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 19 2 **Open to Public** Inspection

Do not enter social security numbers on this form as it may	be made public.
Go to www.irs.gov/Form990 for instructions and the lates	st information.

Α	A For the 2019 calendar year, or tax year beginning and ending									
В	Check if applicab	e: C Name of organization		D Employer identifie	cation number					
	Addre									
	Name	e Doing business as	33-07485	36						
	Initial	, , , , , , , , , , , , , , , , , , , ,	om/suite	E Telephone number						
	Final return		(951) 24	1-7777						
_	termii ated	G Gross receipts \$	22,453,268.							
	Amer	TIVEISIUE, CA 92301	H(a) Is this a group re							
	Appli tion pendi	F Name and address of principal officer: N • MICHEILE DECKEI		for subordinates	? Yes X No					
	·	same as C above		H(b) Are all subordinates ir	ncluded? Yes No					
		empt status: 🚺 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) or [527	•	list. (see instructions)					
-		te: > www.iegives.org		H(c) Group exemption						
_		organization: X Corporation Trust Association Other	L Year	of formation: 1997	State of legal domicile: CA					
P	art I	Summary	. 1	· · · · · · · · · · · · · · · · · · ·						
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: Streng through Philanthropy.	tnen	ing the ini	and Empire					
nar	2	Check this box	of more	than 25% of its net as	esote					
ver		Number of voting members of the governing body (Part VI, line 1a)			16					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			16					
ې د 20	-	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			21					
itie		Total number of volunteers (estimate if necessary)			95					
cti		Total unrelated business revenue from Part VIII, column (C), line 12			0.					
۲		Net unrelated business taxable income from Form 990-T, line 39			0.					
		, , , , , , , , , , , , , , , , , , , ,		Prior Year	Current Year					
ø	8	Contributions and grants (Part VIII, line 1h)		13,051,175.	16,880,970.					
ň	9	Program service revenue (Part VIII, line 2g)		0.	0.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,734,537.	3,887,390.					
£		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		16,785,712.	20,768,360.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13,518,726.	16,094,743.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,287,315.	1,447,050.					
en se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 716,227	•							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		553,987.	880,254.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,360,028.	18,422,047.					
	19	Revenue less expenses. Subtract line 18 from line 12		1,425,684.	2,346,313.					
S OL				ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)		97,718,476.	111,311,138.					
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	L	24,162,620.	28,252,221.					
E ^{N6}	22	Net assets or fund balances. Subtract line 21 from line 20		73,555,856.	83,058,917.					

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 R. Michelle Decker, Pr Type or print name and title	esident & CEO		Date							
Paid	Print/Type preparer's name Carlos A. Davis, CPA	Preparer's signature	Date	Check PTIN if self-employed P02037008							
Preparer	Firm's name 🍗 Harrington Group			Firm's EIN 🕨 95-4557617							
Use Only	Firm's address 💊 234 East Colorad	o Blvd., Suite M150		-							
	Pasadena, CA 91101 Phone no. (626) 403-680										
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No							

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2019) Inland Empire Community Foundation 33-0748536 Page
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Strengthening the Inland Empire through 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?
	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?
	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 \$ 11,503,589. including grants of \$ 11,033,374.) (Revenue \$
та	GENERAL GRANTMAKING:
	Through the generosity of our donors, in 2019, Inland Empire Community
	Foundation (IECF) invested more than \$16 million in grants in the
	Inland Empire and beyond. Over \$4 million were for scholarships and
	education.
	education.
	Euroda usua sucordad to a busad anastrum of nonpustita in sup 27 000
	Funds were awarded to a broad spectrum of nonprofits in our 27,000
	square miles, two-county region. IECF's grantmaking falls generally
	into the following categories:
	Children & Families (\$961,977)
4b	(Code:) (Expenses \$5,640,950. including grants of \$5,061,369.) (Revenue \$
	COMMUNITY LEADERSHIP PROJECTS:
	Youth Grantmakers. The Youth Grantmakers (YG) Program was created to
	empower youth to address issues important to them by participating in
	grantmaking. Through this program, young people become active agents of
	change, preparing them for responsive community leadership and
	practical hands-on service. Made up of high school students from across
	the two-county region, we now have five Youth Grantmakers groups:
	Riverside, Coachella Valley, San Bernardino, Idyllwild, and Native
	Youth.
	During the 2018-19 academic year, nearly 100 Youth Grantmakers across
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
<u> </u>	Other program convices (Describe on Schedule O)
40	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 17,144,539.
40	
	Form 990 (201 See Schedule O for Continuation(s)
932002	see Schedule O for Continuation(s)

Form	990	(2019)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
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? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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	
10-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		
120	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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	446		х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u></u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
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? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
_	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	~	x	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	17	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		- 23
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
35 2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		<u> </u>
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t 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	<u></u>		
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 31			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.5	х	
	נט פוז או וווועט נט פוזבר או וווכוס :	1c		

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Par	t 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 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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)?	4a		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?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	NT /	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
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? N/A	•		
~		8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
a b		9a 9b		
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? <u>N/A</u> Section 501(c)(7) organizations. Enter:	90		
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	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 N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form 990	(2019)
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Inland Empire Community Foundation

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		100	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
h	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
~	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	~		
3	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6		6		X
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	0		- 23
14		7a		х
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	10		- 23
D		76		x
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		21
8		0-	х	
a	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	<u>л</u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	•		х
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		л
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V.	N
10-	Did the eventiation have local charters, hyperates, as officiates?	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		- 23
a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
110	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	IId		
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe</i>	120	- 23	
C		10-	х	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Δ	
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?	45 -	х	
	The organization's CEO, Executive Director, or top management official	15a	<u>л</u>	Х
a	Other officers or key employees of the organization	15b		л
40-	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	10-		Х
	taxable entity during the year?	16a		
D	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	401		
800	exempt status with respect to such arrangements?	16b		
17 19	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990 T (Section 501(c))3	le ort		able
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 for public inspection. Indicate how you made these available. Check all that apply	is only) avall	aule
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain on Schedule O)			
40		d fi		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u nnai	icial	
00	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records			
20	Paula Myles, Sr. VP of Finance and Stewardship - (951) 241-7777			
	3700 Sixth Street, Suite 200, Riverside, CA 92501			

Part VII	Co	mpensation o	f Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensated
	Em	ployees, and	Independe	ent Contra	ctors			

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.

See instructions for the order in which to list the persons above.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c	Pos	ition	l than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	a a a	recto	or/trus	tee)	from	from related	other
	(list any	recto	Lecto		the	organizations	compensation			
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	ubeu		(W-2/1099-MISC)		organization and related
	below	l ual tr	tional		nploy	st con yee	_			organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	orme			organizationo
(1) J. Sergio Bohon	4.00	_	-		-	1 0				
Chair of the Board		Х		X				0.	Ο.	0.
(2) Paulette Brown-Hinds	4.00									
Vice Chair of the Board		Х		Х				0.	0.	0.
(3) Nefertiti Long	4.00									
Secretary		Х		Х				0.	0.	0.
(4) Tamara Sipos	4.00									
Chief Financial Officer		Х		Х				0.	0.	0.
(5) Sean Varner	4.00									
Immediate Past Chair of the Board		Х						0.	0.	0.
(6) Dora Barilla	4.00									
Director		Х						0.	0.	0.
(7) Rabbi Hillel Cohn	2.00									
Director		Х						0.	0.	0.
(8) Paul Granillo	2.00								_	_
Director		Х						0.	0.	0.
(9) Kathy Johnson	2.00									
Director (Start 3/19)		Х						0.	0.	0.
(10) Brian McDonald	4.00									
Director		Х						0.	0.	0.
(11) Jacob Mejia	2.00									•
Director		Х						0.	0.	0.
(12) Dr. Tomas Morales	2.00									0
Director		X						0.	0.	0.
(13) Marco Robles	2.00									0
Director		X						0.	0.	0.
(14) Joseph G. Romano III	2.00									0
Director	0.00	X						0.	0.	0.
(15) Dr. Henry Shannon	2.00								0	0
Director	0.00	X						0.	0.	0.
(16) Diane Valenzuela	2.00							0	0	0
Director		X	<u> </u>					0.	0.	0.
(17) Regis Michelle Decker	50.00			37				160 714	^	20 070
President & CE0				Х				160,714.	0.	28,078.

932007 01-20-20

Form 990 (2019)

									33-07	48	536	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	ghe	st C	Compensated Employe	es (continued)			
(A) Name and title	(B) Average hours per week	Average nours per box, week			rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F Estim amou oth	ated nt of
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		comper from organiz and re organiz	the zation elated
(18) Celia Cudiamat SVP Grants and Community Impact	50.00			x				133,667.		0.	5	886.
(19) Paula Myles	50.00			21				155,007.		••	5,	000.
SVP Finance and Stewardship				х				120,213.		0.	16.	943.
(20) Jose Marquez	50.00										,	
VP Charitable Giving				x				103,505.		0.	29,	228.
1b Subtotal								518,099.		0.	80,	135.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)								0. 518,099.		0.	80.	0. 135.
2 Total number of individuals (including but n								-	,000 of reportabl		,	
compensation from the organization												4
											Ye	es No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s				•	•			phest compensated emp	•		3	x
4 For any individual listed on line 1a, is the su			ompe	ensa	atior	n and	d ot	her compensation from			4 X	,
and related organizations greater than \$15Did any person listed on line 1a receive or a									idual for services		4 X	<u> </u>
rendered to the organization? If "Yes," com	plete Schedul	e J f	or sı	ıch	pers	son .	<u></u>	-			5	X
Section B. Independent Contractors 1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100.000 of com	pensa	ation fron	
the organization. Report compensation for								n the organization's tax				
(A) Name and business	address	N	ONE	2				(B) Description of s	ervices	С	(C) ompensa	ition
							-					
• Total number of independent contractors (noludina hut -		mita	d + ~	the	60 li			oro than			
2 Total number of independent contractors (i \$100,000 of compensation from the organi	-			u to		se 119 0	siec	above) who received h				

				re Communi	ty Foundat	ion	33-0748	536 Page 9
Pa	rt VII							
		Check if Schedule O	contains a respo	nse or note to any lin	ie in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded
nts nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
fts,		Fundraising events		35,218.				
ilar İlar		Related organizations		0 000 100				
Sin		Government grants (contri		2,809,103.				
her	T	All other contributions, gifts, similar amounts not included	-	14,036,649.				
ğţ	a	Noncash contributions included in						
anc	-	Total. Add lines 1a-1f			16,880,970.			
				Business Code				
e	2 a							
ervi Je	b							
n Sr /enu	c							
Program Service Revenue	d							
Pro	e f	All other program service	rovopuo					
		Total. Add lines 2a-2f						
	3	Investment income (inclue						
		other similar amounts)			2,222,129.			2,222,129.
	4	Income from investment of	-	-				
	5	Royalties						
		Out the state	(i) Real	(ii) Personal				
	6a		6a 6b					
	c b	Less: rental expenses Rental income or (loss)	6c					
		Net rental income or (loss)	, <u> </u>	►				
		Gross amount from sales of	(i) Securiti					
		assets other than inventory	7a 3,313,5	52.				
•	b	Less: cost or other basis						
venue		and sales expenses	7b 1,643,0					
0		Gain or (loss)			1,665,261.			1,665,261.
Other Ro		Net gain or (loss) Gross income from fundraisi			1,003,201.			1,003,201.
Gt	0 "	including \$	• •					
		contributions reported on						
		Part IV, line 18		8a 36,617.				
		Less: direct expenses		8b 36,617.	-			
		Net income or (loss) from			0.			
	9а	Gross income from gamin	-					
	Ь	Part IV, line 19 Less: direct expenses		9a 9b				
		Net income or (loss) from						
		Gross sales of inventory,						
		and allowances		10a				
		Less: cost of goods sold		10b				
	c	Net income or (loss) from	sales of inventor					
sni	44 -			Business Code				
Miscellaneous Revenue	11 a b							
ella evei	c b			-				
Aisc		All other revenue						
<u> </u>		Total. Add lines 11a-11d						
		Total revenue. See instruction			20,768,360.	0.	0.	3,887,390.

Inland Empire Community Foundation 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 respo	-	-		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,060,585.	15,060,585.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,034,158.	1,034,158.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	598,234.	226,476.	158,311.	213,447
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		220,1700		
7	Other salaries and wages	689,345.	307,276.	167,695.	214,374
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	24,819.	11,319.	6,114.	7,386.
9	Other employee benefits	42,174.		9,910.	
10	Payroll taxes	92,478.	39,340.	23,351.	29,787.
11	Fees for services (nonemployees):				
а	Management	10.001			
b	0	10,361.		7,590.	2,771
	Accounting	28,500.		28,500.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		217,958.	192,100.	11,363.	11 105
	column (A) amount, list line 11g expenses on Sch O.)	161,365.		11,303.	<u>14,495</u> 92,720
12	Advertising and promotion	102,270.		26,494.	33,798
13 14	Office expenses	77,418.	46,590.	12,599.	18,229
14 15	Information technology	77,410.	40,550.	12,355.	10,225
15 16	Royalties	119,750.	33,446.	47,289.	39,015
17	Occupancy	72,605.	30,886.	18,333.	23,386
18	Travel Payments of travel or entertainment expenses	, 2,0030	50,000	10,0001	25,500
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,925.	5,498.	3,264.	4,163
20	Interest	,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,500.		18,500.	
23	Insurance	9,733.	2,718.	3,844.	3,171
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		29,057.	12,361.	7,337.	9,359.
b	Miscellaneous	8,537.		8,537.	E 4.22
с	Awards & recognition	7,163.			7,163
d	Board development	2,250.		2,250.	1 0 0 0
	All other expenses	1,862.			1,862
25	Total functional expenses. Add lines 1 through 24e	18,422,047.	17,144,539.	561,281.	716,227.
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)				Eorm 990 (2019

Inland Em	pire Cor	mmunity 3	Foundation
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33-0748536 Page 11

		Check if Schedule O contains a response or note	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5,498.	1	314,150.
	2	Savings and temporary cash investments			19,559,190.	2	22,969,764.
	3	Pledges and grants receivable, net			1,408,749.	3	1,608,305.
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif	ied pei	E Contraction of the second seco			
		under section 4958(f)(1)), and persons described		6			
ŝ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
Ä	9			46,565.	9	31,633.	
	10a	Land, buildings, and equipment: cost or other	s, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a	242,297.			
	b	Less: accumulated depreciation	10b	171,256.	38,201.	10c	71,041.
	11	Investments - publicly traded securities			72,347,940.	11	82,048,600.
	12	Investments - other securities. See Part IV, line 1	1		244,165.	12	190,662.
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	4,068,168.	15	4,076,983.		
	16	Total assets. Add lines 1 through 15 (must equa			97,718,476.	16	111,311,138.
	17	Accounts payable and accrued expenses	184,494.	17	166,293.		
	18	Grants payable	499,861.	18	2,047,112.		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			005 025	20	100.000
	21	Escrow or custodial account liability. Complete F			225,835.	21	106,223.
ies	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
Liat		controlled entity or family member of any of thes	•			22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X	23,252,430.		25,932,593.
		of Schedule D			24,162,620.		28,252,221.
	26	Total liabilities. Add lines 17 through 25		• • X	24,102,020.	26	20,232,221.
es		Organizations that follow FASB ASC 958, cher	ск пег				
anc	07	and complete lines 27, 28, 32, and 33.			8,784,765.	27	9,767,291.
3al	27				64,771,091.	27	73,291,626.
Π	28	Net assets with donor restrictions Organizations that do not follow FASB ASC 98			04,771,091.	20	15,251,020.
Εu		and complete lines 29 through 33.	50, CH				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ase	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			73,555,856.	32	83,058,917.
~	33	Total liabilities and net assets/fund balances			97,718,476.	33	111,311,138.
					, , ,		, , , , , , , , , , , , , , , , , , , ,

