300 - SARASOTA, FL 34236	65-0755294	501(C)(3)	8,288.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
ARTS & CULTURAL ALLIANCE OF SARASOTA COUNTY - 1226 N. TAMIAMI TRAIL, #300 - SARASOTA, FL 34236-2431	59-2710755	501(C)(3)	41,564.	0.			PROGRAM SUPPORT, GENERAL SUPPORT

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN COMMUNITY ALLIANCE 7577 CENTRAL PARKE BLVD, STE 222 MASON, OH 45040	56-2465820	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ASOLO REPERTORY THEATRE INC 5555 N. TAMiami TRAIL SARASOTA, FL 34243	59-2717909	501(C)(3)	179,875.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
ATWATER ELEMENTARY SCHOOL 4701 HUNTSVILLE AVE. NORTH PORT, FL 34288	59-6000847	501(C)(3)	7,615.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BETTER FUTURES FOUNDATION INC (FKA BETTER WORLD FOUNDATION) - 9042 MIDNIGHT PASS RD. 2B - SARASOTA, FL 34242	50-0019942	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
BEYOND THE SPECTRUM, INC. 7333 INTERNATIONAL DRIVE SARASOTA, FL 34240	20-8269622	501(C)(3)	25,390.	0.			GENERAL SUPPORT
BIG BROTHERS BIG SISTERS OF THE SUN COAST, INC. - 1000 S TAMiami TRL STE C - VENICE, FL 34285	59-1361826	501(C)(3)	19,375.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BIG CAT HABITAT GULF COAST SANCTUARY INC - 7101 PALMER BOULEVARD - SARASOTA, FL 34232	65-0659177	501(C)(3)	57,700.	0.			GENERAL SUPPORT
BOCA GRANDE UNITED METHODIST CHURCH DBA THE LIGHTHOUSE CHURCH OF BOCA GRAND - P.O. BOX 524 - BOCA GRANDE, FL 33921	58-2221539	501(C)(3)	10,050.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOOKER HIGH SCHOOL 3201 N. ORANGE AVENUE SARASOTA, FL 34234	59-6000847	501(C)(3)	62,872.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

Schedule I (Form 990)

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INC.

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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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOOKER MIDDLE SCHOOL 2250 MYRTLE STREET SARASOTA, FL 34234	59-6000847	501(C)(3)	12,530.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF CHARLOTTE COUNTY - 21450 GIBRALTER DRIVE SUITE 10 - PORT CHARLOTTE, FL 33952	65-0725247	501(C)(3)	13,678.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF GREATER DUBUQUE - 1299 LOCUST STREET - DUBUQUE, IA 52001	42-0710263	501(C)(3)	12,000.	0.			PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF MANATEE COUNTY, INC. - 5236 30TH STREET WEST 2ND FLOOR - BRADENTON, FL 34207	59-0675141	501(C)(3)	23,560.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF SARASOTA COUNTY, INC. - 3130 FRUITVILLE ROAD - SARASOTA, FL 34237	59-6211876	501(C)(3)	290,029.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, CAPITAL PURCHASES, SCHOLARSHIP SUPPORT
BREVARD MUSIC CENTER INCORPORATED P.O. BOX 312 BREVARD, NC 28712	56-0729350	501(C)(3)	5,000.	0.			GENERAL SUPPORT
BRIDGE TO LIFE, INC. 707 S. GULFSTREAM AVENUE, UNIT 308 SARASOTA, FL 34236	38-4039226	501(C)(3)	7,500.	0.			CAPITAL PURCHASES
BUSINESS ALLIANCE FOR LOCAL LIVING ECONOMIES AKA BALLE - 2323 BROADWAY - OAKLAND, CA 94612	20-1544255	501(C)(3)	20,350.	0.			PROGRAM SUPPORT
C.G. JUNG SOCIETY OF SARASOTA P.O. BOX 50611 SARASOTA, FL 34232	65-0480102	501(C)(3)	7,000.	0.			GENERAL SUPPORT

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CAN COMMUNITY HEALTH INC 4440 FRUITVILLE ROAD SARASOTA, FL 34232	65-0278528	501(C)(3)	8,850.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
CARDINAL MOONEY HIGH SCHOOL 4171 FRUITVILLE ROAD SARASOTA, FL 34232	59-0900923	501(C)(3)	26,389.	0.			GENERAL SUPPORT
CARE FOR PASTORS, INC. 1300 CITIZENS BLVD, SUITE 390 LEESBURG, FL 34748	16-1734362	501(C)(3)	9,000.	0.			GENERAL SUPPORT
CARE 151 ELLIS STREET NE ATLANTA, GA 30303-2440	13-1685039	501(C)(3)	7,000.	0.			GENERAL SUPPORT
CAT DEPOT 2542 17TH ST SARASOTA, FL 34234	20-0217681	501(C)(3)	5,854.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES DIOCESE OF VENICE, INC. - 1000 PINEBROOK RD. - VENICE, FL 34285	59-2473176	501(C)(3)	66,230.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES OF DESOTO COUNTY, DISTRICT IV - 1210 E. OAK STREET - ALCADIA, FL 34266-8907	59-2473176	501(C)(3)	103,275.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
CATHOLIC CHARITIES/OUR MOTHER'S HOUSE - P.O. BOX 2240 - VENICE, FL 34285	59-2473176	501(C)(3)	7,300.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
CENTER OF THE AMERICAN EXPERIMENT 8421 WAYZATA BLVD., STE. 110 SAINT LOUIS PARK, MN 55426	36-3611426	501(C)(3)	5,000.	0.			GENERAL SUPPORT

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CENTERS FOR SUCCESS, INC. PO BOX 324 TALLEVAST, FL 34270	59-6214463	501(C)(3)	7,180.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CENTERSTONE OF FLORIDA 391 6TH AVENUE WEST BRADENTON, FL 34205	59-1009537	501(C)(3)	60,000.	0.			PROGRAM SUPPORT
CHABAD LUBAVITCH OF SARASOTA AND MANATEE COUNTIES, INC. - 7700 BENEVA ROAD - SARASOTA, FL 34238	65-0234425	501(C)(3)	7,500.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
CHARLOTTE COUNTY ART GUILD, INC. DBA VISUAL ARTS CENTER - 210 MAUD ST. - PUNTA GORDA, FL 33950	59-6192800	501(C)(3)	51,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHARLOTTE COUNTY PUBLIC SCHOOLS 1445 EDUCATION WAY PORT CHARLOTTE, FL 33948	59-6000539	501(C)(3)	8,048.	0.			PROGRAM SUPPORT
CHILD PROTECTION CENTER, INC. 720 S. ORANGE AVE SARASOTA, FL 34236	59-2113850	501(C)(3)	20,919.	0.			ENDOWMENT SUPPORT, GENERAL SUPPORT, PROGRAM SUPPORT
CHILDREN FIRST, INC. 1723 N ORANGE AVE SARASOTA, FL 34234	59-0968249	501(C)(3)	36,037.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, CAPITAL PURCHASES
CHILDREN'S BOOK PROJECT 3433 21ST ST. SAN FRANCISCO, CA 94110-2212	94-3229734	501(C)(3)	20,000.	0.			GENERAL SUPPORT
CHILDREN'S CANCER CENTER, INC. 4901 W. CYPRESS ST. TAMPA, FL 33607	59-1779035	501(C)(3)	20,000.	0.			GENERAL SUPPORT

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CHILDREN'S GUARDIAN FUND INC P.O. BOX 49722 SARASOTA, FL 34230	65-0626074	501(C)(3)	40,121.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
CHILDRENS HEALTHY PANTRY, INC. 1809 LOMA LINDA STREET SARASOTA, FL 34239	46-1022470	501(C)(3)	7,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
CHIPOLA COLLEGE FOUNDATION, INC. 3094 INDIAN CIR MARIANNA, FL 32446	59-2074070	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
CHRIST CHURCH OF LONGBOAT KEY 6400 GULF OF MEXICO DR. LONGBOAT KEY, FL 34228	42-1662224	501(C)(3)	5,000.	0.			GENERAL SUPPORT
CHURCH OF THE CROSS 5051 26TH STREET WEST BRADENTON, FL 34207	59-1803986	501(C)(3)	6,640.	0.			GENERAL SUPPORT
CHURCH OF THE REDEEMER 222 S. PALM AVENUE SARASOTA, FL 34236	59-0751911	501(C)(3)	12,450.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT
CINCINNATI BALLET COMPANY, THE 1555 CENTRAL PARKWAY CINCINNATI, OH 45214	31-6050354	501(C)(3)	12,000.	0.			PROGRAM SUPPORT
CITY OF NORTH PORT - DIVISION OF SOCIAL SERVICES - 6919 OUTREACH WAY - NORTH PORT, FL 34287	59-6072227	501(C)(3)	56,067.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
CITY OF SARASOTA 1565 1ST STREET, ROOM 109 SARASOTA, FL 34236	59-6000426	501(C)(3)	11,625.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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CLEVELAND CLINIC FOUNDATION PO BOX 931517 CLEVELAND, OH 44193	34-0714585	501(C)(3)	99,328.	0.			PROGRAM SUPPORT
COASTAL BEHAVIORAL HEALTHCARE INC 1565 STATE STREET SARASOTA, FL 34236	59-1432136	501(C)(3)	9,050.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
COEXISTENCE, INC. P.O. BOX 2559 SARASOTA, FL 34230	20-3581293	501(C)(3)	80,950.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES, GENERAL SUPPORT
COMMITTEE FOR ACCURACY IN MIDDLE EAST REPORTING IN AMERICA, INC. - P.O. BOX 35040 - BOSTON, MA 02135	52-1332702	501(C)(3)	6,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY ASSISTED & SUPPORTED LIVING, INC. (C.A.S.L.) - 1401 16TH ST - SARASOTA, FL 34236	65-0869993	501(C)(3)	70,250.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
COMMUNITY COALITION ON HOMELESSNESS DBA TURNING POINTS - 701 17TH AVENUE W - BRADENTON, FL 34205	59-3340921	501(C)(3)	540,745.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY FOUNDATION OF JACKSON HOLE - PO BOX 1523 - DRIGGS, ID 83422	83-0308856	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
COMMUNITY FOUNDATION OF JOHNSON COUNTY - 325 E. WASHINGTON ST. - IOWA CITY, IA 52240	42-1508117	501(C)(3)	7,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
COMMUNITY FOUNDATION OF NORTH FLORIDA, INC. - 3600 MACLAY BLVD SOUTH, STE 200 - TALLAHASSEE, FL 32312	59-3473384	501(C)(3)	6,000.	0.			EMERGENCY ASSISTANCE