Form **990** (2019)

Form 990 (2019)
Part X Balance Sheet

Form	1990 (2019) Inland Empire Community Foundation	33-	074853	6	Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,360.
2	Total expenses (must equal Part IX, column (A), line 25)	2			,047.
3	Revenue less expenses. Subtract line 2 from line 1	3			,313.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	73,5	55	,856.
5	Net unrealized gains (losses) on investments	5	9,2	92	,657.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		-	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-2,1	.35	,909.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	83,0	58	<u>,917.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	Y	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			-	_
b	Were the organization's financial statements audited by an independent accountant?		2	b 2	K
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			_	-
	review, or compilation of its financial statements and selection of an independent accountant?			c 2	K
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it		
	Act and OMB Circular A-133?		3	a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3		

Form **990** (2019)

SCHEDULE A	
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(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2019
Open to Public

Department of the Treasury Internal Revenue Service					Open to Public Inspection					
				Go to www.irs.go	v/Form990 for instruction	nformation.	Employer identification number			
nan	le of	the organizati		nd Empiro	Community Fo	undat	ion			3-0748536
Da	rt I	Beason			Community Fo			a instruction		5-0740550
									5.	
	organ				(For lines 1 through 12, c					
1	H	-			on of churches described			I)(A)(I).		
2	\square				Attach Schedule E (Forn					
3	\square	•	•		anization described in se					44 - 1
4				ation operated in co	njunction with a hospital	described	a in sectio	A)(1)(a)011 n)(III). Enter	the nospital's name,
_		city, and stat								and in
5					ollege or university owned	d or opera	ted by a g	overnmental	unit descrit	bed in
~				Complete Part II.)			20/1-1/41/41	4.5		
6	X		-	-	nental unit described in					and the state and the state
7	Δ				antial part of its support f	rom a gov	ernmental	unit or from t	ne general	public described in
•				omplete Part II.)	(d)(A)(wi) (Composite Day					
8	H				(1)(A)(vi). (Complete Par		ad in a suit			
9		•	-		l in section 170(b)(1)(A)(-		-	-
		-	or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, cit	y, and state o	r the colleg	e or
10		university:		II					-his face a	
10		-		•	e than 33 1/3% of its sup	-				•
					ct to certain exceptions,					
					e (less section 511 tax) fr	om busine	sses acqu	lifed by the o	ganization	alter Julie 30, 1975.
11				mplete Part III.)	ively to test for public sa	foty Soo	saction 5(O(a)(4)		
12	H	-	-	-	sively for the benefit of, to	•			arry out the	purposes of one or
12					ed in section 509(a)(1) o					
					of supporting organizatio					
а					supervised, or controlled					aivina
u	L				gularly appoint or elect a					
				complete Part IV, Se		i majority (apporting
b		-			d or controlled in connec	tion with it	s sunnort	ed organizatio	on(s) by ha	vina
					anization vested in the s					
				t complete Part IV,					igo ino oup	portod
с		-			g organization operated	in connec	tion with	and functiona	llv integrate	ed with
•		••	-	•	s). You must complete I				ing integration	
d		-	-		porting organization oper				rted organi	zation(s)
					zation generally must sat					
			,	0 0	nplete Part IV, Sections			•		
е		- ·	i.	,	written determination fro				II. Type III	
-			•		onally integrated support			··· / ·, · /	, .,	
f	Ente		•			0 0				
g				n about the supporte						
	((i) Name of supp	orted	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount o	fmonetary	(vi) Amount of other
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)

Schedule A (Form 990 or 990-EZ) 2019 Inland Empire Community Foundation Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) a

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.)

Se	ction A. Public Support			-			
-	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	()	(-) == · -	(-/ =	(-) =	(-/ =- :-	(1)
	membership fees received. (Do not						
	include any "unusual grants.")	16,678,034.	7,961,309.	10,303,202.	13,051,175.	16,880,970.	64,874,690.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	16,678,034.	7,961,309.	10,303,202.	13,051,175.	16,880,970.	64,874,690.
	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)						24,553,366.
6	Public support. Subtract line 5 from line 4.						40,321,324.
	ction B. Total Support						, ,
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	16,678,034.	7,961,309.	10,303,202.	13,051,175.	16,880,970.	64,874,690.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3,234,946.	2,413,042.	6,134,901.	8,947,798.	3,887,390.	24,618,077.
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						89,492,767.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for		,			n 501(c)(3)	
	organization, check this box and stop				-		
Se	ction C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2019 (I	ine 6, column (f) di	ivided by line 11, c	olumn (f))		14	45.06 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	42.82 %
16a	33 1/3% support test - 2019. If the c					nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X
k	33 1/3% support test - 2018. If the c						
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t VI how the organ	ization
	meets the "facts-and-circumstances"						
k	10% -facts-and-circumstances test						
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio						
			,	. , ,		dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2019 Inland Empire Community Foundation 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.)

See	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	:019	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
t	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							
	Public support. (Subtract line 7c from line 6.)							
See	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	:019	(f) Total
9	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	Add lines 10a and 10b 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, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3	3) organiz	ation,
	check this box and stop here						<u></u>	
See	ction C. Computation of Publi	c Support Pe	ercentage					
15	Public support percentage for 2019 (li	ne 8, column (f), d	divided by line 13,	column (f))		15		%
	Public support percentage from 2018					16		%
See	ction D. Computation of Inves							
17	Investment income percentage for 20	19 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17		%
18	Investment income percentage from 2	018 Schedule A,	Part III, line 17			18		%
19a	33 1/3% support tests - 2019. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, a	and line 1	17 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly	supported organiz	ation		▶□]
b	33 1/3% support tests - 2018. If the line 18 is not more than 33 1/3%, che							
20				•	. ,	· ·		
20	Private foundation. If the organization	T UIU HOL CHECK A		a, ULISD, CHECK I		SUUCIONS		

Schedule A (Form 990 or 990 EZ) 2019 Inland Empire Community Foundation 33-0748536 Page 4

Yes

No

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

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

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

Schedule A (Form 990 or 990-EZ) 2019 Inland Empire Community Foundation Part IV Supporting Organizations (continued)

		-	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	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.	11c		
	tion 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)).		
а				
b				
С		truction	ŕ	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а		-		
	trustees of each of the supported organizations? Provide details in Part VI.	3a		<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1

Schedule A (Form 990 or 990-EZ) 2019 Inland Empire Community Foundation 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.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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	Check here if the current year is the organization's first as a non-functional	v integrat	ed Type III supporting or	nanization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990 EZ) 2019 Inland Empire Community Foundation

1 41	Type in Non-Functionally integrated 509	(a)(s) Supporting Org	anizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
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	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
с	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A	(Form 990 or 990-EZ) 2019 Inland	Empire	Community	Foundation	33-0748536 Page 8
Part VI	Supplemental Information. Pro Part IV, Section A, lines 1, 2, 3b, 3c, 4b line 1; Part IV, Section D, lines 2 and 3; Section D, lines 5, 6, and 8; and Part V, (See instructions.)	ovide the explar , 4c, 5a, 6, 9a, Part IV, Section	nations required by 9b, 9c, 11a, 11b, ar n E, lines 1c, 2a, 2b	Part II, line 10; Part II, line nd 11c; Part IV, Section B , 3a, and 3b; Part V, line 1	, lines 1 and 2; Part IV, Section C, 1; Part V, Section B, line 1e; Part V,

SCHEDULE D

(Form	990)
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932051 10-02-19

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.



Department of the Treasury Internal Revenue Service Name of the organization

Inland Empire Community Foundation

Employer identification number 33-0748536

Pa			milar Funds or A	Accounts.Complete if the			
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised t	unds	(b) Funds and other accounts			
1	Total number at end of year		77				
2	Aggregate value of contributions to (during year)	8,5	00,153.				
3	Aggregate value of grants from (during year)	-6.5	34,977.				
4	Aggregate value of grants non (during year)	24.4	26,175.				
5	Did the organization inform all donors and donor advisors in w			nde			
Ũ	are the organization's property, subject to the organization's e	-					
6	Did the organization inform all grantees, donors, and donor ac						
Ŭ	for charitable purposes and not for the benefit of the donor or			•			
	impermissible private benefit?		• •				
Pa							
1	Purpose(s) of conservation easements held by the organization		,	,			
•	Preservation of land for public use (for example, recreat		Preservation of a hist	orically important land area			
	Protection of natural habitat			tified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribut	ion in the form of a c	conservation easement on the last			
_	day of the tax year.			Held at the End of the Tax Year			
а	Total number of conservation easements			2a			
b	Total acreage restricted by conservation easements			2b			
	Number of conservation easements on a certified historic stru			2c			
	Number of conservation easements included in (c) acquired a						
	listed in the National Register			2d			
3	Number of conservation easements modified, transferred, rele						
	year ►						
4	Number of states where property subject to conservation eas	ement is located					
5	Does the organization have a written policy regarding the period		n, handling of				
	violations, and enforcement of the conservation easements it		ý č	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, h						
		-	-				
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enfo	rcing conservation e	asements during the year			
	▶\$						
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements	of section 170(h)(4)	B)(i)			
	and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization reports conservation						
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's fi	nancial statements t	hat describes the			
	organization's accounting for conservation easements.						
Pa	t III Organizations Maintaining Collections of	Art, Historical Trea	sures, or Other	Similar Assets.			
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.					
1 a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its reven	ue statement and b	alance sheet works			
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, c	r research in further	ance of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue s	statement and balan	ce sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or r	esearch in furtheran	ce 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 trea	sures, or other similar ass	ets for financial gain	, provide			
	the following amounts required to be reported under FASB AS	-					
а	Revenue included on Form 990, Part VIII, line 1						
	Assets included in Form 990, Part X			🕨 \$			
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2019			

Part W Constraints Collections of Art, Historical Treasures, or Other Similar Assets(continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply): a b b b cholarly research d b b cholarly research e D'Inter			Empire Com	—			33-07		
a Public exhibition d Loan or exchange program b Scholarly research e Other c Preservation for future generations e Other c Preservation for future generations e Other c Previde a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to solid 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 "Ves" on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Yes X No 1a Is the organization angement. In Part XIII and complete the following table: Yes X No b Distributions during the year. 1d 1d 1d c Distributions during the year. 1d 1d 1d 1d d Additions on Linuck an amount on Form 990, Part X, line 21, for escrew or custodial account liability? X Yes No Brit/ Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII X X Part V Endowment Funds. Complete if the organization answered "Yes" or Form 990, Part X, line 10.									iea)
a Public exhibition d Loan or exchange program b Scholarly research e Other c Preservation for future generations e Other 4 Provide a description of the organization's collections and explain how they further the organization's exercise 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, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21. Yes Xino b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Yes Xino c Beginning balance 1d 1d 1d 1d 1d c Ending balance 1f Xino 55, 987, 77, 47, 43, 488, 72, 109, 799, 72, 55, 5141. Xino Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? Xino, 72, 555, 514. Xino, 73, 555, 536, 387, 77, 47, 434, 488, 77, 719, 759, 77, 25, 555, 144.	3		on, and other record	is, check any of the	following that make	significant	use of its		
b Scholarly research e Other c Preservation for future generations 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 answered "Yes" on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. 1 Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table:				┌──.					
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3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Land, Buildings, and Equipment.	C	·							
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(i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.	ou					the organi	201011		
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment.		•							
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.									
Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.	h	If "Yes" on line 3a(ii) are the related organizations	tions listed as requir	red on Schedule B2				·	
Part VI Land, Buildings, and Equipment.									
	_			wittent funds.					
Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value				· · · ·		•	ed l		value
basis (investment) basis (other) depreciation		Description of property							value
1a Land 2able (integration) 2able (integration)	19	Land		-, 2000					
b Buildings									
c Leasehold improvements									
d Equipment 242,297. 171,256. 71,041.				2.4	2,297.	171.2	56.	71	,041
e Other					_,	,_			,
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 71,041.	-			X, column (B). line 1	0c.)			71	,041

Schedule D (Form 990) 2019

(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.	
	Description		(b) Book value
(1)	•		()
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tabal (Options (h) source around Form 000, Dart V, and (D) (in	- 15 \	•	
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)		
Complete if the organization answered "Yes"	on Form 000 Dort IV line	110 or 11f Coo Form 000 Dort V line 25	
	on Form 990, Part IV, line	The of This See Forth 990, Part A, line 25.	(b) Book value
<u> </u>			(b) BOOK value
(1) Federal income taxes (2) Obligation under charitab	lo gift		
	ie giit		1,293,850.
(4) Agency funds			24,594,947. 43,796.
(5) Capital lease obligation			43,/90.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			25,932,593.
2. Liability for uncertain tax positions. In Part XIII, provide	e the text of the footnote t	o the organization's financial statements t	hat reports the

Inland Empire Community Foundation Schedule D (Form 990) 2019

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

Part VII Investments - Other Securities.

(a) Description of security or category (including name of security)

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(b) Book value (c) Method of valuation: Cost or end-of-year market value

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Schedule D (Form 990) 2019

	33-	0748536	Page 4
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hedule D	(Form 990) 201	9	Inland	Empi	.re	Com	nunity	Found	lati	on	
											5	_

	edule D (Form 990) 2019 III and Empire Community For		0740330 Page 4					
Pa	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	24,866,649.			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	3 ()	2a	9,292,657.					
b	Donated services and use of facilities							
С	Recoveries of prior year grants		187,912.					
d	Other (Describe in Part XIII.)	2d	397,018.					
е				2e	9,877,587.			
3	Subtract line 2e from line 1			3	14,989,062.			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b							
b	Other (Describe in Part XIII.)	4b	5,779,298.					
С		4c	5,779,298.					
5	Tatal variance Add lines 2 and 4 (This must source Form 000 Port 1 line 12)	5	20,768,360.					
<u> </u>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			•				
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme			•				
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents W	/ith Expenses per	Retu	irn.			
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents W	/ith Expenses per	•				
	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents W	/ith Expenses per	Retu	irn.			
1	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents W	/ith Expenses per	Retu	irn.			
1 2	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents W	/ith Expenses per	Retu	irn.			
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents W 2a 2b	/ith Expenses per	Retu	irn.			
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	/ith Expenses per	Retu	irn.			
1 2 a b c	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	/ith Expenses per	Retu	ırn. 15,363,588. 0.			
1 2 b c d	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	/ith Expenses per	1	irn.			
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	/ith Expenses per	1	ırn. 15,363,588. 0.			
1 2 b c d e 3	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 4a	/ith Expenses per	1 2e 3	ırn. 15,363,588. 0.			
1 2 b c d 3 4	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a	/ith Expenses per	1 2e 3	rn. 15,363,588. 0. 15,363,588.			
1 2 3 4 4	rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	/ith Expenses per 	1 2e 3	ırn. 15,363,588. 0.			

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 IV, line 2b:

Obligations for Charitable Remainder Trust payments.

Part V, line 4:

The Foundation employs a spending policy of 4% for endowed funds. Annual

distributions from the endowment funds in the form of grants and

scholarships are made in keeping with the original donors intent.

Distributions from unrestricted/board designated endowment funds are

subject to the spending policy and are disbursed to 501(c)3 organizations

following a competitive grant process.

Financial Statement Footnote Reporting Organization's Liability for

Uncertain Tax Positions under FIN 48 (ASC 740):

The Foundation is exempt from taxation under Internal Revenue Code Section 501(c)(3) and California Revenue and Taxation Code Section 23701d.

Generally accepted accounting principles provide accounting and disclosure guidance about positions taken by an organization in its tax returns that might be uncertain. Management has considered its tax positions and believes that all of the positions taken by the Foundation in its federal and state exempt organization tax returns are more likely than not to be sustained upon examination. The Foundation returns are subject to examination by federal and state taxing authorities, generally for three and four years, respectively, after they are filed.

Part XI, Line 2d - Other Adjustments:	
Change in value of split-interest agreements	127,455.
Management Fees - agency funds	269,563.
Total to Schedule D, Part XI, Line 2d	397,018.
Part XI, Line 4b - Other Adjustments:	
Invest. Inc agencies booked as liability/treated as	
revenue for Form 990	3,785,437.
Support for agencies booked as liability/treated as revenue	
for Form 990	1,993,861.
Total to Schedule D, Part XI, Line 4b	5,779,298.

Part XII, Line 4b - Other Adjustments:

Agency Fund Expense - booked as liability/treated as expense for Form 990 3,058,459.	Schedule D (Form 990) 2019 Inland Empire Community Foundation Part XIII Supplemental Information (continued)	33-0748536 Page 5
		3,058,459.

SCHEDULE G	Suppleme	ntal Information Regardin	g Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" o organization entered more than \$				or 19,	or if the	2019
Department of the Treasury		Attach to Form 99						Open to Public Inspection
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for inst	ructior	is and	the latest informat	ion.	Employor i	dentification number
Name of the organization		Empire Community	Foun	dat	ion		33-074	
		Complete if the organization answ				line 1	7. Form 990-	EZ filers are not
 a Mail solicitat b Internet and c Phone solicit d In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations in have a written c ed in Form 990, P highest paid indiv	f Solicit g Specia or oral agreement with any individu 'art VII) or entity in connection with viduals or entities (fundraisers) pure	ation of ation of al fundra al (inclu profess	non-g gover aising ding o sional f	overnment grants nment grants events fficers, directors, true undraising services?	stees	Y	es 🗌 No o be
(i) Name and address or entity (fund		(ii) Activity	or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by fundraiser ted in col. (i)	
			Yes	No				
Total								
3 List all states in whi or licensing.	ch the organizatio	on is registered or licensed to solici	t contrik	outions	s or has been notified	d it is	exempt from	registration

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

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-FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

Gross receipts Less: Contributions Gross income (line 1 minus line 2) Cash prizes Noncash prizes Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	Part IV) (event type) 23,006. 2,589. 20,417. 11,948. 11,948. 8,469. h 9 in column (d)	8,087. 11,098. 9,820. 1,278.	(c) Other events 3 (total number) 29,644. 24,542. 5,102. 2,108. 2,994.	35,218 36,617 23,876
Less: Contributions <u>Gross income (line 1 minus line 2)</u> Cash prizes <u>Secondary Secondary Second</u>	Part IV) (event type) 23,006. 2,589. 20,417. 11,948. 11,948. 8,469. h 9 in column (d)	Part IV) (event type) 19,185. 8,087. 11,098. 9,820. 1,278.	(total number) 29,644. 24,542. 5,102. 2,108. 2,994.	(add col. (a) through col. (c)) 71,835 35,218 36,617 23,876
Less: Contributions <u>Gross income (line 1 minus line 2)</u> Cash prizes <u>Secondary Secondary Second</u>	(event type) 23,006. 2,589. 20,417. 11,948. 8,469. h 9 in column (d)	(event type) 19,185. 8,087. 11,098. 9,820. 1,278.	(total number) 29,644. 24,542. 5,102. 2,108. 2,994.	col. (c)) 71,835 35,218 36,617 23,876
Less: Contributions <u>Gross income (line 1 minus line 2)</u> Cash prizes <u>Secondary Secondary Second</u>	23,006. 2,589. 20,417. 11,948. 11,948. 8,469. h 9 in column (d)	19,185. 8,087. 11,098. 9,820. 1,278.	29,644. 24,542. 5,102. 2,108. 2,994.	71,835 35,218 36,617 23,876
Less: Contributions <u>Gross income (line 1 minus line 2)</u> Cash prizes <u>Secondary Secondary Second</u>	2,589. 20,417. 11,948. 11,948. 8,469. h 9 in column (d)	8,087. 11,098. 9,820. 1,278.	24,542. 5,102. 2,108. 2,994.	35,218 36,617 23,876 12,741
Gross income (line 1 minus line 2) Cash prizes Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I Gaming. Complete if the organization	20,417. 11,948. 8,469. h 9 in column (d)	11,098. 9,820. 1,278.	5,102. 2,108. 2,994.	36,617
Cash prizes	11,948. 8,469. h 9 in column (d)	9,820.	2,108.	23,876
Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I Gaming. Complete if the organization	11,948. 8,469. h 9 in column (d)	1,278.	2,994.	12,741
Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I II Gaming. Complete if the organization	11,948. 8,469. h 9 in column (d)	1,278.	2,994.	12,741
Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I II Gaming. Complete if the organization	8 , 469 . h 9 in column (d)	1,278.	2,994.	12,741
Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I II Gaming. Complete if the organization	8 , 469 . h 9 in column (d)		-	
Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I II Gaming. Complete if the organization	8 , 469 . h 9 in column (d) line 3, column (d)		-	
Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I II Gaming. Complete if the organization	h 9 in column (d) line 3, column (d)		-	
Net income summary. Subtract line 10 from I Gaming. Complete if the organization	line 3, column (d)		►	26 617
Gaming. Complete if the organization				
• • • • • • • • • • • • • • • • • • •	answered "Yes" on Forn	<u></u>	►	0
\$15,000 on Form 990-EZ, line 6a.		n 990, Part IV, line 19, or	reported more than	
	1	() Dull take (not out		
	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
		bingo/progressive bingo		
Gross revenue		+		
Cash prizes				
Cash prizes				
Noncash prizes				
Rent/facility costs				
Other direct expenses				
	Yes %	Yes %	Yes %	
Volunteer labor	Νο	Νο	No	
Direct expense summary. Add lines 2 throug	h 5 in column (d)			
Net south a factor of the second seco	7 fueres the state of the state			
INET gaming income summary. Subtract line 7	r trom line 1, column (d)		🕨	<u> </u>
ne organization licensed to conduct gaming a	activities in each of these			Yes No
чо, одрант				
re any of the organization's gaming licenses of	evoked, suspended, or t	erminated during the tax	vear?	Yes No
		-	-	
e	Noncash prizes	Gross revenue	Gross revenue	Gross revenue

932082 09-11-19

Sch	edule G (Form 990 or 990-EZ) 2019 Inland Empire Community Foundation 33-0)748536	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	└── No
	Indicate the percentage of gaming activity conducted in:	11	
	The organization's facility		<u>%</u>
	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗌 Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party ►\$		
С	If "Yes," enter name and address of the third party:		
	Address		
16	Gaming manager information:		
10			
	Name		
	Gaming manager compensation 🕨 \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		—
	retain the state gaming license?	🛄 Yes	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Pa	organization's own exempt activities during the tax year s rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (v); and Part I, l	art III, linos Q	0h 10h
ľů	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	lit iii, iii les 5,	30, 100,
Pa	rt II:		
GO	MEZ: Angela C. Gomez Memorial Foundation Fund, Golf Tournament	:	
777	ID. Bing AVID Scholanghin Drognam Fund Colf Mournament		
AV	ID: Rims AVID Scholarship Program Fund, Golf Tournament		
Ad	ditional fundraising events represented in column (c):		
Ge	orge E. Brown Jr. Donor Advised Fund, Fundraising Reception		
ът	yllwild Community Fund, Fundraising Party and Silent Auction		
<u>u</u>	yriwria communicy runa, runararsing raity and silent Auction		
La	ke Elsinore Education Foundation Fund, Golf Tournament and Bin	ıgo	
	ght		
9320	33 09-11-19 Schedule G (For	n 990 or 990	-EZ) 2019

G (F

Schedule G	a (Form 990 or 990-EZ) Supplemental Info	Inland	Empire	Community	Foundation	L	33-0748536 _{Pag}	ge 4
Part IV	Supplemental into		nued)					

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go	Grants and Oth overnments, ar lete if the organization Go to www.ii	nd Individual	I <mark>s in the Ŭni</mark> on Form 990, Pa m 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047
Name of the organization	_	_					Employer identification number
	÷	nunity Found	lation				33-0748536
Part I General Information on Grants							
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's p 	istance?						tion X Yes No
Part II Grants and Other Assistance to					anization answered "	/es" on Form 990 Par	t IV line 21 for any
recipient that received more than	-						
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
A.K. Smiley Public Library & Lincoln Shrine - 125 W. Vine St							
Redlands, CA 92373	95-6041565	501(c)(3)	6,027.	0.			Designated Distribution
Academy for Grassroots Organizations - P.O. Box 293928 - Phelan, CA 92329	91-2088232	501(c)(3)	18,500.	0.			Resource Network: To guide community leaders in strengthening local non-profits.
Alianza Coachella Valley P.O. Box 38 Coachella, CA 92236	84-1966709	501(c)(3)	42,663.	0.			Regional coordinators California Complete Count-Census 2020
Alianza Coachella Valley P.O. Box 38 Coachella, CA 92236	84-1966709	501(c)(3)	50,000.	0.			TCE- 2020 Funders Alliance Census Collabortion(Alianza)
Alianza Coachella Valley P.O. Box 38 Coachella, CA 92236	84-1966709	501(c)(3)	36,134.	0.			California Complete Count-Census 2020
All Saints' Episcopal Church 3847 Terracina Dr. Riverside, CA 92506	95-1731098	501(c)(3)	10,000.	0.			Agency distribution
2 Enter total number of section 501(c)(3)	and government o	rganizations listed in th	he line 1 table				▶
3 Enter total number of other organization	ns listed in the line	1 table					▶ <u>1.</u>
LHA For Paperwork Reduction Act Notic	e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2019)

Schedule I (Form 990) Inland Empire Community Foundation

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
All Saints' Episcopal Church 3847 Terracina Dr. Riverside, CA 92506	95-1731098	501(c)(3)	2,734.	0.			Agency distribution
Alzheimers Family Services Center 9451 Indianapolis Ave. Huntington Beach, CA 92646	95-3463975		25,000.	0.			Mind Booster and Memory Screenings
Alzheimer's Orange County 2515 McCabe Way, Suite 200 Irvine, CA 92614	95-3702013	501(c)(3)	25,000.	0.			Enhancing Services for those with AD Who Live Alone
American Red Cross, Riverside County - 6235 River Crest Dr., Suite A - Riverside, CA 92507	53-0196605	501(c)(3)	50,000.	0.			California for All Emergency Preparedness
- America's Second Harvest of Coastal Georgia – 2501 E. President St. – Savannah, GA 31404	58-1442013	501(c)(3)	10,000.	0.			Childhood Hunger Initiative
Animal Friends of the Valleys 33751 Mission Trail Wildomar, CA 92595	33-0276892	501(c)(3)	10,000.	0.			For the payment of veterinary costs incurred by needy senior citizens
Animal Samaritans SPCA 72120 Pet Land Place Thousand Palms, CA 92276	95-3171867	501(c)(3)	28,000.	0.			For the payment of veterinary costs incurred by needy senior citizens
Animal Samaritans SPCA 72120 Pet Land Place Thousand Palms, CA 92276	95-3171867	501(c)(3)	15,000.	0.			For general support
Arkansas Food Bank 4301 W. 6th St. Little Rock, AR 72209	71-0596734	501(c)(3)	15,000.	0.			Food For Kids

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Inland Empire Community Foundation Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Schedule I	(Eorm QQ(ı١
Schedule I	(FOUID 990	J

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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
							To support emergency food
Arlington Temporary Assistance							and clothing, medical
9000 Arlington Avenue, Suite 112							referrals, job search,
Riverside, CA 92503	95-1690961	501(c)(3)	9,445.	٥.			and computer training
Arrowhead United Way							
646 N. D St.							
San Bernardino, CA 92401	95-1934586	501(c)(3)	5,311.	0.			Designated Distribution
			, -				
Arts & Learning Conservatory							After School Arts Program
1518 Brookhollow Dr., Suite 115							- Arts and Learning
, Santa Ana, CA 92705-5449	73-1724164	501(c)(3)	50,000.	٥.			Conservatory
Arts Connection, the arts council							
for San Bernardino - CSU San							Creative Pathways:
Bernardino, 5500 University Pkwy.,							Planning for Sustainable
Visual Arts Bldg., Room 308 - San	46-3088038	501(c)(3)	10,000.	0.			growth of Arts & Culture
Asheville Humane Society							
14 Forever Friends Lane							SL Gimbel Funds Asheville
Asheville, NC 28806	56-1444098	501(c)(3)	24,650.	0.			Humane Society
							To support 1,000
Assistance League of San							underserved 3rd & 4th
Bernardino - 580 W. Sixth St							grade children's access
San Bernardino, CA 92410	95-6065105	501(c)(3)	10,000.	0.			to preventive dental care
							Operation School Bell,
Assistance League of Temecula							which provides clothing
Valley - 28720 Via Montezuma -							and shoes to very low
Temecula, CA 92590-2510	33-0360419	501(c)(3)	10,000.	0.			income students
Aggistance Langue Of Wiston Waller							Operation Cabool Poll
Assistance League Of Victor Valley							Operation School Bell:
P.O. Box 39	95-3417060	501(a)(3)	10 000	0.			Provide School Clothing
Apple Valley, CA 92307	90-341/060	501(c)(3)	19,000.	0.			for Disadvantaged Youth
Autism Society Inland Empire							
420 N. McKinley, Suite 111-118							California For All
Corona, CA 92879	45-5376014	501(c)(3)	49,954.	٥.			Emergency Preparedness