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COMMUNITY SOLUTIONS 360 8466 LOCKWOOD RIDGE ROAD #157 SARASOTA, FL 34243	65-0953161	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
COMPASSION & CHOICES P.O. BOX 485 ETNA, NH 03750-0485	84-1328829	501(C)(3)	6,850.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
CONGREGATION OF THE SACRED HEARTS OF JESUS AND MARY - P.O. BOX 111 - FAIRHAVEN, MA 02719-0111	04-2160533	501(C)(3)	7,099.	0.			GENERAL SUPPORT
CONSERVATION FOUNDATION OF THE GULF COAST - PO BOX 902 - OSPREY, FL 34229	20-0345249	501(C)(3)	27,980.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT, GENERAL SUPPORT
CORNELL UNIVERSITY FOUNDATION 130 EAST SENECA STREET, SUITE 400 ITHACA, NY 14850	22-284-8738	501(C)(3)	5,200.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
CORNELL UNIVERSITY MEDICAL COLLEGE / WEILL CORNELL MEDICAL COLLEGE - 1300 YORK AVE., BOX 314 - NEW YORK, NY 10065	13-3376695	501(C)(3)	5,100.	0.			GENERAL SUPPORT
CRANBERRY ELEMENTARY SCHOOL 2775 SHALIMAR TERRACE NORTH PORT, FL 34286	59-6000847	501(C)(3)	8,058.	0.			PROGRAM SUPPORT
CREEKSIDE CHRISTIAN CHURCH, INC. 92 LIFESPRING WAY ST. JOHNS, FL 32259	01-0697890	501(C)(3)	50,000.	0.			CAPITAL PURCHASES
DEER ISLE SUNSET CONGREGATIONAL CHURCH UCC - P.O. BOX 292 - DEER ISLE, ME 04627	45-4089930	501(C)(3)	11,000.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT

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DIOCESE OF VENICE IN FLORIDA INC 1000 PINEBROOK ROAD VENICE, FL 34285	27-1988145	501(C)(3)	8,549.	0.			GENERAL SUPPORT
DIVAS OF SARASOTA, INC. 2127 WORRINGTON ST. SARASOTA, FL 34231	83-1969250	501(C)(3)	5,353.	0.			PROGRAM SUPPORT
DO GOOD FUND, INC. P.O. BOX 1199 COLUMBUS, GA 31901	45-5236209	501(C)(3)	5,000.	0.			GENERAL SUPPORT
DOCTORS WITHOUT BORDERS USA, INC. P.O. BOX 5030 HAGERSTOWN, MD 21741-5030	13-3433452	501(C)(3)	11,300.	0.			GENERAL SUPPORT
DRUG COURT - TWELFTH JUDICIAL CIRCUIT - 1751 MOUND ST. - SARASOTA, FL 34230-6587	59-6000848	501(C)(3)	11,463.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EARLY LEARNING COALITION OF MANATEE COUNTY INC - PO BOX 939 - PALMETTO, FL 34220	65-0811318	501(C)(3)	10,950.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
EARLY LEARNING COALITION OF SARASOTA COUNTY - 1750 17TH STREET BUILDING L - SARASOTA, FL 34234	65-1110174	501(C)(3)	38,412.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
EASTER SEALS SOUTHWEST FLORIDA INC 350 BRADEN AVENUE SARASOTA, FL 34243	59-0638490	501(C)(3)	30,779.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
EDUCATION FOUNDATION OF SARASOTA COUNTY INC - 1960 LANDINGS BOULEVARD, #120 - SARASOTA, FL 34231-3365	59-2320858	501(C)(3)	71,282.	0.			GENERAL SUPPORT, ENDOWMENT SUPPORT, PROGRAM SUPPORT

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EDUCATIONAL CONSULTANTS CONSORTIUM INC - 5719 HEVENA CT - PALMETTO, FL 34221	65-0612497	501(C)(3)	5,859.	0.			PROGRAM SUPPORT
EMMA E. BOOKER ELEMENTARY SCHOOL 2350 DR. MARTIN LUTHER KING WAY SARASOTA, FL 34234	59-6000847	501(C)(3)	36,575.	0.			EMERGENCY ASSISTANCE, CAPITAL PURCHASES, PROGRAM SUPPORT
EMMA WILLARD SCHOOL 285 PAWLING AVENUE TROY, NY 12180	14-1338390	501(C)(3)	16,000.	0.			GENERAL SUPPORT
EMMANUEL LUTHERAN CHURCH 790 S. TAMIAMI TRAIL VENICE, FL 34285	59-1351925	501(C)(3)	7,156.	0.			GENERAL SUPPORT
EOS INTERNATIONAL NFP PO BOX 4638 SAINT PAUL, MN 55104	26-4080644	501(C)(3)	10,000.	0.			GENERAL SUPPORT
F A R INSTITUTE 1803 GLENGARY STREET SARASOTA, FL 34231	46-0884268	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
FAIRY TAIL ENDINGS INC PO BOX 17483 SARASOTA, FL 34231-5107	27-3018028	501(C)(3)	25,372.	0.			GENERAL SUPPORT
FAMILY PROMISE OF SARASOTA INC 8499 S TAMIAMI TRL PMB 267 SARASOTA, FL 34238	20-5058968	501(C)(3)	21,603.	0.			GENERAL SUPPORT
FAMILY PROMISE OF SOUTH SARASOTA COUNTY - 720 SHAMROCK BLVD - VENICE, FL 34293	46-4906213	501(C)(3)	5,000.	0.			PROGRAM SUPPORT

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FANCONI ANEMIA RESEARCH FUND, INC. 1801 WILLIAMETTE ST., SUITE 200 EUGENE, OR 97401	93-0995453	501(C)(3)	10,653.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FCNL EDUCATION FUND 245 SECOND ST. NE WASHINGTON, DC 20002	52-1254489	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FIDELITY CHARITABLE GIFT FUND P O BOX 770001 CINCINNATI, OH 45277-0053	11-0303001	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH 2050 OAK STREET SARASOTA, FL 34237	23-6393377	501(C)(3)	8,283.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FIRST STEP OF SARASOTA INC 4579 NORTHGATE CT SARASOTA, FL 34234	59-1304472	501(C)(3)	5,855.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH 104 S. PINEAPPLE AVE. SARASOTA, FL 34236	59-0637841	501(C)(3)	11,500.	0.			GENERAL SUPPORT
FISHER HOUSE FOUNDATION 12300 TWINBROOK PKWY, SUITE 410 ROCKVILLE, MD 20852-1650	11-3158401	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FLORIDA COALITION ON DONATION, INC. DBA DONATE LIFE FLORIDA - PO BOX 51772 - SARASOTA, FL 34232	20-1169939	501(C)(3)	33,682.	0.			GENERAL SUPPORT
FLORIDA PHILANTHROPIC NETWORK, INC. - 5421 BEAUMONT CENTER DR, STE 655 - TAMPA, FL 33634	20-1328734	501(C)(3)	5,500.	0.			EMERGENCY ASSISTANCE, PROGRAM SUPPORT

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FLORIDA SHERIFFS YOUTH RANCHES INC P.O. BOX 2000 BOYS RANCH, FL 32064	23-7303117	501(C)(3)	36,457.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FLORIDA STUDIO THEATRE INC. 1241 N PALM AVE SARASOTA, FL 34236	23-7362760	501(C)(3)	60,885.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT, ENDOWMENT SUPPORT
FOLDS OF HONOR FOUNDATION 5800 N. PATRIOT DRIVE OWASSO, OK 74055	75-3240683	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FORTY CARROTS FAMILY CENTER 1500 S TUTTLE AVE SARASOTA, FL 34239	65-0405988	501(C)(3)	137,455.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FOUNDATION FOR FLORIDA GATEWAY COLLEGE, INC. - 149 SE COLLEGE PL - LAKE CITY, FL 32025	59-1627997	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
FOUNDATION FOR LIBERTY AND AMERICAN GREATNESS, INC. AKA FLAG - P.O. BOX 911 - COLLEYVILLE, TX 76034	47-5088082	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
FRIENDS OF AMANI US, INC. P.O. BOX 1781 BURNSVILLE, MN 55337	27-3621599	501(C)(3)	5,900.	0.			PROGRAM SUPPORT
FRIENDS OF ARTS & HUMANITIES, INC. DBA DESIGNING WOMEN BOUTIQUE - 1226 N TAMIAMI TRL SUITE 101 - SARASOTA, FL 34236-2461	02-0592364	501(C)(3)	11,500.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
FRIENDS OF SARASOTA COUNTY PARKS INC - 234 NIPPINO TRAIL E UNIT 101 - NOKOMIS, FL 34275	45-0522194	501(C)(3)	37,689.	0.			CAPITAL PURCHASES

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FRIENDS OF THE SARASOTA COUNTY HISTORY CENTER, INC. - PO BOX 1221 - SARASOTA, FL 34230	20-3329599	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
FRIENDS OF THE SELBY PUBLIC LIBRARY - 1331 FIRST STREET - SARASOTA, FL 34236	59-1715741	501(C)(3)	20,320.	0.			GENERAL SUPPORT
FRUITVILLE ELEMENTARY SCHOOL 601 HONORE AVE. SARASOTA, FL 34232	59-6000847	501(C)(3)	12,135.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
FSU/ASOLO CONSERVATORY FOR ACTOR TRAINING - 5555 N. TAMIAMI TRAIL - SARASOTA, FL 34243	59-6152180	501(C)(3)	40,941.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
GARY GREENE REALTORS FOUNDATION 5120 WOODWAY DR STE 5020 HOUSTON, TX 77056	76-0445201	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
GATOR WILDERNESS CAMP SCHOOL 44930 FARABEE ROAD PUNTA GORDA, FL 33982	65-0704638	501(C)(3)	9,396.	0.			GENERAL SUPPORT
GIRL SCOUTS OF GULF COAST FLORIDA INC - 4780 CATTLEMEN ROAD - SARASOTA, FL 34233	59-0760212	501(C)(3)	10,600.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
GIRLS INCORPORATED OF SARASOTA COUNTY - 201 S TUTTLE AVE - SARASOTA, FL 34237-6333	23-7363275	501(C)(3)	100,581.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
GLASSER-SCHOENBAUM HUMAN SERVICES CENTER - 1750 17TH ST BLDG. J-1 - SARASOTA, FL 34234	59-2707877	501(C)(3)	1,001,217.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, EMERGENCY ASSISTANCE, ENDOWMENT SUPPORT

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GLENALLEN ELEMENTARY SCHOOL 7050 GLENALLEN BLVD. NORTH PORT, FL 34287	59-6000847	501(C)(3)	5,262.	0.			PROGRAM SUPPORT, EMERGENCY ASSISTANCE
GLENRIDGE CHARITABLE FOUNDATION, INC. - 7333 SCOTLAND WAY - SARASOTA, FL 34238	81-2990180	501(C)(3)	5,000.	0.			GENERAL SUPPORT
GLOBAL INTERDEPENDENCE CENTER 100 N 6TH ST, 5TH FLOOR SE PHILADELPHIA, PA 19106	23-2138619	501(C)(3)	5,500.	0.			GENERAL SUPPORT
GLOBAL POST-TRAUMATIC STRESS INJURY FOUNDATION - 129 FAST LN STE 200 - MOORESVILLE, NC 28117	26-3006397	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
GLORIA MUSICAE, INC., DBA CHORAL ARTISTS OF SARASOTA - P.O. BOX 52987 - SARASOTA, FL 34232	59-1913814	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
GOCIO ELEMENTARY SCHOOL 3450 GOCIO ROAD SARASOTA, FL 34235	59-6000847	501(C)(3)	140,159.	0.			PROGRAM SUPPORT
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH, INC. - 5659 HONORE AVE. - SARASOTA, FL 34233	59-2170050	501(C)(3)	84,618.	0.			GENERAL SUPPORT
GREATER TWIN CITIES UNITED WAY PO BOX 2949 MINNEAPOLIS, MN 55402	41-1973442	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
GULF COAST COMMUNITY FOUNDATION 601 TAMiami TRAIL SOUTH VENICE, FL 34285	59-1052433	501(C)(3)	650,750.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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GULF COAST STATE COLLEGE FOUNDATION, INC. - 5230 W. HIGHWAY 98 - PANAMA CITY, FL 32401	59-1682455	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
GULF GATE ELEMENTARY SCHOOL 6500 S. LOCKWOOD RIDGE ROAD SARASOTA, FL 34231	59-6000847	501(C)(3)	6,320.	0.			PROGRAM SUPPORT
H. LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE FOUNDATION - P.O. BOX 23827 - TAMPA, FL 33623-3827	59-2451713	501(C)(3)	5,475.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HABITAT FOR HUMANITY - SARASOTA INC - 1757 NORTH EAST AVE - SARASOTA, FL 34234	59-2495597	501(C)(3)	1,068,056.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
HABITAT FOR HUMANITY OF THE ROARING FORK VALLEY - 7025 HIGHWAY 82 - GLENWOOD SPRINGS, CO 81601	84-1499538	501(C)(3)	7,500.	0.			CAPITAL PURCHASES
HABITAT FOR HUMANITY SOUTH SARASOTA COUNTY, INC. - 280 ALLIGATOR DRIVE - VENICE, FL 34293	65-0326534	501(C)(3)	5,100.	0.			PROGRAM SUPPORT
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA, INC. - 40 WALL STREET - NEW YORK, NY 10005	13-1656651	501(C)(3)	10,104.	0.			GENERAL SUPPORT
HARVEST TABERNACLE OF SARASOTA D/B/A HARVEST HOUSE TRANSITIONAL CENTERS - 3650 17TH ST. - SARASOTA, FL 34235	59-2186807	501(C)(3)	21,185.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HERMITAGE ARTIST RETREAT INC 6630 MANASOTA KEY ROAD ENGLEWOOD, FL 34223	30-0104608	501(C)(3)	52,075.	0.			PROGRAM SUPPORT, GENERAL SUPPORT