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Inland Empire Community Foundation Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Azusa Pacific University							
Office of University Advancement,							
P.O. Box 7000 - Azusa, CA							
91702-7000	95-1744369	501(c)(3)	15,933.	0.			Designated Distribution
BakerRipley							
4450 Harrisburg Blvd.							Dementia Care for Elders
Houston, TX 77277	23-7062976	501(c)(3)	25,000.	0.			- BakerRipley
Perster Community College							
Barstow Community College Foundation - 2700 Barstow Road -							2019-2020 Scholarship
Barstow, CA 92311	95-3736589	501(c)(3)	5,000.	0.			Distributions
	55 5750505	501(0)(3)	5,000.				
Barstow Community College							
Foundation - 2700 Barstow Road -							2019-2020 Scholarship
Barstow, CA 92311	95-3736589	501(c)(3)	3,633.	Ο.			Distributions
							"Keeping Up with the
Bear Valley Community Healthcare							Joneses" Technology
District Foundation - P.O. Box							Project: Website
1649 - Big Bear Lake, CA 92315	33-0714985	501(c)(3)	7,800.	0.			Consultation & Update
Big Brothers Big Sisters of the							The Road to Success - Big
Inland Empire - 2155 Chicago Ave.,							Brothers Big Sisters of
Suite 100 - Riverside, CA 92507	95-1992702	501(c)(3)	25,000.	0.			the Inland Empire
Suite 100 - Riverside, CR 92307	95-1992702	501(0)(3)	23,000.	0.			
Big Brothers Big Sisters of the							Road to Success: Building
Inland Empire - 2155 Chicago Ave.,							Resiliency and Academic
Suite 100 - Riverside, CA 92507	95-1992702	501(c)(3)	2,000.	0.			Achievement
Big Brothers Big Sisters of the							
Inland Empire - 2155 Chicago Ave.,							California for All
Suite 100 - Riverside, CA 92507	95-1992702	501(c)(3)	50,000.	0.			Emergency Preparedness
Black Voice Foundation, Inc.							
P.O. Box 912							To support Sojourner
Riverside, CA 92502	33-0470176	501(c)(3)	2,000.	0.			Truth Fund activities

Schedule I (Form 990)

Inland Empire Community Foundation Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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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
Black Voice Foundation, Inc.							
P.O. Box 912							To support Mapping Black
Riverside, CA 92502	33-0470176	501(c)(3)	24,000.	0.			California
							Blu Foundation
Blu Educational Foundation							Scholarship Distribution
P.O. Box 7042							for 2019 - 2020 academic
San Bernardino, CA 92411	59-3823989	501(c)(3)	50,000.	0.			school year.
Blu Educational Foundation PO Box 7042							California Complete
San Bernardino, CA 92411	59-3823989	501(c)(3)	33,482.	0.			Count-Census 2020
	55 5025505	501(0)(3)	55,402.	••			
Boys & Girls Club of Redlands							
- 1251 Clay St.							
Redlands, CA 92374	95-6187083	501(c)(3)	15,000.	0.			For general support
Boys and Girls Clubs of Cleveland							
6144 Broadway Avenue							Boy's and Girls Clubs of
Cleveland, OH 44127	34-0770686	501(c)(3)	15,000.	0.			Cleveland - 2019 Docket 3
Brazos Valley Food Bank, Inc.							
P.O. Box 74	74 000446	[0, 1, (-), (-)]	15 000				Food For Pantires: Food
Bryan, TX 77806	74-2380446	501(c)(3)	15,000.	0.			Purchase Program Weingart
Bread of Life Church							Foundation-Funders
43613 Florida Ave., Suite C-1							Alliance Census (Bread of
Hemet, CA 92544	61-1703254	501(c)(3)	22,000.	0.			Life Church)
Bread of Life Church							
43613 Florida Ave., Suite C-1							California Complete
Hemet, CA 92544	61-1703254	501(c)(3)	34,882.	0.			Count-Cense 2020
Brookings Institution							Brookings Metropolitan
1775 Massachusetts Ave. NW							Policy Program (Brookings
Washington, DC 20036-2103	53-0196577	501(c)(3)	80,000.	0.			Metro) IEGO Work

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Schedule I (Form 990) Inland Empire Community Foundation

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
Cal Poly Univ, Pomona							
Office of Financial Aid &							
Scholarships, 3801 W. Temple Ave.,							Scholarship for Room &
Bldg. 98-T3 - P	95-4255659	501(c)(3)	1,000.	0.			Board
Cal Poly Univ, Pomona							
Office of Financial Aid &							
Scholarships, 3801 W. Temple Ave.,							2019-2020 Scholarship
Bldg. 98-T3 - P	95-4255659	501(c)(3)	5,714.	0.			Distribution
Calicinto Ranch, Inc.							
Boys & Girls of Prisoners							
Families/Foundation, P.O. Box 1225							Director of Development
- San Jacinto,	42-1579061	501(c)(3)	10,000.	0.			position for 2019-2020
California Baptist University							
University Advancement, 8432							
Magnolia Ave. – Riverside, CA							Scholarship for 2019-2020
92504-3297	95-1890710	501(c)(3)	5,000.	0.			Academic Year
California Partnership							
c/o Regional Access Project							San Bernardino
Foundation, 41550 Eclectic St							Homelessness Capacity
Palm Desert, CA	95-4302067	501(c)(3)	10,000.	0.			Building Project
California Partnership							
c/o Regional Access Project							
Foundation, 41550 Eclectic St							California Complete
Palm Desert, CA	95-4302067	501(c)(3)	23,979.	0.			Count-Census 2020
California State University, San							
Bernardino - Office of Pre-College							
Programs, Upward Bound, 5500							To support CPI partner
University Pkwy., Pfau Li – San	95-6067343	501(c)(3)	12,500.	0.			services
California State University, San							
Bernardino – Student Financial							
Services - UH-035, 5500 University							Scholarship for 2019-2020
Pkwy. – San Bernardino, CA	95-6067343	501(c)(3)	2,000.	0.			Academic Year
California State University, San							
Bernardino - Student Financial							
Services - UH-035, 5500 University							2019-2020 Scholarship
Pkwy. – San Bernardino, CA	95-6067343	501(c)(3)	8,616.	0.			Distributions

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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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
California State University, San							
, Bernardino - Student Financial							
Services - UH-035, 5500 University							2019-2020 Scholarship
Pkwy. – San Bernardino, CA	95-6067343	501(c)(3)	10,613.	0.			Distributions
California State University, San							
Bernardino - Student Financial							
Services - UH-035, 5500 University							2019-2020 Scholarship
Pkwy. – San Bernardino, CA	95-6067343	501(c)(3)	12,378.	0.			Distributions
California State University, San							
Bernardino - Student Financial							
Services - UH-035, 5500 University							2019-2020 Scholarship
Pkwy. – San Bernardino, CA	95-6067343	501(c)(3)	23,188.	0.			Distribution
California State University, San							
Marcos - Financial Aid and							
Scholarships Office, 333 S. Twin							Scholarship for 2019-2020
Oaks Valley Road - San Marcos, CA	33-0397688	501(c)(3)	1,000.	0.			Academic Year
California State University, San							
Marcos - Financial Aid and							
Scholarships Office, 333 S. Twin							Scholarship for 2019-2020
Oaks Valley Road - San Marcos, CA	33-0397688	501(c)(3)	3,400.	0.			Academic Year
Cancer Research Institute							
One Exchange Plaza - 29 Broadway Fl							Cancer Research Institute
New York, NY 10006	13-1837442	501(c)(3)	5,000.	0.			- General Operations
Canine Support Teams Inc							
P.O. Box 891767							Website Re-Design and
Temecula, CA 92589	33-0434821	501(c)(3)	10,000.	0.			Optimization
Capital Area Food Bank							
4900 Puerto Rico Ave. NE							
Washington, DC 20017	52-1167581	501(c)(3)	15,000.	0.			Weekend Bags
				.			To fund homeless
Catholic Charities Riverside & San							restroom/shower trailer,
Bernardino - 1450 N. D St San							generator, and transport
Bernardino, CA 92405	95-3516461	501(c)(3)	44,000.	0.			cost

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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
							To support earthquake
Catholic Charities Riverside & San							relief efforts in the
Bernardino - 1450 N. D St San							Trona area: food and
Bernardino, CA 92405	95-3516461	501(c)(3)	7,500.	0.			transportation needs
Catholic Charities Riverside & San							To support families
Bernardino - 1450 N. D St San							affected by the Trona
Bernardino, CA 92405	95-3516461	501(c)(3)	20,000.	0.			Earthquake
	55 5510401	501(0)(3)	20,000.	••			Census 2020: Facilitate
Center for Community Action &							Regional Census Outreach
Environmental Justice - P.O. Box							Table, Convene
33124 - Riverside, CA 92519	33-0562082	501(c)(3)	15,000.	0.			Organizations
Center for Community Action &							
Environmental Justice - P.O. Box							California Complete
33124 - Riverside, CA 92519	33-0562082	501(c)(3)	46,759.	0.			Count-Census 2020 (CCAEJ)
			, ,				
Center for Community Action &							
Environmental Justice - P.O. Box							California Complete
33124 - Riverside, CA 92519	33-0562082	501(c)(3)	70,763.	0.			Count-Census 2020 (CCAEJ)
Center for Community Action &							
Environmental Justice - P.O. Box							Califronia Complete
33124 - Riverside, CA 92519	33-0562082	501(c)(3)	29,500.	0.			Count-Census 2020 (CCAEJ)
Central Illinois Foodbank							
P.O. Box 8228							Healthy Foods
Springfield, IL 62791-8228	37-1106465	501(c)(3)	15,000.	0.			Distribution Program
Central Pennsylvania Food Bank							
3908 Corey Road							
Harrisburg, PA 17109	23-2202250	501(c)(3)	15,000.	0.			Food Security Network
Chaffey College Foundation							
5885 Haven Ave.				_			2019-2020 Scholarship
Rancho Cucamonga, CA 91737-3002	95-4095445	501(c)(3)	16,893.	0.			Distributions

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.)

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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
Chaffey College Foundation							
5885 Haven Ave.	05 4005445	$E 0 1 \langle z \rangle \langle 2 \rangle$	0 763	0.			2019–2020 Scholarship Distributions
Rancho Cucamonga, CA 91737-3002	95-4095445	501(c)(3)	8,763.	· ·			
Chaffey College Foundation							
5885 Haven Ave.							2019-2020 Scholarship
Rancho Cucamonga, CA 91737-3002	95-4095445	501(c)(3)	23,969.	0.			Distributions
Chattahoochee Riverkeeper, Inc.							
916 Joseph Lowery Blvd., NW,							
Puritan Mill, Suite 3 - Atlanta,							
GA 30319	58-2095413	501(c)(3)	25,000.	٥.			Neighborhood Water Watch
Chattanooga Area Food Bank							
2009 Curain Pole Road							
Chattanooga, TN 37406	62-0867645	501(c)(3)	14,993.	0.			Summer Sack Program
Child Advocates Of San Bernardino							Foster C.A.S.A. Alumni
County - P.O. Box 519 - Rialto, CA							Youth as Leaders &
92377	33-0362613	501(c)(3)	10,000.	0.			Advocates
Children's Fund, Inc.							
348 W. Hospitality Lane, Suite 110	22.0102006	-01(-)(2)	1 000				
San Bernardino, CA 92408	33-0193286	501(c)(3)	1,000.	0.			13th Annual Sports Faire
Children's Fund, Inc.							
348 West Hospitality Lane, Suite 11							
San Bernardino, CA 92408	33-0193286	501(c)(3)	10,000.	0.			For general support
San Bernardino, CA 52400	55 0195200	501(0)(3)	10,000.	••			roi general support
Chrysalis House, Inc.							
1589 Hill Rise Dr.							
Lexington, KY 40504	61-1012290	501(c)(3)	25,000.	0.			Chrysalis House, Inc.
City of Fullerton							Acquisition of property
303 W. Commonwealth Ave.							for West Coyote Hills
Fullerton, CA 92832	95-6000711	501(c)(3)	1,000,000.	0.			Nature Center

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Inland Empire Community Foundation Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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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
City of Hope							
Planned Giving, 1500 E. Duarte Road							
Duarte, CA 91010	95-3435919	501(c)(3)	15,933.	0.			Designated Distribution
City of Hope							
Planned Giving, 1500 E. Duarte Road	1						To support "Lions Dollars
Duarte, CA 91010	95-3435919	501(c)(3)	250.	0.			for Diabetes"
Coachella Valley Desert Disaster							
Preparedness Network - P.O. Box							California for All
12613 - Palm Desert, CA 91155	82-2702260	501(c)(3)	49,910.	0.			Emergency Preparedness
Coachella Valley Housing Coalition							
45-701 Monroe St., Suite G							
Indio, CA 92201	95-3814898	501(c)(3)	2,581.	0.			Designated Distribution
	55 5014050	501(0/(5/	2,301.	0.			
Coachella Valley Housing Coalition							Ballet Folklorico &
45-701 Monroe St., Suite G							Mariachi Music Dance
Indio, CA 92201	95-3814898	501(c)(3)	2,500.	0.			Program
			,				
Coachella Valley Housing Coalition							TCE-2020 Funders Alliance
45-701 Monroe St., Suite G							Collaboration(Coachella
Indio, CA 92201	95-3814898	501(c)(3)	50,000.	0.			Valley Housing Coalition)
Coachella Valley Housing Coalition							
45-701 Monroe St., Suite G							California For All
Indio, CA 92201	95-3814898	501(c)(3)	44,887.	0.			Emergency Preparedness
Coachella Valley Rescue Mission							For general support from
P.O. Box 10660, 47-470 Van Buren St							the Todd Barajas Legacy
Indio, CA 92202		501(c)(3)	40,000.	0.			Fund
	55 2001014		40,000.	0.			
College of the Desert Foundation							
43-500 Monterey Ave.							
Palm Desert, CA 92260	95-3829219	501(c)(3)	1,200.	0.			Scholarship

(f) Mothod of (a) Name and address of *i* . . .