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HERSHORIN SCHIFF DAY SCHOOLS OF TOMORROW INC DBA HERSHORIN SCHIFF COMMUNITY - 1050 SOUTH TUTTLE AVENUE, BUILDING 3 - SARASOTA, FL	47-3558984	501(C)(3)	8,550.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
HEWITT SCHOOL 45 E 75TH STREET NEW YORK, NY 10021	13-1658789	501(C)(3)	25,000.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
HONOR SANCTUARY INC DBA HONOR ANIMAL RESCUE - 4951 LORRAINE RD - BRADENTON, FL 34211	26-0878064	501(C)(3)	27,100.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT
HORIZONS UNLIMITED CHRISTIAN ACADEMY, INC. - 2674 DR. M. L. KING JR WAY - SARASOTA, FL 34234	14-1879521	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
HUMANE SOCIETY AT LAKEWOOD RANCH INC - 26920 GOPHER HILL RD - MYAKKA CITY, FL 34251	27-3937966	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
HUMANE SOCIETY OF SARASOTA COUNTY INC - 2331 15TH STREET - SARASOTA, FL 34237	59-6014943	501(C)(3)	114,418.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
ILLINOIS STATE UNIVERSITY FOUNDATION - CAMPUS BOX 8000 - NORMAL, IL 61790-8000	37-6025713	501(C)(3)	5,000.	0.			GENERAL SUPPORT
INSTRIDE THERAPY 1629 RANCH ROAD NOKOMIS, FL 34275	65-0536169	501(C)(3)	35,449.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
IOWA CITY HOSPICE, INC. 1025 WADE STREET IOWA CITY, IA 52240	42-1154098	501(C)(3)	5,000.	0.			GENERAL SUPPORT

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ITN SUNCOAST, INC. 1704 N. HONORE AVENUE SARASOTA, FL 34235	01-0915148	501(C)(3)	10,166.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
JERSEY COUNTY HISTORICAL SOCIETY 601 NORTH STATE STREET JERSEYVILLE, IL 62052	51-0153238	501(C)(3)	18,378.	0.			GENERAL SUPPORT
JERSEYVILLE PUBLIC LIBRARY 105 N. LIBERTY ST. JERSEYVILLE, IL 62052	37-1175704	501(C)(3)	9,189.	0.			GENERAL SUPPORT
JEWISH AGENCY FOR ISRAEL-NORTH AMERICAN COUNCIL - 633 THIRD AVE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE OF THE SUNCOAST, INC. - 2688 FRUITVILLE ROAD - SARASOTA, FL 34237-5223	59-2693318	501(C)(3)	224,245.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, EMERGENCY ASSISTANCE
JEWISH HOUSING COUNCIL FOUNDATION, INC. - 1955 N. HONORE AVE., STE. B1 - SARASOTA, FL 34235-9151	20-0910348	501(C)(3)	198,083.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JOHN & MABLE RINGLING MUSEUM OF ART FOUNDATION - 5401 BAY SHORE ROAD - SARASOTA, FL 34243	59-6214423	501(C)(3)	85,425.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JOHNS HOPKINS ALL CHILDREN'S HOSPITAL FOUNDATION, INC. - PO BOX 3142 - ST. PETERSBURG, FL 33731-3142	59-2481738	501(C)(3)	6,339.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
JOSHPROVIDES EPILEPSY ASSISTANCE FOUNDATION, INC. - 5428 SUNDEW DRIVE - SARASOTA, FL 34238	46-2322505	501(C)(3)	8,114.	0.			PROGRAM SUPPORT, GENERAL SUPPORT

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JUNIOR LEAGUE OF SARASOTA, INC. 3300 S. TAMiami TRAIL, #3 SARASOTA, FL 34239-5100	59-6159037	501(C)(3)	52,214.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
LA MUSICA DI ASOLO, INC. P.O. BOX 5442 SARASOTA, FL 34277	65-0005948	501(C)(3)	13,250.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
LAFAYETTE COLLEGE BOX 3000 EASTON, PA 18042	24-0795686	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
LEARNING COMMUNITY, INC. 3772 KOSTEN PL SARASOTA, FL 34240	36-4859725	501(C)(3)	12,000.	0.			PROGRAM SUPPORT
LEAVEN, INC. 1164 MALLARD MARSH DRIVE OSPREY, FL 34229	61-1809501	501(C)(3)	17,500.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
LEGAL AID OF MANASOTA, INC. 1900 MAIN ST STE 302 SARASOTA, FL 34236-5927	65-0265426	501(C)(3)	15,525.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
LIBERTY BAPTIST CHURCH OF SARASOTA, INC. - 4249 BAHIA VISTA STREET - SARASOTA, FL 34232	59-1894921	501(C)(3)	5,000.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
LIBRARY FOUNDATION FOR SARASOTA COUNTY, INC. - P.O. BOX 17903 - SARASOTA, FL 34276-0903	45-2585429	501(C)(3)	42,884.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
LIGHT OF THE WORLD INTERNATIONAL CHURCH - P.O. BOX 48974 - SARASOTA, FL 34230	83-0499021	501(C)(3)	18,800.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES, SCHOLARSHIP SUPPORT

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LONGBOAT ISLAND CHAPEL, INC. 6200 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228	59-1114318	501(C)(3)	250,000.	0.			GENERAL SUPPORT
LONGBOAT KEY CENTER FOR HEALTHY LIVING INC (DBA THE PARADISE CENTER) - 567 BAY ISLES ROAD - LONGBOAT KEY, FL 34228	35-2548455	501(C)(3)	55,087.	0.			ENDOWMENT SUPPORT, GENERAL SUPPORT
LOVE MCKINLEY, INC. 6726 10TH AVE N ST. PETERSBURG, FL 33710	81-2098367	501(C)(3)	5,000.	0.			GENERAL SUPPORT
LOVELAND CENTER, INC. 157 S. HAVANA ROAD VENICE, FL 34292	59-1011392	501(C)(3)	79,167.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
LOYOLA ACADEMY 1100 LARAMIE AVENUE WILMETTE, IL 60091	36-2367981	501(C)(3)	19,000.	0.			SCHOLARSHIP SUPPORT
LUPUS RESEARCH ALLIANCE, INC. 275 MADISON AVENUE, 10TH FLOOR NEW YORK, NY 10016	58-2492929	501(C)(3)	12,100.	0.			GENERAL SUPPORT
LUTHERAN SERVICES FLORIDA, INC. 3627 WEST WATERS AVE. TAMPA, FL 33614	59-2198911	501(C)(3)	29,294.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
LUTHERAN SOCIAL SERVICES OF THE SOUTHWEST - 10201 S. 51ST ST., STE 180 - PHOENIX, AZ 85044	86-0252302	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
MADONNA OF THE STREETS INC DBA ST. LUKE'S MISSION OF MERCY - PO BOX 448 - BUFFALO, NY 14215	16-1433964	501(C)(3)	50,000.	0.			GENERAL SUPPORT

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MAKE-A-WISH FOUNDATION SOUTH FLORIDA, SUNCOAST REGIONAL OFFICE - 3430 MAGIC OAK LANE - SARASOTA, FL 34232	59-2620322	501(C)(3)	5,420.	0.			GENERAL SUPPORT
MANA-SOTA LIGHTHOUSE FOR THE BLIND INC DBA LIGHTHOUSE VISION LOSS EDUCATION - 7318 N TAMIAMI TRL - SARASOTA, FL 34243	59-2591136	501(C)(3)	171,479.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANASOTA SOLVE, INC. 1509 8TH AVENUE WEST BRADENTON, FL 34205	59-1683408	501(C)(3)	7,812.	0.			GENERAL SUPPORT
MANATEE COUNTY BOARD OF COUNTY COMMISSIONERS - PO BOX 1000 - BRADENTON, FL 34206-1000	59-6000727	501(C)(3)	14,797.	0.			PROGRAM SUPPORT
MANATEE COUNTY DRUG COURT 1051 MANATEE AVENUE W. BRADENTON, FL 34205	59-6000848	501(C)(3)	17,416.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY FAMILY YMCA, INC. 1023 MANATEE AVE WEST 6TH FLOOR BRADENTON, FL 34205	59-1626905	501(C)(3)	35,324.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE COUNTY GIRLS CLUB, INC. DBA JUST FOR GIRLS - 1011 21ST STREET EAST - BRADENTON, FL 34208	59-1271332	501(C)(3)	16,866.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
MANATEE COUNTY HABITAT FOR HUMANITY - 1901 MANATEE AVE W 2ND FLOOR - BRADENTON, FL 34205	65-0484034	501(C)(3)	57,172.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MANATEE EDUCATION FOUNDATION 1023 MANATEE AVE. W. SUITE 215 BRADENTON, FL 34205	65-0037457	501(C)(3)	9,425.	0.			PROGRAM SUPPORT

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MANHATTAN COLLEGE 4513 MANHATTAN PARKWAY RIVERDALE, NY 10471	13-1740468	501(C)(3)	15,000.	0.			GENERAL SUPPORT
MARIE SELBY BOTANICAL GARDENS INC 811 S. PALM AVENUE SARASOTA, FL 34236-7726	59-1848965	501(C)(3)	115,481.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT
MARROW NATION, INC. 3433 CARMICHAEL STREET PALM HARBOR, FL 34684	80-0484457	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET, SUITE 540 BOSTON, MA 02114-1101	04-1564655	501(C)(3)	50,200.	0.			GENERAL SUPPORT
MEALS ON WHEELS OF SARASOTA INC P.O. BOX 178 SARASOTA, FL 34230-0178	59-1391249	501(C)(3)	5,931.	0.			GENERAL SUPPORT
MEALS ON WHEELS PLUS OF MANATEE, INC. - 811 23RD AVE E - BRADENTON, FL 34208	59-1420986	501(C)(3)	8,400.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
MEMORIAL SLOAN-KETTERING CANCER CENTER - PO BOX 27106 - NEW YORK, NY 10087	13-1924236	501(C)(3)	5,950.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MENTAL HEALTH COMMUNITY CENTERS, INC. - 240-B S. TUTTLE AVENUE - SARASOTA, FL 34237-6334	65-0238526	501(C)(3)	7,257.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
MESOTHELIOMA APPLIED RESEARCH FOUNDATION - 1615 L STREET NW, SUITE 430 - WASHINGTON, DC 20036	75-2816066	501(C)(3)	5,000.	0.			GENERAL SUPPORT