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
College of the Desert Foundation							
43-500 Monterey Ave.							
Palm Desert, CA 92260	95-3829219	501(c)(3)	1,200.	0.			Scholarship
College of the Desert Foundation							
43-500 Monterey Ave.							
Palm Desert, CA 92260	95-3829219	501(c)(3)	1,200.	0.			Scholarship
College of the Desert Foundation 43-500 Monterey Ave.							2019-2020 Scholarship
Palm Desert, CA 92260	95-3829219	501(c)(3)	9,460.	0.			Distributions
	55 5025215	501(0)(3)	5,400.				
College of the Desert Foundation							
43-500 Monterey Ave.							2019-2020 Scholarship
Palm Desert, CA 92260	95-3829219	501(c)(3)	8,258.	0.			Distributions
College of the Desert Foundation							
43-500 Monterey Ave.							2019-2020 Scholarship
Palm Desert, CA 92260	95-3829219	501(c)(3)	3,600.	0.			Distributions
College of the Desert Foundation							
43-500 Monterey Ave.	95-3829219	501(c)(3)	9 452	0.			2019-2020 Scholarship Distributions
Palm Desert, CA 92260	95-3629219	501(C)(S)	8,452.	U.			
College of the Desert Foundation							
43-500 Monterey Ave.							
Palm Desert, CA 92260	95-3829219	501(c)(3)	2,500.	0.			For general support
<i>`</i> `			,				
Community Access Center							To support 97 modular
6848 Magnolia Ave., Suite 150							wheelchair ramp home
Riverside, CA 92506	33-0663807	501(c)(3)	10,000.	0.			installation projects
Community Access Center							
6848 Magnolia Ave., Suite 150							California for All
Riverside, CA 92506	33-0663807	501(c)(3)	50,000.	0.			Emergency Preparedness

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
Community Health Action Network							Nutrition Education
15000 - 7th St., Suite 208G							Program: For mothers with
Victorville, CA 92395	26-4255673	501(c)(3)	15,000.	0.			children 0-5 years old
Community Health Action Network							
15000 - 7th St., Suite 208G							California Complete
Victorville, CA 92395	26-4255673	501(c)(3)	30,000.	0.			Count-Census 2020
Community Health Action Network 15000 - 7th St., Suite 208G							California Complete
Victorville, CA 92395	26-4255673	501(c)(3)	79,712.	0.			Count-Census 2020 (CHAN)
Community Health Action Network 15000 – 7th St., Suite 208G Victorville, CA 92395	26-4255673	501(c)(3)	9,000.	0.			California Complete Count-Census 2020
Community SeniorServ, Inc. 1200 N. Knollwood Circle Anaheim, CA 92801	95-2771715	501(c)(3)	15,000.	0.			Meals on Wheels
Congregations Organized for							
Prophetic Engagement - 1505 W.							
Highland, Suite 1 - San							Califronia Complete
Bernardino, CA 92411	33-0938212	501(c)(3)	76,496.	0.			Count-Census 2020 (COPE)
Consejo de Federaciones Mexicanes en Norte America - 125 Paseo de la Plaza, 5th Floor - Los Angeles, CA							TCE-2020 Funders Alliance
90012	32-0154043	501(c)(3)	38,000.	0.			Collaboration (COFEM)
Consortium for Early Learning Services - 21250 Box Springs Road,							
Suite 113 - Moreno Valley, CA							California Complete
92557	33-0265253	501(c)(3)	9,000.	0.			Count-Census 2020
Copper Mountain College Foundation P.O. Box 1398 - 6162 Rotary Way Joshua Tree, CA 92252	95-3778234	501(c)(3)	5,000.	0.			2019-2020 Scholarship Distributions

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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
Copper Mountain College Foundation							
P.O. Box 1398 - 6162 Rotary Way							2019-2020 Scholarship
Joshua Tree, CA 92252	95-3778234	501(c)(3)	2,000.	0.			Distributions
Copper Mountain College Foundation							
P.O. Box 1398 - 6162 Rotary Way							2019-2020 Scholarship
Joshua Tree, CA 92252	95-3778234	501(c)(3)	2,449.	0.			- Distributions
			,				
Copper Mountain College Foundation							
P.O. Box 1398 - 6162 Rotary Way							Califronia Complete
Joshua Tree, CA 92252	95-3778234	501(c)(3)	5,500.	0.			Count-Census 2020
Council on American-Islamic							
Relations, Greater Los Angeles							
Area - 2189 W. Crescent Ave.,							California Complete
Suite F - Anaheim, CA 92801	77-0411194	501(c)(3)	40,929.	0.			Count- Censs 2020 (CAIR)
Council on American-Islamic							
Relations, Greater Los Angeles							
Area – 2189 W. Crescent Ave.,							California for All
Suite F - Anaheim, CA 92801	77-0411194	501(c)(3)	50,000.	0.			Emergency Preparedness
Cove Communities Senior							
Association - The Joslyn Center,							
73750 Catalina Way - Palm Desert,							
CA 92260	95-3622332	501(c)(3)	2,602.	0.			Designated Distribution
Cove Communities Senior							Update The Josyln
Association - The Joslyn Center,							Center's personnel
73750 Catalina Way - Palm Desert,							policies and performance
CA 92260	95-3622332	501(c)(3)	10,000.	٥.			review process
Cove Communities Senior							
Association - The Joslyn Center,							
73750 Catalina Way - Palm Desert,							
CA 92260	95-3622332	501(c)(3)	6,000.	0.			Agency Distribution
Covenant House of West Virginia.							
Inc 600 Shrewsbury St							Covenant House Food
	31-1015583	501(c)(3)	15 000	0.			
Charleston, WV 25301	21-1012202		15,000.	υ.			Pantry

Schedule I (Form 990)

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
Crafton Hills College Foundation 11711 Sand Canyon Road Yucaipa, CA 92399	23-7314077	501(c)(3)	2,000.	0.			To fund 2 scholarships.
Crafton Hills College Foundation 11711 Sand Canyon Road Yucaipa, CA 92399	23-7314077	501(c)(3)	5,000.	0.			2019-2020 Scholarship Distributions
Crafton Hills College Foundation 11711 Sand Canyon Road Yucaipa, CA 92399	23-7314077	501(c)(3)	6,789.	0.			2019-2020 Scholarship Distributions
Crystal Cathedral Ministries 4445 Alton Pkwy. Irvine, CA 92604	95-2651592	501(c)(3)	10,000.	0.			Designated Distribution
Delaware Nature Society P.O. Box 700 Hockessin, DE 19707	51-6018321	501(c)(3)	24,460.	0.			Delaware Nature Society - 2019 Docket 3
Desert Arc 73-255 Country Club Drive Palm Desert, CA 92260	95-6006700	501(c)(3)	10,000.	0.			To support sensory activities for clients in wheelchairs
Desert Blind & Handicapped Association, Inc. – 471 E. Tahquitz Way, Suite 218 – Palm Springs, CA 92262	23-7259517	501(c)(3)	10,000.	0.			Program Evaluation: Survey Design, Data Collection/Analysis Reporting
Desert Stroke Rehabilitation Foundation - 2800 E. Alejo Road - Palm Springs, CA 92262	45-2460205	501(c)(3)	70,000.	0.			Agency Distribution
Desert Stroke Rehabilitation Foundation - 2800 E. Alejo Road - Palm Springs, CA 92262	45-2460205	501(c)(3)	200,000.	0.			Agency Distribution

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95-4352112 501(c)(3)

Jacobson

- Rancho Mirage, CA 92270-3221

Part II Continuation of Grants and Other	-	overnments and Orga		nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Desert Stroke Rehabilitation							
Foundation - 2800 E. Alejo Road -							Agency Distribution for
Palm Springs, CA 92262	45-2460205	501(c)(3)	250,000.	0.			Construction Costs
Desert Stroke Rehabilitation							
Foundation - 2800 E. Alejo Road -							Agency Distribution for
Palm Springs, CA 92262	45-2460205	501(c)(3)	100,000.	0.			Construction Costs
Desert Stroke Rehabilitation							
Foundation - 2800 E. Alejo Road -							
Palm Springs, CA 92262	45-2460205	501(c)(3)	50,000.	0.			Agency Distribution
Desert Stroke Rehabilitation							
Foundation - 2800 E. Alejo Road -							
Palm Springs, CA 92262	45-2460205	501(c)(3)	60,000.	٥.			Agency Distribution
Desert Stroke Rehabilitation							
Foundation - 2800 E. Alejo Road -							
Palm Springs, CA 92262	45-2460205	501(c)(3)	100,000.	0.			Agency Distribution
	45 2400205	501(0)(5)	100,000.				Strategic Planning and
Dezart Performs							Capital
611 S. Palm Canyon Dr., Suite 7538							CampaignFeasibility
Palm Springs, CA 92264	01-0965335	501(c)(3)	10,000.	0.			Analysis
Dollars for Scholars							
P.O. Box 1178	44 4550645		10.000				2019-2020 Scholarship
Riverside, CA 92502-1178	41-1778615	501(c)(3)	10,000.	0.			Distributions
Education Through Music							
122 E. 42nd St., Suite 1501							Education Through Music -
New York, NY 10168	13-3613210	501(c)(3)	25,000.	0.			2019 Docket 3
Eisenhower Medical Center							For general support from
Foundation - 39000 Bob Hope Drive							For general support from Deborah and Arthur
Foundacion - 55000 bob hope Drive							Desoran anu Arthur

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Inland Empire Community Foundation

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Schedule I (Form 990) Inland Em Part II Continuation of Grants and Other	-	nunity Found		mited Ctates (Cab			3-0748536 Page
(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
Eisenhower Medical Center Foundation – 39000 Bob Hope Drive – Rancho Mirage, CA 92270-3221	95-4352112	501(c)(3)	5,000.	0.			To support the Women's Philanthropy Group annua giving campaign
El Sol Neighborhood Educational Center – P.O. Box 449 – San Bernardino, CA 92402	33-0552297	501(c)(3)	15,000.	0.			Census 2020: Facilitate Regional Census Outreach Table, Convene Organizations
El Sol Neighborhood Educational Center – P.O. Box 449 – San Bernardino, CA 92402	33-0552297	501(c)(3)	44,581.	0.			California Complete Count- Census 2020(El Sol)
El Sol Neighborhood Educational Center – P.O. Box 449 – San Bernardino, CA 92402	33-0552297	501(c)(3)	54,076.	0.			Funders Alliance-Census 2020 Collaboration(El Sol)
Empowering Success Now 7940 Cherry Ave., Suite 201 Fontana, CA 92336	45-2988312	501(c)(3)	40,224.	0.			California Complete Count- Census 2020 (Empowering Success Now)
End Hunger in Calvert County 141 Schooner Dr., Suite 11 Prince Frederick, MD 20678	80-0456174	501(c)(3)	15,000.	0.			End Hunger Food Distribution
Evergreen Memorial Historic Cemetery – 4414 14th St. – Riverside, CA 92501	55-0803994	501(c)(3)	3,000.	0.			To support the fundraising project campaign
Evergreen Memorial Historic Cemetery – 4414 14th St. – Riverside, CA 92501	55-0803994	501(c)(3)	10,000.	0.			Designated Distribution
Evergreen Memorial Historic Cemetery – 4414 14th St. – Riverside, CA 92501	55-0803994	501(c)(3)	1,300.	0.			To provide water funding

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
EveryStep Hospice							
3000 Easton Blvd.							
Des Moines, IA 50317	42-1093718	501(c)(3)	25,000.	0.			Hopspice Charity Care
			, -	-			
Family Assistance Program							To support shelter and
15075 7th St.							therapy for victims of
Victorville, CA 92395	33-0107971	501(c)(3)	10,000.	0.			human trafficking
Family Health Partnership Clinic							
410 E. Congress							Family Health Partnership
Crystal Lake, IL 61014	36-4277029	501(c)(3)	25,000.	0.			Clinic – 2019 Docekt 3
Family Service Association of							
Redlands - 612 Lawton St							
Redlands, CA 92374	95-1655614	501(c)(3)	5,000.	0.			Designated Distribution
Family Service Association of							
Redlands - 612 Lawton St				_			_
Redlands, CA 92374	95-1655614	501(c)(3)	7,500.	0.			For general support
Family Service Association of							To support INJ1700006 and
Western Riverside County - 21250							other cases; distribute
Box Springs Road, Suite 212 -							gift cards for good
Moreno Valley, CA 92557	95-1803694	501(c)(3)	400.	0.			behavior/grades.
Family Service Association of							
Western Riverside County - 21250							
Box Springs Road, Suite 212 -							
Moreno Valley, CA 92557	95-1803694	501(c)(3)	4,914.	Ο.			Agency Distribution
Family Service Association of							
Western Riverside County - 21250							Funding for Driving
Box Springs Road, Suite 212 -							School for Case No.
Moreno Valley, CA 92557	95-1803694	501(c)(3)	449.	0.			IJN1800017
Family Service Association of							
Western Riverside County - 21250							
Box Springs Road, Suite 212 -							To purchase a laptop for
Moreno Valley, CA 92557	95-1803694	501(c)(3)	200.	0.			Case No. IJN1800023

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Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Scho	edule I (Form 990), Pa	rt II.) I	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 non-cash assistance	(h) Purpose of grant or assistance
Family Service Association of							Case No. INJ1900059:
Western Riverside County - 21250							Purchase of computer and
Box Springs Road, Suite 212 -							printer for college, fall
Moreno Valley, CA 92557	95-1803694	501(c)(3)	1,000.	Ο.			2019.
Family Service Association of							Census 2020: Facilitate
Western Riverside County - 21250							Regional Census Outreach
Box Springs Road, Suite 212 -							Table, Convene
Moreno Valley, CA 92557	95-1803694	501(c)(3)	15,000.	٥.			Organizations
Family Service Association of							
Western Riverside County - 21250							
Box Springs Road, Suite 212 -							To support JUST Court
Moreno Valley, CA 92557	95-1803694	501(c)(3)	450.	٥.			Program
Family Service Association of							To support Case No.
Western Riverside County - 21250							INJ1100365, other cases,
Box Springs Road, Suite 212 -							and birthday gift cards
Moreno Valley, CA 92557	95-1803694	501(c)(3)	400.	0.			for children
Family Service Association of							
Western Riverside County - 21250							Case No. IJN1700012: For
Box Springs Road, Suite 212 -							the purchase of a Dell
Moreno Valley, CA 92557	95-1803694	501(c)(3)	325.	Ο.			laptop
Family Service Association							
Highgrove / Norton Younglove							California Complete
Community Center, 459 Center St							Count-Census 2020 (Family
Riverside, C	95-1803694	501(c)(3)	82,867.	Ο.			Service Association)
Feeding America Riverside/San							
Bernardino Counties - 2950 A							Food distribution -
Jefferson St. – Riverside, CA							Perris Elementary School
92504	33-0072922	501(c)(3)	2,000.	0.			District
Feeding America Riverside/San							
Bernardino Counties - 2950 A							
Jefferson St Riverside, CA							Reaching Women and
, 92504	33-0072922	501(c)(3)	15,000.	0.			Children
Feeding America Riverside/San			,				
Bernardino Counties - 2950 A							
Jefferson St Riverside, CA							California Complete
92504	33-0072922	501(c)(3)	7,000.	0.			Count-Census 2020

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Feeding Kentucky							
P.O. Box 5522							
Frankfort, KY 40602	61-1398656	501(c)(3)	15,000.	0.			Farms to Food Banks
FeedMore, Inc.							Full Plates for Thriving
1415 Rhoadmiller St.							Communities: Produce
Richmond, VA 23230	54-1150923	501(c)(3)	15,000.	٥.			Purchase
Food Bank Coalition of San Luis							
Obispo County - 1180 Kendall Road	55 0010505		15 000				No-Cook Bags for Homeless
- San Luis Obispo, CA 93401	77-0210727	501(c)(3)	15,000.	0.			Residents
Food Bank for the Heartland							
10525 J St.							
Omaha, NE 68127	47-0637701	501(c)(3)	15,000.	0.			Fresh Produce Purchase
Food Bank of Delaware							
222 Lake Dr.							
Newark, DE 19702	51-0258984	501(c)(3)	14,741.	0.			Backpack Program
	51 0250501	501(0)(3)					
Food Bank Of Lincoln Inc.							
4840 Doris Bair Circle, Suite A							Mobile Food Pantry
Lincoln, NE 68504-1465	47-0640293	501(c)(3)	15,000.	0.			Distribution
Food Bank Siouxland							
1313 11th St.							BackPack Program: Food
Sioux City, IA 51105	42-1381516	501(c)(3)	15,000.	0.			for Kids
Food Finders Food Bank, Inc.							
1204 Greenbush St.							JP Lisack Community Food
Lafayette, IN 47904	31-1020198	501(c)(3)	15,000.	٥.			Program
Food In Need Of Distribution, Inc.							
(DBA) FIND Food Bank, P.O. Box 1008	8						TCE-2020 Funders Alliance
Indio, CA 92202	33-0006007	501(c)(3)	50,000.	0.			Collaboration (FIND)
	33 0000007		50,000.	· · ·			