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METHODIST CHILDREN'S HOME SOCIETY 26645 W. SIX MILE RD. REDFORD, MI 48240	38-1240951	501(C)(3)	7,062.	0.			GENERAL SUPPORT
MINNEAPOLIS COLLEGE OF ART & DESIGN - 2501 STEVENS AVENUE - MINNEAPOLIS, MN 55404	41-1607453	501(C)(3)	20,000.	0.			GENERAL SUPPORT
MINNEAPOLIS SOCIETY OF FINE ARTS AKA MINNEAPOLIS INSTITUTE OF ART - 2400 3RD AVE S - MINNEAPOLIS, MN 55404	41-0693915	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MISSION & WELFARE INTERNATIONAL P.O. BOX 1135 BATTLE GROUND, WA 98604	20-0239517	501(C)(3)	73,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
MOTE MARINE FOUNDATION 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-2226800	501(C)(3)	36,819.	0.			GENERAL SUPPORT
MOTE MARINE LABORATORY, INC. 1600 KEN THOMPSON PKWY SARASOTA, FL 34236	59-0756643	501(C)(3)	134,491.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, CAPITAL PURCHASES
MUSEUM OF FINE ARTS OF ST. PETERSBURG FLORIDA, INC. - 255 BEACH DRIVE N E - ST. PETERSBURG, FL 33701	59-0949278	501(C)(3)	18,442.	0.			GENERAL SUPPORT
MYOSITIS ASSOCIATION OF AMERICA, INC. - 1940 DUKE STREET, SUITE 200 - ALEXANDRIA, VA 22314	54-1660976	501(C)(3)	10,000.	0.			GENERAL SUPPORT
NATIONAL ASSOCIATION OF FREE & CHARITABLE CLINICS, INC. - 1800 DIAGONAL RD., STE 600 - ALEXANDRIA, VA 22314	56-2273242	501(C)(3)	5,000.	0.			GENERAL 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)	19,244.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY/NATIONAL - 900 S. BROADWAY, 2ND FLOOR - DENVER, CO 80209	13-5661935	501(C)(3)	18,409.	0.			GENERAL SUPPORT
NATIONAL PSORIASIS FOUNDATION 6600 SW 92ND AVE. SUITE 300 PORTLAND, OR 97223	93-0571472	501(C)(3)	8,613.	0.			GENERAL SUPPORT
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR. RESTON, VA 20190	53-0204616	501(C)(3)	6,250.	0.			GENERAL SUPPORT
NATURAL RESOURCES DEFENSE COUNCIL, INC. AKA NRDC - 40 WEST 20TH ST., 11TH FLOOR - NEW YORK, NY 10011	13-2654926	501(C)(3)	10,800.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
NATURE CONSERVANCY, INC. 4245 N. FAIRFAX DR., SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	25,890.	0.			GENERAL SUPPORT
NATURE'S ACADEMY, INC. 9800 4TH STREET N, SUITE 200 ST. PETERSBURG, FL 33702	26-1198913	501(C)(3)	5,955.	0.			PROGRAM SUPPORT
NETHOPE INC 10615 JUDICIAL DRIVE SUITE #402 FAIRFAX, VA 22030	20-1782011	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
NEURO CHALLENGE FOUNDATION INC 722 APEX RD, STE A SARASOTA, FL 34240	26-2311656	501(C)(3)	7,525.	0.			CAPITAL PURCHASE, GENERAL SUPPORT, PROGRAM SUPPORT

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NEW AVENUES FOR YOUTH, INC. 1220 SW COLUMBIA STREET PORTLAND, OR 97201	93-0910213	501(C)(3)	40,000.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
NEW COLLEGE FOUNDATION, INC. 5800 BAY SHORE ROAD SARASOTA, FL 34243-2109	59-0911744	501(C)(3)	37,880.	0.			PROGRAM SUPPORT, GENERAL SUPPORT, SCHOLARSHIP SUPPORT
NEW YORK UNIVERSITY 25 WEST 4TH ST., 4TH FLOOR NEW YORK, NY 10012	13-5562308	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
NORA SANDIGO CHILDREN FOUNDATION, INC. - 11971 SW 118TH ST. - MIAMI, FL 33186	47-3603817	501(C)(3)	7,500.	0.			PROGRAM SUPPORT
NORMAN ROCKWELL MUSEUM P.O. BOX 308 STOCKBRIDGE, MA 01262	04-2450813	501(C)(3)	5,000.	0.			GENERAL SUPPORT
NORTH FLORIDA COMMUNITY COLLEGE FOUNDATION, INC. - 325 NW TURNER DAVIS DR. - MADISON, FL 32340	59-6179948	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
NORTH FLORIDA SCHOOL OF SPECIAL EDUCATION - 223 MILL CREEK RD. - JACKSONVILLE, FL 32211	59-3126545	501(C)(3)	5,000.	0.			SCHOLARSHIP SUPPORT
NORTH PORT HIGH SCHOOL 6400 WEST PRICE BLVD. NORTH PORT, FL 34286	59-6000847	501(C)(3)	5,679.	0.			PROGRAM SUPPORT
NORTHERN NEW YORK COMMUNITY FOUNDATION, INC. - 131 WASHINGTON STREET - WATERTOWN, NY 13601	15-6020989	501(C)(3)	10,000.	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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLIVER BUCKNELL MELANOMA FOUNDATION - 104 TALL TREES CT - SARASOTA, FL 34232	81-2493799	501(C)(3)	7,150.	0.			GENERAL SUPPORT
ONEBLOOD FOUNDATION, INC. 10100 DR. MLK JR. STREET N ST. PETERSBURG, FL 33716-3806	59-2216675	501(C)(3)	43,307.	0.			GENERAL SUPPORT
OPERATION FINALLY HOME 1659 STATE HIGHWAY 46 WEST, SUITE 1 NEW BRAUNFELS, TX 78132	20-8964096	501(C)(3)	5,000.	0.			GENERAL SUPPORT
OTSEGO COUNTY FOOD PANTRY P.O. BOX 1976 GAYLORD, MI 49734	38-3374066	501(C)(3)	5,000.	0.			GENERAL SUPPORT
OUT-OF-DOOR ACADEMY OF SARASOTA, INC. - 444 REID STREET - SARASOTA, FL 34242-1399	59-1731857	501(C)(3)	26,100.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PANHANDLE PIONEER SETTLEMENT, INC. P.O. BOX 215 BLOUNTSTOWN, FL 32424	59-3198852	501(C)(3)	40,000.	0.			EMERGENCY ASSISTANCE
PASCO-HERNANDO STATE COLLEGE FOUNDATION, INC. - 10230 RIDGE RD. - NEW PORT RICHEY, FL 34654	59-1731676	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
PENNSYLVANIA STATE UNIVERSITY 212 THE 103 BUILDING, 103 INNOVATION BLVD. - UNIVERSITY PARK, PA 16802-7001	24-6000376	501(C)(3)	17,210.	0.			GENERAL SUPPORT
PERLMAN MUSIC PROGRAM SUNCOAST, INC. - PO BOX 3407 - SARASOTA, FL 34230	26-2714384	501(C)(3)	32,630.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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PINES OF SARASOTA FOUNDATION, INC. 1501 N. ORANGE AVENUE SARASOTA, FL 34236	59-2988752	501(C)(3)	71,708.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES, GENERAL SUPPORT
PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA, INC. - 736 CENTRAL AVENUE - SARASOTA, FL 34236	59-1274328	501(C)(3)	69,601.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
POP WARNER LITTLE SCHOLARS INC. DBA PALMETTO YOUTH CENTER - P.O. BOX 608 - PALMETTO, FL 34220	59-1090377	501(C)(3)	5,139.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
PROJECT 180 SARASOTA, INC. PO BOX 25684 SARASOTA, FL 34277	26-3092460	501(C)(3)	5,550.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
PROTECT OUR DEFENDERS FOUNDATION 8000 WESTPARK DR., SUITE 410 MCLEAN, VA 22102	45-4044997	501(C)(3)	5,000.	0.			GENERAL SUPPORT
PTSD FOUNDATION OF AMERICA 9724 DERRINGTON ROAD HOUSTON, TX 77064	20-3864341	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
RACING DOG RESCUE PROJECT, INC. PO BOX 18153 SARASOTA, FL 34276	65-0748752	501(C)(3)	8,525.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
REMOTE AREA MEDICAL (RAM) PO BOX 1988 PALMETTO, FL 34220	58-1647546	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
RESILIENT RETREAT, INC. 1343 MAIN STREET SARASOTA, FL 34236	83-1677056	501(C)(3)	180,000.	0.			GENERAL SUPPORT

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RESOURCES UNITE 1900 JOHN F. KENNEDY ROAD DUBUQUE, IA 52002	36-4761269	501(C)(3)	5,000.	0.			GENERAL SUPPORT
RESURRECTION HOUSE, INC. PO BOX 398 SARASOTA, FL 34230-0398	65-0096171	501(C)(3)	5,973.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
RINGLING COLLEGE LIBRARY ASSOCIATION, INC. - P.O. BOX 4071 - SARASOTA, FL 34230-4071	51-0173628	501(C)(3)	37,435.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
RINGLING COLLEGE OF ART AND DESIGN 2700 N. TAMiami TRAIL SARASOTA, FL 34234	59-0637903	501(C)(3)	189,658.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
ROLLINS COLLEGE PO BOX 864168 ORLANDO, FL 32886-4168	59-0624440	501(C)(3)	5,100.	0.			GENERAL SUPPORT
RONALD MCDONALD HOUSE CHARITIES OF CENTRAL OHIO, INC. - 711 E. LIVINGSTON AVE. - COLUMBUS, OH 43205	31-0890152	501(C)(3)	5,000.	0.			GENERAL SUPPORT
ROSKAMP INSTITUTE, INC. 2040 WHITFIELD AVE. SARASOTA, FL 34243	27-1397124	501(C)(3)	20,117.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ROTARY CLUB OF SARASOTA SOUTHSIDE FOUNDATION, INC. - PO BOX 5718 - SARASOTA, FL 34277	45-2041318	501(C)(3)	11,000.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
SAFE HAVEN MINISTRIES, INC. 10364 TRIPLE CROWN AVENUE JACKSONVILLE, FL 32257	81-3312432	501(C)(3)	5,000.	0.			GENERAL SUPPORT