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(a) Name and address of

organization or government

(b) EIN

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(c) IRC section

if applicable

				assistance	appraisal, other)	
Food in Need of Distribution						
(DBA) FIND Food Bank, 83775 Citrus						
Indio, CA 92201	33-0006007	501(c)(3)	2,500.	0.		For general support
		501(0)(0)	2,000.			
Food in Need of Distribution						
(DBA) FIND Food Bank, 83775 Citrus						
Indio, CA 92201	33-0006007	501(c)(3)	10,000.	0.		For general support
Forever Free Horse Rescue						
78-450 Avenue 41						
Indio, CA 92203	20-2759133	501(c)(3)	5,000.	0.		For general support
			-,	•		
Fredricksburg Regional Food Bank						
3631 Lee Hill Dr.						
Fredericksburg, VA 22408	54-1255013	501(c)(3)	15,000.	0.		Pantry Distribution
FreeStore, Inc						
1020 24th St.						Power Pack Weekend
West Des Moines, IA 50266	20-2732304	501(c)(3)	15,000.	0.		Feeding Program
Friends of Prospect Park						
P.O. Box 566	22 7009290	$E 0 1 \langle z \rangle \langle 2 \rangle$	6 0 2 7	0.		Designated Distribution
Redlands, CA 92373	23-7008280	501(c)(3)	6,027.	0.		Designated Distribution
Friendship Shelter, Inc.						Housing Focus Shelter
P.O. Box 4252						Initiative - Friendship
Laguna Beach, CA 92652	33-0219404	501(c)(3)	25,000.	0.		Shelter, Inc.
			, ,			, , , , , , , , , , , , , , , , , , , ,
Girl Scouts of San Gorgonio						
Council - 1751 Plum Lane -						
Redlands, CA 92374	95-1967727	501(c)(3)	3,557.	0.		Designated Distribution
Girl Scouts of San Gorgonio						Girl Scouts of San
Council - 1751 Plum Lane -	05 1067707		05 000			Gorgonio Council - 2019
Redlands, CA 92374	95-1967727	DOT(C)(3)	25,000.	0.		Docket 3

(d) Amount of

cash grant

(e) Amount of

non-cash

assistance

(f) Method of

valuation

(book, FMV,

(g) Description of

non-cash assistance

Schedule I (Form 990)

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(h) Purpose of grant

or assistance

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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
Grand Canyon University P.O. Box 11097 Phoenix, AZ 85061	20-3356009	501(c)(3)	4,000.	0.			Scholarship for 2019-2020 Academic Year
Grand Canyon University P.O. Box 11097 Phoenix, AZ 85061	20-3356009	501(c)(3)	5,000.	0.			Scholarship for 2019-2020 Academic Year
Great Harvest Community Center 1480 E. Marshall Blvd., Unit 12 San Bernardino, CA 92404	47-1503166	501(c)(3)	8,775.	0.			TCE-2020 Funders Alliance Collaboration (Great Harvest Community Center)
Great Harvest Community Center 1480 E. Marshall Blvd., Unit 12 San Bernardino, CA 92404	47-1503166	501(c)(3)	1,225.	0.			Weingart Foundation-Funders Alliance Census (Great Harvest Community Center)
Greater Riverside Dollars for Scholars – P.O. Box 1178 – Riverside, CA 92502–1178	41-1778615	501(c)(3)	3,562.	0.			Designated scholarship
Greater Riverside Dollars for Scholars – P.O. Box 1178 – Riverside, CA 92502–1178	41-1778615	501(c)(3)	9,999.	0.			2019 Scholarship distribution
Growing Inland Achievement 10630 Town Center Dr., Suite 118 Rancho Cucamonga, CA 91730	33-0741793	501(c)(3)	10,000.	0.			Community Outreach and Communications Print & Media Plan
Guide Dogs Of The Desert P.O. Box 1692 Palm Springs, CA 92263	23-7296531	501(c)(3)	15,657.	0.			Agency Distribution
Guide Dogs Of The Desert P.O. Box 1692 Palm Springs, CA 92263	23-7296531	501(c)(3)	100.	0.			For general support

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Guideposts Foundation							
39 Old Ridgebury Road, Suite 27							
Danbury, CT 06810	23-7442277	501(c)(3)	10,000.	0.			Designated Distribution
H. E. L. P. Inc Hope Empathy							
Love And Prayer - 53 S. 6th St.,							
P.O. Box 996 - Banning, CA 92220	95-3625645	501(c)(3)	2,750.	0.			To support the food bank,
H. E. L. P. Inc Hope Empathy							
Love And Prayer - 53 S. 6th St.,							To support food bank
P.O. Box 996 - Banning, CA 92220	95-3625645	501(c)(3)	3,000.	Ο.			distributions
Hawaii Food Bank							
2611 Kilihau St.							Food 4 Keiki Food
Honolulu, HI 96819	99-0220699	501(c)(3)	15,000.	0.			Purchase
Healthy Gulf							
P.O. Box 2245							
New Orleans, LA 70176	72-1447742	501(c)(3)	25,000.	0.			Communities At- Risk
Helping Harvest							
117 Morgan Dr.							
Reading, PA 19608	22-2456238	501(c)(3)	15,000.	0.			Weekender Program
Hemet Unified School District							For the purchase and
1791 W. Acacia Ave.							repair of K-12 musical
Hemet, CA 92545	52-1527174	501(c)(3)	6,357.	0.			instruments
Hemet Unified School District							Hemet H.S. ASB: Academic
1791 W. Acacia Ave.							Fine Arts, & Athletic
Hemet, CA 92545	52-1527174	501(c)(3)	20,000.	0.			Programs
High Desert Child, Adolescent &							
Family Services Center - P.O. Box							Tutoring and Counseling
3275 - Victorville, CA 92395	33-0103979	501(c)(3)	7,000.	0.			for At-Risk Youth

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Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (School	edule I (Form 990), Pa	art II.)	i
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
High Desert Community Foundation							
P.O. Box 2028							
Apple Valley, CA 92307	84-1179212	501(c)(3)	2,043.	0.			Agency distribution
High Desert Community Foundation							2019 \$1,000 Scholarship
P.O. Box 2028							distribution, plus fiscal
Apple Valley, CA 92307	84-1179212	501(c)(3)	1,300.	0.			sponsor fees
High Desert Community Foundation							
P.O. Box 2028 Apple Valley, CA 92307	84-1179212	501(c)(3)	900.	0.			2019 Agency Distribution
High Desert Community Foundation							
P.O. Box 2028	84-1179212	501(a)(2)	4 000	0.			2010 Agongy Distribution
Apple Valley, CA 92307	04-11/9212	501(C)(3)	4,000.	υ.			2019 Agency Distribution
High Desert Community Foundation P.O. Box 2028							
Apple Valley, CA 92307	84-1179212	501(c)(3)	8,000.	0.			2019 Agency Distribution
High Desert Community Foundation P.O. Box 2028							
Apple Valley, CA 92307	84-1179212	501(c)(3)	300.	0.			2019 Agency Distribution
High Desert Community Foundation P.O. Box 2028							
Apple Valley, CA 92307	84-1179212	501(c)(3)	10,000.	0.			2019 Agency Distribution
High Desert Community Foundation P.O. Box 2028							Agency distribution for ADA compliant tenant
Apple Valley, CA 92307	84-1179212	501(c)(3)	60,000.	0.			improvements
High Desert New Beginnings, Inc. P.O. Box 187							ASAP: After School Academic Push - Family
Barstow, CA 92312	77-0620311	501(c)(3)	15,000.	Ο.			Wellness and Education

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
Himalayan Cataract Project P.O. Box 55							ExpandingHigh Volume Cataract Care in Amhara
Waterbury, VT 05676	03-0362926	501(c)(3)	100,000.	0.			Region,Ethiopia
HIV + Aging Research Project -							
Palm Springs - 1775 E. Palm Canyon							Building Support Systems
Dr., Suite 110-349 - Palm Springs,							Capacity for Older Adults
CA 92264	47-3892886	501(c)(3)	10,000.	0.			with HIV
Holy Name of Jesus Catholic Community - 115 W. Olive Ave Redlands, CA 92373			10,000.	0.			For general support
Houston Food Bank 535 Portwall St. Houston, TX 77029	74-2181456	501(c)(3)	15,000.	0.			School Market
Humane Society of Pulaski County 14600 Colonel Glenn Road Little Rock, AR 72210	71-0415296	501(c)(3)	15,000.	0.			Veterinary Emergency and Specialty Medical Treatment
Humane Society of San Bernardino Valley – 374 W. Orange Show Road – San Bernardino, CA 92408	23-7078944	501(c)(3)	30,000.	0.			For the payment of veterinary costs incurred by needy senior citizens
Humane Society of San Bernardino Valley – 374 W. Orange Show Road – San Bernardino, CA 92408	23-7078944	501(c)(3)	500.	0.			Senior Charity of Choice: Humane Society of San Bernardino Valley
Idyllwild Help Center P.O. Box 660 Idyllwild, CA 92549	33-0496201	501(c)(3)	700.	0.			Scholarships and sports equipment for youth from low-income families
Idyllwild Help Center P.O. Box 660 Idyllwild, CA 92549	33-0496201	501(c)(3)	4,000.	0.			Utility assistance

33-0496201

33-0496201

organization or government

Idyllwild Help Center

Idyllwild Help Center

Idyllwild, CA 92549

Idyllwild, CA 92549

P.O. Box 660

P.O. Box 660

Idyllwild School PTA smARTS Program - P.O. Box 97 - Idyllwild, CA 92549	33-0217241	501(c)(3)	800.	0.	To support a school field trip to the McCallum Theater in Palm Desert.
	33-0217241	501(c)(3)	4,500.	0.	To support the smARTS artist-led classes for grades K-8th
Inland Congregations United For Change – 1441 N. D St., Suite 208 – San Bernardino, CA 92405	33-0480298	501(c)(3)	71,400.	0.	California Complete Count- Census 2020 (Inland Congregations United for Change
Inland Congregations United For Change – 1441 N. D St., Suite 208 – San Bernardino, CA 92405	33-0480298	501(c)(3)	85,088.	0.	Califrornia Census 2020 (ICIJ)
Inland Empire Community Collaborative, Inc 3927 La Hacienda Dr San Bernardino, CA 92404	81-2607226	501(c)(3)	55,000.	0.	In support of Funder's Alliance "Changing The Narrative Nonprofit Workshops
Inland Empire Immigrant Youth Collective - 521 N. Euclid Ave Ontario, CA 91762	95-4657497	501(c)(3)	17,480.	0.	California Complete Count-Census 2020
Inland Empire Labor Council 1074 E La Cadena Dr., Suite 1 Riverside, CA 92507	95-3174831	501(c)(3)	47,793.	0.	California Complete Count-Census 2020 (Inland Empire Labor Council)

cash grant

10,075

10,000

non-cash

assistance

0

0

valuation

(book, FMV,

appraisal, other)

non-cash assistance

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 (b) EIN (c) IRC section (d) Amount of (f) Method of (e) Amount of (g) Description of if applicable

501(c)(3)

501(c)(3)

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(h) Purpose of grant

or assistance

children's healthcare and

To support relief efforts

for Cranston Fire victims

medical access program

To support indigent

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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
Inland Empire United Way							
9644 Hermosa Ave.							
Rancho Cucamonga, CA 91730	33-0502676	501(c)(3)	5,311.	0.			Designated Distribution
Inland Valley Hope Partners							
1753 N. Park Ave.							Food Security Program,
Pomona, CA 91768	95-2674837	501(c)(3)	15,000.	0.			Sova Program Center
Inland Vineyard Christian Fellowship - 935 N. McKinley St							
Corona, CA 92879	33-0655628	501(c)(3)	2,250.	0.			To support the food bank.
Inland Vineyard Christian							
Fellowship - 935 N. McKinley St Corona, CA 92879	33-0655628	501(c)(3)	3,500.	0.			To support food bank distributions
	55 0055020	501(0)(3)	5,500.				
Inside the Outdoors Foundation							
P.O. Box 4							Stewardship - Inside the
Silverado, CA 92676	33-0373014	501(c)(3)	50,000.	0.			Outdoors Foundation
Interfaith Movement for Human							
Integrity - 310 8th St., Suite 310 - Oakland, CA 94607	91-2076672	501(c)(3)	13,000.	0.			Civic & Public Benefit
Iowa State University			,				
Office of Student Financial Aid,							
0210 Beardshear Hall, 515 Morrill							Scholarship for 2019-2020
Road - Am	42-6004224	501(c)(3)	5,000.	0.			Academic Year
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	14,809.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	19,668.	٥.			Agency distribution

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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
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111	02 5011001	501 () ())	10.025				
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	19,937.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	14,455.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	1,869.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	19,937.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	110,187.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	21,558.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area – 69–710 Hwy. 111 – Rancho Mirage, CA 92270	23-7211881	501(c)(3)	29,722.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	19,659.	0.			Agency distribution
Jewish Federation of Palm Springs and Desert Area - 69-710 Hwy. 111 - Rancho Mirage, CA 92270	23-7211881	501(c)(3)	18,816.	0.			Agency distribution

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Vewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	7,525.	Ο.			Agency distribution
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	5,023.	0.			Agency distribution
			· · ·				
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	21,020.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	13.	Ο.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	17.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	94.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111	23-7211881	$E 0 1 \langle a \rangle \langle 2 \rangle$	17.	0.			Agangu digtuibution
– Rancho Mirage, CA 92270	23-7211001	501(c)(3)	17.	· · ·			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	12.	0.			Agency distribution
Nameno Milage, CA 32270	23-7211001	501(0)(3)	12.	۰.			ngency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
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(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(2)	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Vewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	17.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	18.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	25.	0.			Agency distribution
Tourish Rodonation of Dola Conings							
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111	22 7211001	$E_{01}(-)(2)$	17.	0.			Desney distribution
- Rancho Mirage, CA 92270	23-7211881	501(C)(3)	17.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
– Rancho Mirage, CA 92270	23-7211881	501(c)(3)	16.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
- Rancho Mirage, CA 92270	23-7211881	501(c)(3)	4.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
	23-7211881	501(a)(2)	6.	0.			Agency distribution
Rancho Mirage, CA 92270	23-7211001	501(c)(3)	0.	0.			Agency distribution
Jewish Federation of Palm Springs							
and Desert Area - 69-710 Hwy. 111							
Rancho Mirage, CA 92270	23-7211881	501(c)(3)	18.	0.			Agency distribution
John W. North High School							Senior Charity of Choi
1550 3rd St.							John W North HS North
Riverside, CA 92507	08-9783752	501(c)(3)	1,000.	0.			Star Newspaper