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SAFE PLACE AND RAPE CRISIS CENTER INC (SPARCC) - 2139 MAIN STREET - SARASOTA, FL 34237	59-1943399	501(C)(3)	15,862.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
SALVATION ARMY SARASOTA AREA COMMAND - PO BOX 2792 - SARASOTA, FL 34230	58-0660607	501(C)(3)	120,247.	0.			GENERAL SUPPORT, EMERGENCY ASSISTANCE, PROGRAM SUPPORT
SALVATION ARMY 16130 NORTHLAND DR. SOUTHFIELD, MI 48075	38-1370971	501(C)(3)	7,062.	0.			GENERAL SUPPORT
SAMARITAN'S PURSE INTERNATIONAL RELIEF - P.O. BOX 3000 - BOONE, NC 28607	58-1437002	501(C)(3)	7,062.	0.			GENERAL SUPPORT
SANTA FE COLLEGE FOUNDATION 3000 NW 83 ST. GAINESVILLE, FL 32606	51-0240884	501(C)(3)	40,000.	0.			PROGRAM SUPPORT
SARA DESOTO CHAPTER-DAUGHTERS OF THE AMERICAN - 1232 12TH STREET - SARASOTA, FL 34236	59-6153056	501(C)(3)	12,450.	0.			GENERAL SUPPORT
SARASOTA BALLET OF FLORIDA, INC. 5555 N TAMiami TRAIL SARASOTA, FL 34243-2141	65-0135900	501(C)(3)	9,800.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA CONCERT ASSOCIATION, INC. PO BOX 211 SARASOTA, FL 34230-0211	59-2850861	501(C)(3)	64,050.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA COUNTY BOARD OF COUNTY COMMISSIONERS - 1660 RINGLING BLVD., 5TH FLOOR - SARASOTA, FL 34236	59-6000848	501(C)(3)	23,461.	0.			PROGRAM SUPPORT

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SARASOTA COUNTY LIBRARIES 1660 RINGLING BLVD SARASOTA, FL 34236	59-6000848	501(C)(3)	8,888.	0.			GENERAL SUPPORT
SARASOTA CUBAN BALLET SCHOOL INC 501 N BENEVA RD STE 700 SARASOTA, FL 34232	45-5074780	501(C)(3)	5,050.	0.			PROGRAM SUPPORT
SARASOTA FAMILY YMCA, INC. 1500 INDEPENDENCE BOULEVARD, STE. 21 SARASOTA, FL 34234	59-1618413	501(C)(3)	25,248.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA FILM FESTIVAL INC 332 COCOANUT AVE SARASOTA, FL 34236-4920	65-0826229	501(C)(3)	9,954.	0.			CAPITAL PURCHASES, GENERAL SUPPORT
SARASOTA HOUSING FUNDING CORPORATION - 269 S. OSPREY AVENUE SUITE 100 - SARASOTA, FL 34236	80-0418699	501(C)(3)	40,186.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES
SARASOTA MANATEE ASSOCIATION FOR RIDING THERAPY - 4640 COUNTY ROAD 675 E - BRADENTON, FL 34211	65-0043354	501(C)(3)	5,941.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SARASOTA MEDICAL PREGNANCY CENTER, INC. - 1762 HAWTHORNE STREET, #5 - SARASOTA, FL 34239	05-0533818	501(C)(3)	7,600.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MEMORIAL HEALTHCARE FOUNDATION, INC. - 1515 S. OSPREY AVENUE, SUITE B4 - SARASOTA, FL 34239-2919	51-0188568	501(C)(3)	366,308.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SARASOTA MILITARY ACADEMY 801 N. ORANGE AVENUE SARASOTA, FL 34236	65-1149763	501(C)(3)	113,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT

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SARASOTA OPERA ASSOCIATION, INC. 61 N. PINEAPPLE AVE SARASOTA, FL 34236	23-7089047	501(C)(3)	123,316.	0.			PROGRAM SUPPORT, GENERAL SUPPORT, SCHOLARSHIP SUPPORT
SARASOTA ORCHESTRA 709 N. TAMIAMI TRAIL SARASOTA, FL 34236	59-2603081	501(C)(3)	296,703.	0.			PROGRAM SUPPORT, GENERAL SUPPORT, CAPITAL PURCHASES, SCHOLARSHIP SUPPORT
SARASOTA SCHOOL OF ARTS AND SCIENCES, INC. - 717 CENTRAL AVE - SARASOTA, FL 34236	65-0745152	501(C)(3)	7,224.	0.			PROGRAM SUPPORT
SARASOTA YOUTH SAILING PROGRAM INC P.O. BOX 2706 SARASOTA, FL 34230-2706	59-2008905	501(C)(3)	5,000.	0.			GENERAL SUPPORT
SCHOOL BOARD OF SARASOTA COUNTY 1960 LANDINGS BLVD. SARASOTA, FL 34231-3331	59-6000847	501(C)(3)	363,689.	0.			PROGRAM SUPPORT, EMERGENCY ASSISTANCE, CAPITAL PURCHASES, GENERAL SUPPORT
SELAH FREEDOM, INC. 1800 2ND ST, SUITE 880 SARASOTA, FL 34236	45-5189165	501(C)(3)	34,100.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES, GENERAL SUPPORT
SEMINOLE BOOSTERS, INC. P.O. BOX 1353 TALLAHASSEE, FL 32302	59-1561180	501(C)(3)	11,950.	0.			PROGRAM SUPPORT
SENIOR FRIENDSHIP CENTERS FOUNDATION, INC. - 1888 BROTHER GEENEN WAY - SARASOTA, FL 34236	65-0364819	501(C)(3)	8,767.	0.			GENERAL SUPPORT
SENIOR FRIENDSHIP CENTERS, INC. 1888 BROTHER GEENEN WAY SARASOTA, FL 34236	59-1522614	501(C)(3)	105,159.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT, EMERGENCY ASSISTANCE

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SERVE INDIA MINISTRIES P.O. BOX 522 CHARLESTON, IL 61920	86-1174433	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
SHELTER AVAILABLE FOR FAMILY EMERGENCY SAFE INC OF TRANSYLVANIA CTY - PO BOX 2013 - BREVARD, NC 28712	58-1640904	501(C)(3)	5,000.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
SHRINERS HOSPITALS FOR CHILDREN-TAMPA - 12502 PINE DRIVE - TAMPA, FL 33612-9499	04-2121377	501(C)(3)	23,838.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SIESTA KEY KIWANIS CLUB FOUNDATION INC - PO BOX 5485 - SARASOTA, FL 34277	54-2067657	501(C)(3)	6,500.	0.			GENERAL SUPPORT
SIXTEEN HANDS HORSE SANCTUARY 712 ROY MOORE RD. ONA, FL 33865	26-1224137	501(C)(3)	7,463.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SOAR LEARNING CENTER, INC. P.O. BOX 51917 SARASOTA, FL 34232	81-4840233	501(C)(3)	513,500.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
SOKA GAKKAI INTERNATIONAL - USA 606 WILSHIRE BLVD. SANTA MONICA, CA 90401	95-2265667	501(C)(3)	6,000.	0.			GENERAL SUPPORT
SOUTH COUNTY FAMILY YMCA, INC. D/B/A SKY FAMILY YMCA - 701 CENTER ROAD - VENICE, FL 34285	59-1629660	501(C)(3)	65,273.	0.			PROGRAM SUPPORT, CAPITAL PURCHASES, GENERAL SUPPORT
SOUTH FLORIDA STATE COLLEGE FOUNDATION, INC. - 13 E. MAIN ST. - AVON PARK, FL 33825	59-3050497	501(C)(3)	40,000.	0.			PROGRAM SUPPORT

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SOUTHEASTERN COUNCIL OF FOUNDATIONS - 100 PEACHTREE ST NW STE 2080 - ATLANTA, GA 30303	56-0995114	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
SOUTHEASTERN GUIDE DOGS, INC. 4210 77TH STREET E. PALMETTO, FL 34221	59-2252352	501(C)(3)	38,875.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
ST. ANTHONY'S HOSPITAL FOUNDATION 1200 7TH AVENUE NORTH ST. PETERSBURG, FL 33705	59-2043026	501(C)(3)	43,307.	0.			GENERAL SUPPORT
ST. AUGUSTINE'S EPISCOPAL CHURCH 1140 WILMETTE AVENUE WILMETTE, IL 60091	36-2334635	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ST. BONIFACE CHURCH 5615 MIDNIGHT PASS ROAD SARASOTA, FL 34242	59-0900993	501(C)(3)	5,500.	0.			GENERAL SUPPORT
ST. FRANCIS OF ASSISI CATHOLIC CHURCH - 5265 PLACIDA RD. - GROVE CITY, FL 34224	59-1933467	501(C)(3)	5,480.	0.			GENERAL SUPPORT
ST. JOHN'S UNITED METHODIST CHURCH 6611 PROCTOR ROAD SARASOTA, FL 34241	59-2466867	501(C)(3)	5,100.	0.			GENERAL SUPPORT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105-1905	62-0646012	501(C)(3)	20,670.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
ST. PETERSBURG COLLEGE FOUNDATION FBO THE PALLADIUM - P.O. BOX 13489 - ST. PETERSBURG, FL 33733	59-1954362	501(C)(3)	12,992.	0.			GENERAL SUPPORT