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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
John W. North High School							Senior Charity of Choice:
1550 3rd St.							John W North HS Dance
Riverside, CA 92507	08-9783752	501(c)(3)	500.	٥.			Team
John W. North High School							Senior Charity of Choice:
1550 3rd St.							John W North HS Dance
Riverside, CA 92507	08-9783752	501(c)(3)	500.	٥.			Team
John W. North High School							
1550 3rd St.							Senior Charity of Choice:
Riverside, CA 92507	08-9783752	501(c)(3)	1,000.	0.			John W North Dance Team
John W. North High School							Senior Charity of Choice:
1550 3rd St.							John W North HS Dance
Riverside, CA 92507	08-9783752	501(c)(3)	500.	0.			Team
John W. North High School							Senior Charity of Choice:
1550 3rd St.							John W North HS North
Riverside, CA 92507	08-9783752	501(c)(3)	500.	٥.			Star Newspaper
John W. North High School							Senior Charity of Choice:
1550 3rd St.							John W North HS Rusty
Riverside, CA 92507	08-9783752	501(c)(3)	1,000.	0.			Huskies Robotics FRC#6960
Junior League of Riverside							
3714 Sunnyside Dr.							
Riverside, CA 92506	95-2017219	501(c)(3)	2,500.	0.			Agency Distribution
Junior League of Riverside							
3714 Sunnyside Dr.							
Riverside, CA 92506	95-2017219	501(c)(3)	7,371.	0.			Agency Distribution
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	50,000.	٥.			Agency Distribution

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
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	34,411.	0.			Agency Distribution
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							Agency Distribution -
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	67,958.	0.			balance
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							Agency Distribution for
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	150,000.	0.			Museum Renovation
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	100,000.	0.			Agency Distribution
				- •			
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	75,000.	0.			Agency Distribution
Jurupa Mountains Discovery Center							
7621 Granite Hill Dr.							Agency distribution to
Jurupa Valley, CA 92509	95-2411667	501(c)(3)	75,000.	0.			support capital projects
Kiwanis Club of Riverside Welfare							
Foundation - P.O. Box 20827 -							
Riverside, CA 92516-2697	95-6061167	501(c)(3)	8,272.	0.			Agency Distribution
							Additional distribution
Kiwanis Club of Riverside Welfare							requested 6/3/19,
Foundation - P.O. Box 20827 -							approved by TCF Board
Riverside, CA 92516-2697	95-6061167	501(c)(3)	25,000.	0.			7/8/19
L. A. Family Housing Corporation							L.A. Famiy Housing
7843 Lankershim Blvd.							Corporation - 2109 Docke
North Hollywood, CA 91605	95-3920560	501(c)(3)	50,000.	0.			3

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Part II Continuation of Grants and Other				lined States (Sch	edule I (I 0111 990), F2	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 non-cash assistance	(h) Purpose of grant or assistance
Laguna Food Pantry							
20652 Laguna Canyon Road							
Laguna Beach, CA 92651	33-0593551	501(c)(3)	15,000.	0.			Food Distribution Program
Leadership Council for Justice and							
Accountability - 2210 San Joaquin							California Complete
St Fresno, CA 93721	46-1517800	501(c)(3)	17,791.	0.			Count-Census 2020
LEAP Learning Center							
1221 Wass St.							
Tustin, CA 92780	26-1320187	501(c)(3)	15,000.	0.			LEAP Learning Center
Loma Linda Academy							Loma Linda Academy Annual
10656 Anderson St.							Scholarship Distribution
Loma Linda, CA 92354-2199	95-1831069	501(c)(3)	69,411.	0.			for 2019 - 2020
	95-1851089	501(0)(3)	05,411.	0.			
Loma Linda Univ. Children's							
Hospital Foundation - P.O. Box							Vision 2020 - Children's
2000 - Loma Linda, CA 92354	33-0565591	501(c)(3)	18,000.	Ο.			Hospital Tower
Loma Linda University							
Office of Financial Aid, 11139							
Anderson St Loma Linda, CA							2019-2020 Scholarship
92350	95-1816009	501(c)(3)	5,000.	0.			Distributions
Loma Linda University							
Office of Financial Aid, 11139							2019-2020 Scholarship
Anderson St Loma Linda, CA							Distributions: School of
92350	95-1816009	501(c)(3)	5,951.	Ο.			Nursing
Loma Linda University							
Office of Financial Aid, 11139							
Anderson St Loma Linda, CA							2019-2020 Scholarship
92350	95-1816009	501(c)(3)	5,351.	0.			Distributions
Louisiana SPCA							
1700 Mardi Gras Blvd.							Low Income Pet Owner
New Orleans, LA 70114	72-0471368	501(c)(3)	20,000.	0.			Support

Inland Empire Community Foundation Sche Part

Schedule I (Form 990) Inland Em	3	3-0748536 Page 1					
Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt 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
Loving All Animals 83496 51st Ave.							
Coachella, CA 92236	26-3841119	501(c)(3)	10,000.	0.			For general support
	20 3011115	551(6)(5)	10,000.	.			
Lowcountry Food Bank							
2864 Azalea Dr.							Fresh Produce for All in
Charleston, SC 29405	57-0751835	501(c)(3)	15,000.	0.			Coastal South Georgia
Lutheran Social Services Of							
Southern California - LSS							
Community Care Centers, 3772 Taft				_			_
St Riverside, CA 92503	95-2225798	501(c)(3)	5,000.	0.			For general support
Making Hope Happen Foundation 777 N. F St.							
San Bernardino, CA 92410	33-0122847	501(c)(3)	10,000.	0.			Organization Assessment
Making Hope Happen Foundation 777 N. F St. San Bernardino, CA 92410	33-0122847	501(c)(3)	50,000.	0.			scholarship distribution for academic school year 2019 - 2020
MANNA FoodBank							Food Distribution for
627 Swannanoa River Road	58-1514800	501(a)(2)	15 000	0.			People in Need in Western North Carolina
Asheville, NC 28805	58-1514800	501(c)(3)	15,000.	0.			
Martha's Village and Kitchen, Inc.							
83791 Date Ave.							
Indio, CA 92201	33-0777892	501(c)(3)	53,614.	0.			Designated Distribution
Mary S. Roberts Pet Adoption							For the payment of
Center - 6165 Industrial Ave							veterinary costs incurred
Riverside, CA 92504	95-1458062	501(c)(3)	15,000.	0.			by needy senior citizens
Mary S. Roberts Pet Adoption							
Center - 6165 Industrial Ave	05 1459000	F01(-)(2)	4 110	_			For general support
Riverside, CA 92504	95-1458062	DUT(C)(3)	4,119.	0.			For general support

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mary S. Roberts Pet Adoption Center - 6165 Industrial Ave Riverside, CA 92504	95-1458062	501(c)(3)	1,500.	0.			To help develop a program for service animals within the center.
Menifee Valley Community Cupboard P.O. Box 2253 Menifee, CA 92586	33-0735874	501(c)(3)	15,000.	0.			Menifee Valley Community Cupboard
Mi Familia Vota Education Fund 1140 E. Washington St., Building C Phoenix, AZ 85034	20-0182824	501(c)(3)	49,800.	0.			California Complete Count-Census 2020
Mi Familia Vota Education Fund 1140 E. Washington St., Building C Phoenix, AZ 85034 Michelle's Place, Breast Cancer	20-0182824	501(c)(3)	65,195.	0.			California Complete Count-Census 2020 (MI Familia Vota Education Fund)
Resource Center - 41669 Winchester Road, Suite 101 - Temecula, CA 92590	33-0951216	501(c)(3)	14,249.	0.			California For All Emergency Preparedness
Millionaire Mind Kids 13554 Delaware Road Apple Valley, CA 92308	20-4418118	501(c)(3)	15,000.	0.			21st Learning and Family Resource Community
MIND Research Institute 111 Academy, Suite 100 Irvine, CA 92617	33-0798804	501(c)(3)	50,000.	0.			ST Math - Mind Research Institute
Mizell Senior Center, Inc. 480 S. Sunrise Way Palm Springs, CA 92262	95-3464835	501(c)(3)	63,691.	0.			2019 Annual Distribution in 12 Monthly Installments
Mizell Senior Center, Inc. 480 S. Sunrise Way Palm Springs, CA 92262	95-3464835	501(c)(3)	170,000.	0.			Agency Distribution / Wire Transfer

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
Mizell Senior Center, Inc.							
480 S. Sunrise Way							
Palm Springs, CA 92262	95-3464835	501(c)(3)	60,000.	٥.			Agency Distribution
Mizell Senior Center, Inc.							
480 S. Sunrise Way							Agency Distribution via
Palm Springs, CA 92262	95-3464835	501(c)(3)	200,000.	٥.			Wire Transfer
Mizell Senior Center, Inc.							
480 S. Sunrise Way							
Palm Springs, CA 92262	95-3464835	501(c)(3)	1,500.	0.			For general support
Montgomery Area Food Bank, Inc.							
521 Trade Center St.							Mobile Pantry (MP)
Montgomery, AL 36108	63-0931846	501(c)(3)	15,000.	٥.			Program
MORE HEALTH, Inc.							
3821 Henderson Blvd.							
Tampa, FL 33629	59-3397472	501(c)(3)	25,000.	0.			Super Smiles
Moses House Ministries							Employment Development
P.O. Box 2033							Program for Low-Income
Victorville, CA 92393	33-0568537	501(c)(3)	15,000.	0.			Parents
Moses House Ministries							
P.O. Box 2033							Employment Development
Victorville, CA 92393	33-0568537	501(c)(3)	15,000.	0.			Program
Notiveting lation Londowski							Tamag Turring
Motivating Action Leadership							James Irvine Foundation-Census
Opportunity - 936 N. Paloma Ave	82-4711809	501(c)(3)	20.000	0.			Collaboration (MALO)
Ontario, CA 91764	27-4111003		20,000.	U.			Sunrise Center: To
Mourning Sun Children's Foundation							sustain grief support for
17100 Bear Valley Road, No. 533							children, teens, and
Victorville, CA 92395	20-2388514	501(c)(3)	18,000.	٥.			adults

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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	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
				assistance	(book, FMV, appraisal, other)		
							For the purchase of music
My City Youth Center							instruments including
P.O. Box 28							keyboards and percussion
Hemet, CA 92546	91-2106283	501(c)(3)	10,200.	0.			instruments
MSJC Foundation			,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							50% Residuum from Sam and
CA 92583-	95-3871238	501(c)(3)	1,698.	٥.			Ellie Norton Gift Annuity
MSJC Foundation			,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	2,019.	٥.			Designated Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							2019-2020 Scholarship
CA 92583-	95-3871238	501(c)(3)	8,447.	٥.			Distributions
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							2019-2020 Scholarship
CA 92583-	95-3871238	501(c)(3)	9,979.	٥.			Distributions
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							2019-2020 Scholarship
CA 92583-	95-3871238	501(c)(3)	2,886.	0.			Distributions
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							2019-2020 Scholarship
CA 92583-	95-3871238	501(c)(3)	10,214.	٥.			Distributions
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	1,989.	0.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	318.	0.			2019 Agency Distribution

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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.)

	1	1		· · · · ·	1	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 non-cash assistance	(h) Purpose of grant or assistance
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	19,000.	٥.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	2,000.	0.			2019 Agency Distribution
MSJC Foundation			· · ·				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	14,000.	0.			2019 Agency Distribution
MSJC Foundation			,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	6,000.	0.			2019 Agency Distribution
MSJC Foundation			,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	226.	0.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	226.	0.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	13,000.	0.			2019 Agency Distribution
MSJC Foundation			,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	3,173.	0.			2019 Agency Distribution
MSJC Foundation			, ,				
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	228.	٥.			2019 Agency Distribution

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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
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	6,000.	٥.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	10,000.	٥.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	4,528.	0.			2019 Agency Distribution
MSJC Foundation							
Mt. San Jacinto College District,							
1499 N. State St San Jacinto,							
CA 92583-	95-3871238	501(c)(3)	2,000.	٥.			2019 Agency Distribution
Natural History Museum of Los Angeles County - 900 Exposition Blvd Los Angeles, CA 90007	95-6132185	501(c)(3)	25,000.	0.			School and Teacher Program
Nebraska Humane Society							
8929 Fort St.							
Omaha, NE 68134	47-0378997	501(c)(3)	25,000.	0.			Microchipping
							Weingart
Nehemiah Charitable Fund							Foundation-Funders
P.O. Box 7711							Alliance Census(Nehemiah
Redlands, CA 92375	45-2587928	501(c)(3)	15,000.	0.			Charitable Fund)
Nehemiah Charitable Fund							Galifannia Dan All
P.O. Box 7711	45 0507000	= 01(-1)(2)	26 500				California For All
Redlands, CA 92375	45-2587928	501(c)(3)	36,509.	0.			Emergency Preparedness
Neuro Vitality Center							
2800 E. Alejo Road							To support the Endowment
Palm Springs, CA 92262	95-3402464	501(c)(3)	50,000.	0.			Fund
	55 5402404	Por(0)(3)	1 50,000.	۰ ۰		l	r

Schedule I (Form 990)

					Olive Crest -
95-2877102	501(c)(3)	50,000.	0.		3
					To support "A
					Tuscany – Inl
95-2877102	501(c)(3)	5,000.	0.		Communities

Schedule I (Form 990)

Riverside, CA 92507

(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
Neuro Vitality Center							
2800 E. Alejo Road							
Palm Springs, CA 92262	95-3402464	501(c)(3)	1,100.	0.			For General Support
New Hope Village Inc.							
100 W. Fredricks							California Complete
Barstow, CA 92311	01-0653116	501(c)(3)	14,000.	0.			Count- Census 2020
New Life-Line Food Ministry							New Life-Line Food
New Life Chapel – Hesperia							Ministry: To provide
Foursquare Church, 10184 Seventh							non-perishable groceries
Ave. – Hesperia,	95-3484242	501(c)(3)	10,000.	0.			to hungry neighbors
Northampton Survival Center							
265 Prospect St.							Basic Nutritional Needs
Northampton, MA 01060	04-2774166	501(c)(3)	15,000.	٥.			Program
Notre Dame High School							Senior Charity of Choice
7085 Brockton Ave.							Notre Dame HS Mock Tria
Riverside, CA 92506	95-3293896	501(c)(3)	1,000.	٥.			Team
							Notre Dame High School
Notre Dame High School							Annual Scholarship
7085 Brockton Ave.							Distribution for 2019 -
Riverside, CA 92506	95-3293896	501(c)(3)	70,000.	0.			2020
Oak Park River Forest Food Pantry							Weekend Bags: Bridging
848 Lake St.							the weekend hunger gap
Oak Park, IL 60301	27-2018997	501(c)(3)	15,000.	0.			for children
, —							
Olive Crest							
555 Technology Court, Suite 300							Olive Crest - 2019 Dock
Riverside, CA 92507	95-2877102	501(c)(3)	50,000.	0.			3
Olive Crest							To support "A Night In
555 Technology Court, Suite 300							Tuscany - Inland & Dese:
	05 0055100						