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ST. PETERSBURG FREE CLINIC, INC. 863 3RD AVE N ST. PETERSBURG, FL 33701	23-7208280	501(C)(3)	50,004.	0.			GENERAL SUPPORT
ST. ROBERT BELLARMINE CHURCH 310 N. CHERRY ST. FLUSHING, MI 48433	38-1443389	501(C)(3)	7,306.	0.			GENERAL SUPPORT
ST. THOMAS MORE CATHOLIC CHURCH 2506 GULF GATE DRIVE SARASOTA, FL 34231-5731	59-1992896	501(C)(3)	16,000.	0.			CAPITAL PURCHASES, GENERAL SUPPORT, PROGRAM SUPPORT
STARFISH KENYA, INC. 760 CLEAR LAKE CITY BLVD. WEBSTER, TX 77598	83-0363699	501(C)(3)	10,000.	0.			GENERAL SUPPORT
STATE COLLEGE OF FLORIDA FOUNDATION - P.O. BOX 1849 - BRADENTON, FL 34206	59-1843274	501(C)(3)	17,248.	0.			PROGRAM SUPPORT, GENERAL SUPPORT, SCHOLARSHIP SUPPORT
STEP UP SUNCOAST 6428 PARKLAND DR. SARASOTA, FL 34243	59-6208766	501(C)(3)	358,870.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST HUMANE SOCIETY, INC. 6781 SAN CASA DRIVE ENGLEWOOD, FL 34224	23-7174193	501(C)(3)	7,399.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
SUNCOAST TECHNICAL COLLEGE 4748 S. BENEVA ROAD SARASOTA, FL 34233	59-6000847	501(C)(3)	8,974.	0.			PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
SUNCOAST YOUTH FOUNDATION INC (DBA EMPOWERMENT GROUP) - 8000 HAWKINS RD - SARASOTA, FL 34231	81-2956324	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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TAKE STOCK IN CHILDREN OF SARASOTA COUNTY, INC. - PO BOX 48186 - SARASOTA, FL 34230	33-1012774	501(C)(3)	99,952.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
TAMPA BAY PERFORMING ARTS CENTER 1010 N. W.C. MACINNES PLACE TAMPA, FL 33602	59-2037085	501(C)(3)	6,000.	0.			GENERAL SUPPORT
TBS ENDOWMENT FUND INC 1050 SOUTH TUTTLE AVE. SARASOTA, FL 34237	26-1421638	501(C)(3)	15,191.	0.			GENERAL SUPPORT
TEAM TONY CANCER FOUNDATION 3562 S OSPREY AVE., STE. C SARASOTA, FL 34239	27-3755241	501(C)(3)	6,850.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEEN COURT OF SARASOTA, INC. P.O. BOX 48927 SARASOTA, FL 34230	65-0108304	501(C)(3)	29,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE BETH AMI 14330 TRAVILAH RD ROCKVILLE, MD 20850	52-1198064	501(C)(3)	5,480.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE BETH ISRAEL OF LONGBOAT KEY FLORIDA, INC. - 567 BAY ISLES ROAD - LONGBOAT KEY, FL 34228	59-1970401	501(C)(3)	10,761.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
TEMPLE BETH SHOLOM & JEWISH CENTER, INC. - 1050 S. TUTTLE AVENUE - SARASOTA, FL 34237	23-7156328	501(C)(3)	10,500.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TEMPLE EMANU-EL 151 S. MCINTOSH ROAD SARASOTA, FL 34232	59-1145961	501(C)(3)	5,375.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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THE AMERICAN FRIENDS OF THE BRITISH MUSEUM, INC. - 275 MADISON AVE., 6TH FLOOR - NEW YORK, NY 10016	52-1640217	501(C)(3)	13,400.	0.			GENERAL SUPPORT
THE BAY PARK CONSERVANCY INC P.O. BOX 3588 SARASOTA, FL 34230-3588	81-4653473	501(C)(3)	127,455.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
THE CARTER CENTER, INC. 453 FREEDOM PARKWAY ATLANTA, GA 30307	58-1454716	501(C)(3)	5,033.	0.			GENERAL SUPPORT
THE CIRCUS ARTS CONSERVATORY, INC. 2075 BAHIA VISTA ST. SARASOTA, FL 34239	65-0786312	501(C)(3)	54,825.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT, ENDOWMENT SUPPORT
THE DALI MUSEUM, INC. 1 DALI BLVD. ST. PETERSBURG, FL 33701	59-2015192	501(C)(3)	12,992.	0.			GENERAL SUPPORT
THE FLORIDA CENTER FOR EARLY CHILDHOOD - 4620 17TH STREET - SARASOTA, FL 34235	59-1947024	501(C)(3)	142,600.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
THE HOMELESS FAMILIES FOUNDATION 33 NORTH GRUBB STREET COLUMBUS, OH 43215	31-1179492	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
THE JAZZ CLUB OF SARASOTA, INC. 330 PINEAPPLE AVENUE, #111 SARASOTA, FL 34236	59-1997114	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE JEWISH FEDERATION OF SARASOTA-MANATEE - 580 S. MCINTOSH ROAD - SARASOTA, FL 34232-1957	59-1227747	501(C)(3)	70,348.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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THE LITERACY COUNCIL OF SARASOTA, INC. - 1750 17TH ST., BLDG K-3 - SARASOTA, FL 34234-8666	59-1911680	501(C)(3)	11,119.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
THE MANATEE PLAYERS, INC. DBA MANATEE PERFORMING ARTS CENTER - 502 THIRD AVENUE WEST - BRADENTON, FL 34205	59-1196043	501(C)(3)	5,678.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
THE MARK WANDALL FOUNDATION, INC. P.O. BOX 21333 BRADENTON, FL 34204	20-1933021	501(C)(3)	5,000.	0.			GENERAL SUPPORT
THE NEW 42ND STREET, INC. 229 WEST 42ND STREET, 10TH FLOOR NEW YORK, NY 10036	13-3584032	501(C)(3)	10,000.	0.			GENERAL SUPPORT
THE PARENT PROJECT FOR MUSCULAR DYSTROPHY RESEARCH, INC. - 401 HACKENSACK AVENUE, 9TH FLOOR - HACKENSACK, NJ 07601	31-1405490	501(C)(3)	13,000.	0.			GENERAL SUPPORT
THE PAYTON WRIGHT FOUNDATION, INC. P.O. BOX 110067 BRADENTON, FL 34211	33-1204054	501(C)(3)	15,900.	0.			GENERAL SUPPORT
THE PLAYERS, INC. AKA THE PLAYERS CENTRE FOR PERFORMING ARTS - 838 N. TAMiami TRAIL - SARASOTA, FL 34236	59-0711182	501(C)(3)	110,706.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT, GENERAL SUPPORT
THE SALVATION ARMY P. O. BOX 69 VENICE, FL 34284-0069	58-0660607	501(C)(3)	82,828.	0.			GENERAL SUPPORT
THOMAS JEFFERSON UNIVERSITY - MEDICAL COLLEGE - 1020 WALNUT ST., ROOM 539 - PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	9,152.	0.			GENERAL 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 Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TIBA FOUNDATION 344 20TH ST #D9 OAKLAND, CA 94612	20-1102853	501(C)(3)	5,000.	0.			GENERAL SUPPORT
TICKETS FOR KIDS FOUNDATION 700 BLAW AVE., STE 105 PITTSBURGH, PA 15238	02-0559825	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
TIDEWELL HOSPICE, INC. 5955 RAND BOULEVARD SARASOTA, FL 34238	59-1911861	501(C)(3)	307,675.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
TRANSYLVANIA COUNTY GOVERNMENT 101 S. BROAD ST. BREVARD, NC 28712	56-6000343	501(C)(3)	8,300.	0.			PROGRAM SUPPORT
TRUSTEES OF THE MASONIC HALL AND ASYLUM FUND - 71 WEST 23RD ST., STE 1003 - NEW YORK, NY 10010	13-5563012	501(C)(3)	6,368.	0.			GENERAL SUPPORT
TUTTLE ELEMENTARY SCHOOL 2863 8TH STREET SARASOTA, FL 34237	59-6000847	501(C)(3)	10,995.	0.			PROGRAM SUPPORT
UNIDOSNOW, INC. 1750 17TH ST., BLDG C 2 SARASOTA, FL 34234	27-4102169	501(C)(3)	95,875.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNITARIAN UNIVERSALIST CHURCH OF SARASOTA - 3975 FRUITVILLE RD. - SARASOTA, FL 34232	59-0954128	501(C)(3)	9,000.	0.			GENERAL SUPPORT
UNITED COMMUNITY CENTERS, INC. PO BOX 1683 BRADENTON, FL 34206	65-0282384	501(C)(3)	11,554.	0.			GENERAL SUPPORT, PROGRAM SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED JEWISH APPEAL FEDERATION OF JEWISH PHILANTHROPIES OF NY, INC. - 130 EAST 59TH STREET - NEW YORK, NY 10022	51-0172429	501(C)(3)	161,225.	0.			GENERAL SUPPORT
UNITED WAY OF CHARLOTTE COUNTY 17831 MURDOCK CIRCLE, STE A PORT CHARLOTTE, FL 33948	59-1149995	501(C)(3)	293,650.	0.			EMERGENCY ASSISTANCE, GENERAL SUPPORT, PROGRAM SUPPORT
UNITED WAY SUNCOAST 1800 2ND ST STE 102 SARASOTA, FL 34236	59-3725701	501(C)(3)	29,731.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF CALIFORNIA SAN FRANCISCO FOUNDATION - PO BOX 45339 - SAN FRANCISCO, CA 94145-0339	94-2829914	501(C)(3)	5,000.	0.			SCHOLARSHIP SUPPORT
UNIVERSITY OF DUBUQUE 2000 UNIVERSITY AVE DUBUQUE, IA 52001	42-0680323	501(C)(3)	6,200.	0.			GENERAL SUPPORT, SCHOLARSHIP SUPPORT
UNIVERSITY OF FLORIDA FOUNDATION, INC. - PO BOX 14425 - GAINESVILLE, FL 32604	59-0974739	501(C)(3)	11,000.	0.			GENERAL SUPPORT
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE, SUITE 500 MINNEAPOLIS, MN 55455	41-6042488	501(C)(3)	14,084.	0.			GENERAL SUPPORT
UNIVERSITY OF SOUTH FLORIDA FOUNDATION, INC. - 4202 E. FOWLER AVE., TVB 100 - TAMPA, FL 33620-6870	59-0879015	501(C)(3)	10,640.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
UNIVERSITY OF SOUTHERN CALIFORNIA - USC INDEPENDENT HEALTH PROFES - ADM 16, MC 4017 - LOS ANGELES, CA 90089-4017	95-1642394	501(C)(3)	13,784.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF THE CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769-1372	61-0470593	501(C)(3)	14,726.	0.			GENERAL SUPPORT
UNIVERSITY OF WISCONSIN FOUNDATION U.S. BANK LOCKBOX, BOX 78807 MILWAUKEE, WI 53278-0807	39-0743975	501(C)(3)	14,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT
UPPER DES MOINES OPPORTUNITY, INC. 1575 18TH STREET SPIRIT LAKE, IA 51360	42-0923424	501(C)(3)	5,000.	0.			GENERAL SUPPORT
URBANA UNIVERSITY 579 COLLEGE WAY URBANA, OH 43078	31-0707369	501(C)(3)	5,000.	0.			GENERAL SUPPORT
URBANITE THEATRE INC. 1487 2ND STREET SARASOTA, FL 34236	46-5554467	501(C)(3)	9,490.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
US HOLOCAUST MEMORIAL COUNCIL 100 RAOUL WALLENBERG PL., SW WASHINGTON, DC 20024	52-1309391	501(C)(3)	101,250.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VAN WEZEL FOUNDATION, INC. 777 NORTH TAMiami TRAIL 3RD FLOOR SARASOTA, FL 34236	59-2807055	501(C)(3)	150,835.	0.			GENERAL SUPPORT, CAPITAL PURCHASES, PROGRAM SUPPORT
VANDERBILT UNIVERSITY PMB 407727, 2301 VANDERBILT PLACE NASHVILLE, TN 37240	62-0476822	501(C)(3)	8,058.	0.			GENERAL SUPPORT
VENICE AREA BEAUTIFICATION, INC. 257 TAMiami TRAIL N. VENICE, FL 34285-1916	65-0223440	501(C)(3)	25,000.	0.			CAPITAL PURCHASES

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INC.

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VENICE ART CENTER, INC. 390 NOKOMIS AVENUE S. VENICE, FL 34285	59-6178294	501(C)(3)	11,064.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT
VENICE HERITAGE, INC. P O BOX 1190 VENICE, FL 34284	65-0537496	501(C)(3)	9,000.	0.			CAPITAL PURCHASES
VENICE MIDDLE SCHOOL 1900 CENTER ROAD VENICE, FL 34292	59-6000847	501(C)(3)	5,573.	0.			PROGRAM SUPPORT
VENICE SYMPHONY, INC. P.O. BOX 1561 VENICE, FL 34284-1561	59-1710244	501(C)(3)	31,025.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
VISIBLE MEN ACADEMY 921 63RD AVENUE EAST BRADENTON, FL 34203	46-0930264	501(C)(3)	62,900.	0.			PROGRAM SUPPORT, GENERAL SUPPORT
WATER WELL TRUST, INC. P.O. BOX 2399 DAVIDSON, NC 28036	27-1659354	501(C)(3)	5,000.	0.			GENERAL SUPPORT
WE CARE MANATEE, INC. 300 RIVERSIDE DRIVE EAST, STE 4500 BRADENTON, FL 34208	59-3606103	501(C)(3)	15,478.	0.			PROGRAM SUPPORT
WEDU-FLORIDA WEST COAST PUBLIC BROADCASTING INC - 1300 N BOULEVARD - TAMPA, FL 33607-5699	59-0840626	501(C)(3)	12,363.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WEST VIRGINIA HEALTH RIGHT, INC. 1520 WASHINGTON ST., E CHARLESTON, WV 25301	31-1066881	501(C)(3)	30,000.	0.			GENERAL SUPPORT, ENDOWMENT SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTCOAST BLACK THEATRE TROUPE 1012 N ORANGE AVE SARASOTA, FL 34236	65-1040662	501(C)(3)	89,185.	0.			CAPITAL PURCHASES, PROGRAM SUPPORT, GENERAL SUPPORT, SCHOLARSHIP SUPPORT
WILKINSON ELEMENTARY SCHOOL 3400 WILKINSON ROAD SARASOTA, FL 34231	59-6000847	501(C)(3)	8,759.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WILLIAM CAREY UNIVERSITY 710 WILLIAM CAREY PKWY HATTIESBURG, MS 39401	64-0329300	501(C)(3)	10,000.	0.			SCHOLARSHIP SUPPORT
WILLIAM MONROE ROWLETT ACADEMY FOR ARTS AND COMMUNICATIONS, INC. - 400 30TH AVE WEST - BRADENTON, FL 34205	46-5521687	501(C)(3)	10,100.	0.			PROGRAM SUPPORT
WILLIAMS FAMILY YMCA 10415 SAN JOSE BLVD JACKSONVILLE, FL 32257	59-0638514	501(C)(3)	8,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WOMEN DONORS NETWORK 565 COMMERCIAL STREET, SUITE 300 SAN FRANCISCO, CA 94111	05-0542397	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
WOMENS HEALTH CENTER OF WEST VIRGINIA, INC. - PO BOX 20580 - CHARLESTON, WV 25362	55-0559874	501(C)(3)	7,500.	0.			GENERAL SUPPORT
WOMEN'S RESOURCE CENTER OF MANATEE, INC. - 1926 MANATEE AVENUE W - BRADENTON, FL 34205-5835	59-3034653	501(C)(3)	17,582.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
WOMEN'S RESOURCE CENTER OF SARASOTA, INC. - 340 S. TUTTLE AVENUE - SARASOTA, FL 34237	59-1935145	501(C)(3)	46,420.	0.			GENERAL SUPPORT, PROGRAM SUPPORT, SCHOLARSHIP SUPPORT

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOUNDED WARRIOR PROJECT, INC. 4899 BELFORT RD., SUITE 300 JACKSONVILLE, FL 32256	20-2370934	501(C)(3)	10,200.	0.			GENERAL SUPPORT, PROGRAM SUPPORT
YOUNG WOMENS CHRISTIAN ASSOCIATION OF CHARLESTON WEST VIRGINIA - 1426 KANAWHA BLVD, E - CHARLESTON, WV 25301	55-0357060	501(C)(3)	30,000.	0.			GENERAL SUPPORT
MANATEE COMMUNITY FOUNDATION, INC. 2820 MANATEE AVENUE WEST BRADENTON, FL 34205	65-0833500	501(C)(3)	12,950.	0.			ENDOWMENT SUPPORT, GENERAL SUPPORT
ACADIA UNIVERSITY FOUNDATION 15 UNIVERSITY AVE. WOLFVILLE, NS, CANADA	98-0537324	501(C)(3)	8,058.	0.			GENERAL 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	524	1,718,393.	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)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

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.

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 Questions Regarding Compensation

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

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

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

THE COMMUNITY FOUNDATION OF SARASOTA CO.
INC.

59-1956886

Schedule J (Form 990) 2018

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 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) LAURA SPENCER CFO	(i)	163,828.	23,837.	0.	17,176.	8,645.	213,486.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARLO DUFFY-TURNER SVP, DONOR ENGAGEMENT	(i)	127,550.	20,440.	0.	14,683.	17,067.	179,740.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROXANNE JERDE PRESIDENT/CEO	(i)	246,493.	47,024.	0.	24,415.	8,605.	326,537.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

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	6	10,643,461.	STOCK EXCHANGE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests	X	1	490,993.	SALE PRICE
12 Securities - Miscellaneous	X	1	1,878,818.	SALE PRICE
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 IV, Donee Acknowledgement **29**

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

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

Schedule M (Form 990) 2018

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 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2018

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.

IN ADDITION, NONPROFIT SERVICES INCLUDE VOLUNTEERS THAT PROVIDE

CONSULTING SERVICES WITH NONPROFIT ORGANIZATIONS IN THE COMMUNITY.

COMMUNITY VOLUNTEERS ALSO SERVE ON BOARD APPOINTED TASK FORCES AND

COMMITTEES INCLUDING OUR SCHOLARSHIP COMMITTEE.

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

THE UNEXPECTED OBSTACLES THAT NONPROFITS EXPERIENCE DO NOT HINDER THE

IMPORTANT WORK THEY DO FOR THE COMMUNITY.

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

WISH TO FURTHER THEIR EDUCATION AND INCREASE FUTURE POTENTIAL FOR

SUCCESS SHOULD HAVE AN EQUAL CHANCE TO TAKE ADVANTAGE OF THE

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

SARASOTA COUNTY AWARDS SCHOLARSHIPS TO A VARIETY OF INDIVIDUALS WHO ARE

PURSUING FURTHER EDUCATION.

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

THE FUNDS OF DONORS WHO ENSURED SUPPORT OF VARIOUS ORGANIZATIONS AND

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

COALESCED TO SUPPORT AN ARRAY OF KEY INITIATIVES SPEARHEADED BY THE

COMMUNITY FOUNDATION. WE HAVE DEDICATED OURSELVES TO HELPING THOSE IN

NEED IN OUR COMMUNITIES BY PROVIDING TARGETED FINANCIAL ASSISTANCE

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

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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INDIVIDUALS ON THE VERGE OF HOMELESSNESS THROUGH THE SEASON OF SHARING FUND, AS WELL AS SUPPORTING OUR REGION'S YOUTH THROUGH OUR STUDENT EMERGENCY FUND OPERATED IN PARTNERSHIP WITH SARASOTA COUNTY SCHOOLS. ADDITIONALLY, OUR EXTENDED WORK IN EDUCATION LEVERAGES NATIONAL RESEARCH AND INITIATIVES SUCH AS THE CAMPAIGN FOR GRADE-LEVEL READING AND THE REGIONAL COLLABORATIVE PARTNERSHIP OF EDEXPLORESRQ. INSPIRED BY ASCEND AT THE ASPEN INSTITUTE, WE HAVE FOCUSED THESE EFFORTS 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 VERSION OF GUIDESTAR'S DONOR EDGE PLATFORM. MORE THAN 630 NONPROFITS HAVE REVIEWED AND PUBLISHED 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 \$40 MILLION IN UNRESTRICTED FUNDING TO SUPPORT THEIR MISSIONS THROUGH SIX CHALLENGES TO BENEFIT MORE THAN 630 NONPROFITS LISTED IN THE GIVING PARTNER.

Name of the organization THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number 59-1956886
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NONPROFIT WORKSHOPS: ON AN AVERAGE OF ONCE PER MONTH, THE COMMUNITY FOUNDATION PRESENTS FREE WORKSHOPS TO NONPROFITS ON A VARIETY OF TOPICS THAT WILL IMPROVE THEIR KNOWLEDGE, EFFICIENCY AND ABILITY TO ACCOMPLISH THEIR MISSION. NONPROFIT LEADERS CONTINUE TO RATE THESE WORKSHOPS AS VERY EFFECTIVE.

CONSULTING SERVICES: THE COMMUNITY FOUNDATION HAS ASSEMBLED VOLUNTEER CONSULTANTS WHO SUPPORT NONPROFITS IN A VARIETY OF WAYS: SWOT ANALYSIS, STRATEGIC PLANNING, COMMUNICATION AND MARKETING STRATEGY AND COACHING ARE JUST A FEW EXAMPLES OF THE PROJECTS THIS GROUP HAS TAKEN ON OVER THE PAST YEAR.

BUILDING: THE FOUNDATION OFFERS ITS MEETING AND CONFERENCE ROOMS FREE OF CHARGE TO LOCAL NONPROFIT ORGANIZATIONS. EACH YEAR WE SEE MORE THAN 18,000 GUESTS UTILIZE OUR FACILITIES.

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 AND CORPORATE COUNSEL AND AGAIN DURING THE AUDIT PROCESS.

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

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

FORM 990, PART IX, LINE 11G, OTHER FEES:

ADMINISTRATIVE FEES:

PROGRAM SERVICE EXPENSES	1,133,997.
MANAGEMENT AND GENERAL EXPENSES	1,002,957.
FUNDRAISING EXPENSES	960,416.
TOTAL EXPENSES	3,097,370.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,097,370.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	1,039,696.
DISTRIBUTIONS TO ANNUITANTS	-668,675.
OPERATING EXPENSES ALLOCATED TO TRUST	-147,372.
CURRENT YEAR AGENCY ACTIVITY	-688,268.
NET INVESTMENT INCOME ON K-1'S RECEIVED	-792,946.
AGENCY ADJUSTMENT	-1,704.
ROUNDING	4.
TOTAL TO FORM 990, PART XI, LINE 9	-1,259,265.

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

2018

Open to Public
Inspection

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

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFSC ASSET COMPANY, LLC - 02-0630928 2635 FRUITVILLE ROAD SARASOTA, FL 34237	ASSET HOLDING COMPANY	FLORIDA	84,198.	2,326,642.	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) 2018

THE COMMUNITY FOUNDATION OF SARASOTA CO.

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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)			

Form **990-W**
(Worksheet)

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

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

2019

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990W for instructions and the latest information.
▶ Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1. See instructions for tax computation	2	
3	Alternative minimum tax for trusts. See instructions	3	
4	Total. Add lines 2 and 3	4	
5	Estimated tax credits. See instructions	5	
6	Subtract line 5 from line 4	6	
7	Other taxes. See instructions	7	
8	Total. Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels. See instructions	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	
b	Enter the tax shown on the 2018 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	
c	2019 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	2,500.

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions	11	10/15/19	12/16/19	03/16/20	06/15/20
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	625.	625.	625.	625.
13	2018 Overpayment. See instructions	13	625.	625.	625.	625.
14	Payment due (Subtract line 13 from line 12)	14				

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2019)

ESTIMATED TAX	2,500.
OVERPAYMENT APPLIED	2,500.
AMOUNT DUE	0.

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

June 30, 2019

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	Overpayment of \$12,569 with \$2,500 applied to the estimated tax payments and the balance of \$10,069 refunded.
Make check payable to	No amount is due.
Mail tax return and check (if applicable) to	Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027
Return must be mailed on or before	May 15, 2020
Special Instructions	The return should be signed and dated.

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

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

▶ 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

<p>A <input type="checkbox"/> Check box if address changed</p> <p>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)</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 2635 FRUITVILLE ROAD</p> <p>City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL 34237</p>	<p>D Employer identification number (Employees' trust, see instructions.) 59-1956886</p> <p>E Unrelated business activity code (See instructions.) 523000</p>
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C Book value of all assets at end of year **351,898,125.**

F Group exemption number (See instructions.) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. ▶ **2** Describe the only (or first) unrelated trade or business here ▶ **INVESTMENTS IN PARTNERSHIPS**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **LAURA SPENCER** Telephone number ▶ **(941) 955-3000**

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 ▶	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	0.	

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

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	0.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	0.

Part III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	11,051.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	11,051.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	10,051.

Part IV Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	2,111.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	2,111.

Part V Tax and Payments			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	2,111.
47	Other taxes. 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 schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	2,111.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	14,680.
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	Total payments. Add lines 50a through 50g	51	14,680.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	12,569.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax 2,500. Refunded	55	10,069.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
56	At any time during the 2018 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		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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: _____ Date: _____ Title: **CHIEF FINANCIAL OFFICER**

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**

P.O. BOX 49348

Firm's address: **SARASOTA, FL 34230-6348** Phone no. **941-365-4617**

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

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

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

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)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ► 0.
 (b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... ► 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	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 schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
Total dividends-received deductions included in column 8				0.

Schedule F - 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)				
Totals			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). 0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). 0.

Schedule G - 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 schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A). 0.		Enter here and on page 1, Part I, line 9, column (B). 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.			Enter here and on page 1, Part II, line 26. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

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

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

ENTITY 1

OMB No. 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

▶ 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

Department of the Treasury
Internal Revenue Service (99)

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

Unrelated business activity code (see instructions) ▶ **523000**

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 ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D)		4a 18,735.		18,735.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 1		5 -17,207.		-17,207.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13 1,528.		1,528.

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

14 Compensation of officers, directors, and trustees (Schedule K)		14		
15 Salaries and wages		15		
16 Repairs and maintenance		16		
17 Bad debts		17		
18 Interest (attach schedule) (see instructions)		18		
19 Taxes and licenses		19		
20 Charitable contributions (See instructions for limitation rules)		20		
21 Depreciation (attach Form 4562)		21		
22 Less depreciation claimed on Schedule A and elsewhere on return		22a		22b
23 Depletion		23		
24 Contributions to deferred compensation plans		24		
25 Employee benefit programs		25		
26 Excess exempt expenses (Schedule I)		26		
27 Excess readership costs (Schedule J)		27		
28 Other deductions (attach schedule)		28		
29 Total deductions. Add lines 14 through 28		29	81,811.	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30		-80,283.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31		
32 Unrelated business taxable income. Subtract line 31 from line 30		32		-80,283.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	1
DESCRIPTION		NET INCOME OR (LOSS)	
MAKENA CAPITAL SPLITTER X, L.P. - ORDINARY BUSINESS INCOME (LOSS)		-18,685.	
MAKENA CAPITAL SPLITTER X, L.P. - NET RENTAL REAL ESTATE INCOME		-924.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER NET RENTAL INCOME (LOSS)		55.	
MAKENA CAPITAL SPLITTER X, L.P. - INTEREST INCOME		574.	
MAKENA CAPITAL SPLITTER X, L.P. - DIVIDEND INCOME		201.	
MAKENA CAPITAL SPLITTER X, L.P. - ROYALTIES		706.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER PORTFOLIO INCOME (LOSS)		44.	
MAKENA CAPITAL SPLITTER X, L.P. - OTHER INCOME (LOSS)		822.	
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5		-17,207.	

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

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

ENTITY 2

OMB No. 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

▶ 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

Department of the Treasury
Internal Revenue Service (99)

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

Unrelated business activity code (see instructions) ▶ **523000**

Describe the unrelated trade or business ▶ **PRIVATE EQUITY CORE FUND (QP) IV, 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 ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D)		4a -13.		-13.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 2		5 11,555.		11,555.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13 11,542.		11,542.

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

14 Compensation of officers, directors, and trustees (Schedule K)		14		
15 Salaries and wages		15		
16 Repairs and maintenance		16		
17 Bad debts		17		
18 Interest (attach schedule) (see instructions)		18		
19 Taxes and licenses		19		
20 Charitable contributions (See instructions for limitation rules)		20		
21 Depreciation (attach Form 4562)	21			
22 Less depreciation claimed on Schedule A and elsewhere on return	22a		22b	
23 Depletion		23		
24 Contributions to deferred compensation plans		24		
25 Employee benefit programs		25		
26 Excess exempt expenses (Schedule I)		26		
27 Excess readership costs (Schedule J)		27		
28 Other deductions (attach schedule)		28		
29 Total deductions. Add lines 14 through 28		29		491.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30		11,051.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31		
32 Unrelated business taxable income. Subtract line 31 from line 30		32		11,051.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	2
DESCRIPTION		NET INCOME OR (LOSS)	
PRIVATE EQUITY CORE FUND (QP) IV, L.P. - ORDINARY BUSINESS INCOME (LOSS)		10,530.	
PRIVATE EQUITY CORE FUND (QP) IV, L.P. - NET RENTAL REAL ESTATE INCOME		11.	
PRIVATE EQUITY CORE FUND (QP) IV, L.P. - INTEREST INCOME		807.	
PRIVATE EQUITY CORE FUND (QP) IV, L.P. - DIVIDEND INCOME		204.	
PRIVATE EQUITY CORE FUND (QP) IV, L.P. - ROYALTIES		3.	
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5		11,555.	

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

		Enter filer's identifying number
File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number (EIN) or 59-1956886
	Number, street, and room or suite no. If a P.O. box, see instructions. 2635 FRUITVILLE ROAD	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SARASOTA, FL 34237	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Laura Spencer

- The books are in the care of ▶ **2635 FRUITVILLE ROAD - SARASOTA, FL 34237**
Telephone No. ▶ **(941) 955-3000** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**.

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

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

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

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

		Enter filer's identifying number
File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.	Employer identification number (EIN) or 59-1956886
	Number, street, and room or suite no. If a P.O. box, see instructions. 2635 FRUITVILLE ROAD	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SARASOTA, FL 34237	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LAURA SPENCER

- The books are in the care of ▶ **2635 FRUITVILLE ROAD - SARASOTA, FL 34237**
Telephone No. ▶ **(941) 955-3000** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**.

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

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	2,111.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	14,680.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

2018 TAX RETURN FILING INSTRUCTIONS

FLORIDA FORM F-1120

FOR THE YEAR ENDING

June 30, 2019

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
To be signed and dated by	Not Applicable
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Not Applicable
Mail tax return and check (if applicable) to	This return has qualified for electronic filing. Please review your return for completeness and accuracy. We will then transmit your return electronically to the Florida DOR. Do not mail the paper copy of the return to the Florida DOR.
Return must be mailed on or before	Not Applicable
Special Instructions	

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

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

Information for Filing Florida Form F-7004

F-7004
R. 01/17

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

To file online go to www.floridarevenue.com

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

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

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

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

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

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

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

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

Make checks payable and mail to:

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

844961
09-14-18

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

1019
F-7004
R. 01/17

Name **THE COMMUNITY FOUNDATION OF SARASOTA CO. INC.** FEIN 59-1956886
 Address **2635 FRUITVILLE ROAD** Taxable Year End 06/30/19
 City/State/ZIP **SARASOTA, FL 34237** FILING STATUS Partnership S-corporation
 All other federal returns to be filed X
 Tentative Tax Due \$ 0.00

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

Sign Here: _____ Date: _____

591956886	0	0	0
3	0	0	0
20190630	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0



Florida Corporate Income/Franchise Tax Return

F-1120, R. 01/19 1019

FEIN 59-1956886

For calendar year 2018 or tax year beginning JUL 1, 2018 ending JUN 30, 2019

Rule 12C-1.051 Florida Administrative Code Effective 01/19 Page 1 of 6

893302019063000020050371359195688600000

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 2 columns: Description and Amount. Rows include Federal taxable income, State income taxes, Additions, Subtractions, Florida exemption, and Total corporate income/franchise tax due.

844081 09-17-18

Payment Coupon for Florida Corporate Income Tax Return

1019 F-1120 R. 01/19

Do Not Detach YEAR ENDING 06/30/19

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, 20180701, 20190630, 00000000, 012, 202, 1005100, 0

0

8933 0 20190630 0002005037 1 3591956886 0000 0



THE COMMUNITY FOUNDATION OF SARASOTA

FEIN 59-1956886

1019 F-1120 R. 01/19 Page 2 of 6 06/30/19

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 CHIEF FINANCIAL OFFI Preparer's signature Date Preparer's PTIN P00585910 Preparer check if self-employed Firm's name (or yours if self-employed) and address KERKERING, BARBERIO & CO. P.O. BOX 49348 SARASOTA, FL FEIN 59-1753337 ZIP 34230-6348

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

- A. State of incorporation: FLORIDA
B. Florida Secretary of State document number: 749965
C. Florida consolidated return? YES NO [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: LSPENCER@CFSARASOTA.
L. Type of federal return filed 1120 1120S or 990-T



Where to Send Payments and Returns

Make check payable to and mail with return to: Florida Department of Revenue 5050 W Tennessee Street Tallahassee FL 32399-0135

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 06/30/19

Schedule I - Additions and/or Adjustments to Federal Taxable Income	
1. Interest excluded from federal taxable income (see instructions)	1.
2. Undistributed net long-term capital gains (see instructions)	2.
3. Net operating loss deduction (attach schedule)	3.
4. Net capital loss carryover (attach schedule)	4.
5. Excess charitable contribution carryover (attach schedule)	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.
9. Guaranty association assessment(s) credit	9.
10. Rural and/or urban high crime area job tax credits	10.
11. State housing tax credit	11.
12. Florida Tax Credit Scholarship Program Credits	12.
13. Renewable energy tax credits	13.
14. New markets tax credit	14.
15. Entertainment industry tax credit	15.
16. Research and Development tax credit	16.
17. Energy Economic Zone tax credit	17.
18. s. 168(k) IRC special bonus depreciation	18.
19. Other additions (attach schedule)	19.
20. Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.

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) less direct and indirect expenses \$ _____ Total ▶	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income \$ _____ (b) less direct and indirect expenses \$ _____ Total ▶	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3. Florida net operating loss carryover deduction (see instructions)	3.
4. Florida net capital loss carryover deduction (see instructions)	4.
5. Florida excess charitable contribution carryover (see instructions)	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.
8. Eligible net income of an international banking facility (see instructions)	8.
9. s. 179, IRC expense (see instructions)	9.
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.
11. Other subtractions (attach statement)	11.
12. Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.



NAME THE COMMUNITY FOUNDATION OF SARASOTA FEIN 59-1956886 TAXABLE YEAR ENDING 06/30/19

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				
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 06/30/19

Schedule V - Credits Against the Corporate Income/Franchise Tax	
1. Florida health maintenance organization credit (attach assessment notice)	1.
2. Capital investment tax credit (attach certification letter)	2.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4. Community contribution tax credit (attach certification letter)	4.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6. Rural job tax credit (attach certification letter)	6.
7. Urban high crime area job tax credit (attach certification letter)	7.
8. Hazardous waste facility tax credit	8.
9. Florida alternative minimum tax (AMT) credit	9.
10. Contaminated site rehabilitation tax credit (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida Tax Credit: Scholarship Program Credits. (attach certificate)	12.
13. Florida renewable energy technologies investment tax credit	13.
14. Florida renewable energy production tax credit	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. Other credits (attach schedule)	19.
20. Total credits against the tax (sum of Lines 1 through 19 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	20.

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 06/30/19

Estimated Tax Worksheet
For Taxable Years Beginning On or After January 1, 2018

1. Florida income expected in taxable year	1.	\$	<u>10,051.00</u>
2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N)	2.	\$	<u>10,051.00</u>
3. Estimated Florida net income (Line 1 less Line 2)	3.	\$	_____
4. Total Estimated Florida tax (5.5% of Line 3)		\$	_____
Less: Credits against the tax	4.	\$	_____
5. Computation of installments:			
Payment due dates and			
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	Rule 12C-1.051, F.A.C.



THE COMMUNITY FOUNDATION OF SARASOTA CO.

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THE COMMUNITY FOUNDATION OF SARASOTA CO.

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