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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
One Future Coachella Valley							To support the Behavioral
41-550 Eclectic St., Suite 200	81-3653698	$E 0 1 \langle z \rangle \langle 2 \rangle$	150 000	0.			Health Workforce
Palm Desert, CA 92260	81-3023038	501(c)(3)	150,000.	0.			Alignment Team
One Future Coachella Valley							OneFuture CV Scholarship
41-550 Eclectic St., Suite 200							& Student Leadership
Palm Desert, CA 92260	81-3653698	501(c)(3)	2,000.	0.			Program - Scholarship
	01-3033090	501(0)(3)	2,000.	0.			
One Future Coachella Valley							
41-550 Eclectic St., Suite 200							2019 - 2020 Scholarship
Palm Desert, CA 92260	81-3653698	501(c)(3)	254,191.	0.			distribution
One Future Coachella Valley							
41-550 Eclectic St., Suite 200							2019 - 2020 Scholarship
Palm Desert, CA 92260	81-3653698	501(c)(3)	165,309.	0.			distribution
Ontario-Montclair Schools							Promise Scholars -
Foundation - 950 W. D St., P.O.							Scholarship distribution
Box 1426 - Ontario, CA 91762	90-0716973	501(c)(3)	50,000.	0.			for 2019 - 2020
			, -				
OPARC							
9029 Vernon Ave.							
Montclair, CA 91763	95-1943396	501(c)(3)	186,300.	0.			Agency distribution
OPARC							
9029 Vernon Ave.							
Montclair, CA 91763	95-1943396	501(c)(3)	53,869.	0.			Agency distribution
Oregon Food Bank							
7900 NE 33rd Dr.							Food Acquisition and
Portland, OR 97211	93-0785786	501(c)(3)	15,000.	0.			Distribution
Organizacion En California De							
Lideres Campesinas Inc - 2101 S.							
Rose Avenue, Suite A - Oxnard, CA							TCE-2020 Funders Alliance
93033	95-4611282	501(c)(3)	45,000.	0.			Collaboration

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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
Ozarks Food Harvest							
P.O. Box 5746							
Springfield, MO 65801	43-1426384	501(c)(3)	15,000.	0.			Weekdn Backpack Program
Palo Verde Community College							
District – One College Dr. –							2019-2020 Scholarship
Blythe, CA 92225	33-0078920	501(c)(3)	5,000.	0.			Distributions
Palo Verde Community College							
District - One College Dr							2019-2020 Scholarship
Blythe, CA 92225	33-0078920	501(c)(3)	1,871.	0.			Distributions
Palo Verde Community College							
District – One College Dr. –							2019-2020 Scholarship
Blythe, CA 92225	33-0078920	501(c)(3)	2,000.	0.			Distributions
Palo Verde Community College							
District - One College Dr							2019-2020 Scholarship
Blythe, CA 92225	33-0078920	501(c)(3)	1,915.	0.			Distributions
							To support
Peppermint Ridge							wheelchair-accessible recreation and
825 Magnolia Ave. Corona, CA 92879	95-2409851	501(c)(3)	7,481.	0.			socialization program
	95-2409051	501(0)(3)	7,401.	0.			
Perris Valley Historical and							
Museum Association - P.O. Box 343							
- Perris, CA 92572	95-3838654	501(c)(3)	6,678.	0.			Agency Distribution
Phelan-McDermid Syndrome							
Foundation - P.O. Box 1153, 8							
Sorrento Drive - Ospry, FL 34229	04-3673104	501(c)(3)	25,000.	0.			In honor of Kali Kurtz
Pomona Economic Opportunity Center							
P.O. Box 2496							Undocumented Mentorship
Pomona, CA 91769	95-4657497	501(c)(3)	2,500.	٥.			Academy (UMA)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pomona Economic Opportunity Center							
P.O. Box 2496							Undocumented Mentorship
Pomona, CA 91769	95-4657497	501(c)(3)	2,500.	0.			Academy (UMA)
							TCE-2020 Funders Alliance
Pomona Economic Opportunity Center							Collaboration (Pomona
P.O. Box 2496		F01()())	20.000				Economic Opportunity
Pomona, CA 91769	95-4657497	501(c)(3)	30,000.	0.			Center)
Project Concern International							
(PCI) - 5151 Murphy Canyon Road,							Dignidad III - Project
Suite 320 - San Diego, CA 92123	95-2248462	501(c)(3)	41,667.	0.			Concern International
Suite 520 - San Diego, CA 52125	95-2240402	501(0)(3)	41,007.	0.			
Pueblo Unido Community Development							
Corporation - 78150 Calle Tampico,							California For All
Suite 214 - La Quinta, CA 92253	26-3547211	501(c)(3)	49,950.	0.			Emergency Preparedness
Ramona Humane Society							For the payment of
690 Humane Way							veterinary costs incurred
San Jacinto, CA 92582	23-7374470	501(c)(3)	20,000.	0.			by needy senior citizens
Rancho Damacitas Children and							Empowerment Village –
Family Services - 38950 Mesa Road							Rancho Damacitas Children
- Temecula, CA 92592	95-3551068	501(c)(3)	25,000.	0.			and Family Services
Rapha House International							
P.O. Box 1569	05 0500416	F01()())	50.000				Rapha House International
Joplin, MO 64802	27-2523416	501(c)(3)	50,000.	0.			- 2019 Docket 3
RCCD Foundation							
4800 Magnolia Ave.							2019-2020 Scholarship
Riverside, CA 92506	95-2993847	501(c)(3)	16,893.	0.			Distributions
	JJ 2001		10,055.				
RCCD Foundation							
4800 Magnolia Ave.							RCCD: Riverside 2019-2020
Riverside, CA 92506	95-2993847	501(c)(3)	15,113.	0.			Scholarship Distributions

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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	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of non-cash	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
organization or government		if applicable	cash grant	assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
RCCD Foundation							RCCD: Moreno Valley
4800 Magnolia Ave.							2019-2020 Scholarship
Riverside, CA 92506	95-2993847	501(c)(3)	6,085.	0.			Distributions
RCCD Foundation							
4800 Magnolia Ave.							RCCD: Norco 2019-2020
Riverside, CA 92506	95-2993847	501(c)(3)	6,457.	0.			Scholarship Distributions
RCCD Foundation							
4800 Magnolia Ave.							2019-2020 Scholarship
Riverside, CA 92506	95-2993847	501(c)(3)	10,355.	0.			Distributions
RCCD Foundation							
4800 Magnolia Ave.							RCCD: Riverside 2019-2020
Riverside, CA 92506	95-2993847	501(c)(3)	15,469.	0.			Scholarship Distribution
RCCD Foundation							RCCD: Moreno Valley
4800 Magnolia Ave.							- 019-2020 Scholarship
Riverside, CA 92506	95-2993847	501(c)(3)	6,228.	0.			Distribution
RCCD Foundation							
4800 Magnolia Ave.							RCCD: Norco 2019-2020
Riverside, CA 92506	95-2993847	501(c)(3)	6,609.	0.			Scholarship Distribution
							In support of Funder's
Reach Out West End, Inc.							Alliance "Changing The
1126 W. Foothill Blvd., Suite 250	95-2642747	501(c)(3)	125 000	0.			Narrative Nonprofit Workshops
Upland, CA 91786	95-2042747	501(0)(3)	135,000.	0.			workshops
Reach Out West End, Inc.							
1126 W. Foothill Blvd., Suite 250							California For All
Upland, CA 91786	95-2642747	501(c)(3)	49,831.	0.			Emergency Preparedness
Rebuilding Together Mountain							Organizational Capacity
Communities - P.O. Box 3540 - Blue							Building and
Jay, CA 92317	93-1154194	501(c)(3)	10,000.	0.			Restructuring

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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
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			To support the purchase of refugee cars.
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			For the purchase of refugee cars.
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			To support the purchase of refugee cars.
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			To support the purchase of refugee cars.
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			To support the purchase of refugee cars
Redlands Area Interfaith Council 743 Esther Way Redlands, CA 92373	33-0278617	501(c)(3)	10,000.	0.			To support the purchase of refugee cars
Redlands Community Hospital Foundation - P.O. Box 3391 - Redlands, CA 92373-0742	95-3368018	501(c)(3)	10,000.	0.			Designated Distribution
Redlands Community Hospital Foundation - P.O. Box 3391 - Redlands, CA 92373-0742	95-3368018	501(c)(3)	30,000.	0.			For general support
Redlands Community Music Association, Inc. dba Redlands Bowl Performing Art - 168 S. Eureka St Redlands, CA 92373	95-6006074	501(c)(3)	6,027.	0.			Designated Distribution

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Schedule I (Form 990) Inland Empire Community Foundation Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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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
Redlands Community Music							
Association, Inc. dba Redlands							
Bowl Performing Art - 168 S.							
Eureka St Redlands, CA 92373	95-6006074	501(c)(3)	5,000.	0.			For general support
Redlands Day Nursery							
1643 Plum Lane							
Redlands, CA 92374	95-1775156	501(c)(3)	5,000.	0.			Designated Distribution
	55 1775150	501(0/(3/	5,000.	0.			Designated Distribution
Redlands Historical Museum							
Association - P.O. Box 470 -							
Redlands, CA 92373	33-0932158	501(c)(3)	10,000.	0.			For general support
Redlands Horticultural and							
Improvement Society - P.O. Box							
9235 - Redlands, CA 92375	33-0632491	501(c)(3)	6,027.	0.			Designated Distribution
Redlands Symphony Association							
(RSA) - 112 E. Olive Ave., Suite C							
- Redlands, CA 92373	33-0055395	501(c)(3)	6,027.	0.			Designated Distribution
Redwood Empire Food Bank							
3990 Brickway Blvd.							Senior Security
Santa Rosa, CA 95403	68-0121855	501(c)(3)	15,000.	0.			Initiative
			,	- •			
River Bend Foodbank							
4010 Kimmel Dr.							Food Purchase for the
Davenport,, IA 52802	36-3147342	501(c)(3)	14,999.	0.			Hungry
Riverside Art Museum							
3425 Mission Inn Ave.							
Riverside, CA 92501	95-1094692	501(c)(3)	721.	0.			Designated Distribution
Riverside Art Museum							
3425 Mission Inn Ave.				_			
Riverside, CA 92501	95-1094692	pu1(c)(3)	2,209.	0.			Designated Distribution

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

932241 04-01-19

(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
Riverside Art Museum 3425 Mission Inn Ave.							To support the 100 X 100
Riverside, CA 92501	95-1094692	501(c)(3)	10,450.	0.			Campaign
Riverside Art Museum 3425 Mission Inn Ave.	05 1004600	501 () (2)	0.500				
Riverside, CA 92501	95-1094692	501(c)(3)	2,500.	0.			For general support For the design and
Riverside Arts Council P.O. Box 1662 Riverside, CA 92502	95-3265946	501(c)(3)	7,500.	0.			installation of a mosaic mural in memory of Angela Gomez
	55 5205510	551(5)(5)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.			
Riverside Arts Council P.O. Box 1662 Riverside, CA 92502	95-3265946	501(c)(3)	900.	0.			To fund materials expenses for mural
Riverside Community College Foundation - 4800 Magnolia Ave Riverside, CA 92506-1299	95-2993847	501(c)(3)	1,762.	0.			Designated scholarship
Riverside Community College Foundation - 4800 Magnolia Ave							
Riverside, CA 92506-1299	95-2993847	501(c)(3)	1,399.	0.			Scholarship Distribution
Riverside Community College Foundation – 4800 Magnolia Ave. – Riverside, CA 92506–1299	95-2993847	501(c)(3)	5,000.	0.			To support student scholarships.
Riverside Community Health Foundation - 4275 Lemon St Riverside, CA 92501	33-0374018	501(c)(3)	10,000.	0.			Designated Distribution
Riverside Educational Enrichment Foundation - 3380 14th St Riverside, CA 92501	33-0585854	501(c)(3)	1,611.	0.			Designated Distribution

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04-01-19	

Part II Continuation of Grants and Other	-	overnments and Orga		nited States (Sch	edule I (Form 990) Pa		55-0740550 Page
(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
Riverside Educational Enrichment Foundation - 3380 14th St							Distribution to complete 2019-2020 Bonnie G. Polis Teaching Enrichment Grant
Riverside, CA 92501	33-0585854	501(c)(3)	16,843.	0.			Funding
Riverside Educational Enrichment Foundation - 3380 14th St Riverside, CA 92501	33-0585854	501(c)(3)	12,000.	0.			For general support
Riverside Metropolitan Museum 3580 Mission Inn Ave.	05 6000760	E01(-)(2)	0.067				Decimated Distribution
Riverside, CA 92501	95-6000769	501(c)(3)	8,067.	0.			Designated Distribution
Riverside Public Library Foundation - P.O. Box 349 -							
Riverside, CA 92502-0349	33-0780130	501(c)(3)	4,682.	0.			Designated Distribution
Riverside Public Library Foundation - P.O. Box 349 -							
Riverside, CA 92502-0349	33-0780130	501(c)(3)	4,223.	0.			Agency Distribution
Riverside Public Library 3581 Mission Inn Ave.			0.001				
Riverside, CA 92501	95-6000769	501(c)(3)	96,791.	0.			DESIG
Riverside Public Library 3581 Mission Inn Ave.							
Riverside, CA 92501	95-6000769	501(c)(3)	51,076.	0.			DESIG
Riverside Public Library 3581 Mission Inn Ave.							
Riverside, CA 92501	95-6000769	501(c)(3)	7,206.	0.			Designated Distribution
Riverside Temple Beth El 2675 Central Ave.							
Riverside, CA 92506	33-0655309	501(c)(3)	9,735.	0.			Agency Distribution

2019-2020 Scholarship 0 Distributions

(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,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					appraisal, other)		
Roadrunner Food Bank of New Mexico							
5840 Office Blvd. NE	05 0050505		15 000				Healthy Food For Hungry
Albuquerque, NM 87109 Ronald McDonald House Charities of	85-0278525	501(c)(3)	15,000.	0.			People
Southern California/Loma Linda -							
The Inland Empire Ronald McDonald							To support building
House, 11365 Anderson St Loma	95-3167869	501(c)(3)	5,000.	0.			expansion
iouse, 11365 Anderson St Loma	95-3107809	501(0)(3)	5,000.	υ.			expansion
Safe Haven Family Shelter							
1234 3rd Avenue South							
Nashville, TN 37210	62-1807653	501(c)(3)	25,000.	0.			Shelter to Housing
	02 100,000	551(5)(5)	20,000.				
Salvation Army-Redlands							
P.O. Box 26							
Redlands, CA 92373	33-0644995	501(c)(3)	5,311.	0.			Designated Distribution
,							
Salvation Army-Riverside							
3695 First St.							
Riverside, CA 92501	94-1156347	501(c)(3)	5,311.	0.			Designated Distribution
,			,				
Samaritan Counseling Center							Behavioral Education an
1126 W. Foothill Blvd., Suite 110							Management Services
Upland, CA 91786	95-3160005	501(c)(3)	6,700.	0.			(BEAMS)
San Antonio Food Bank							
5200 Enrique M. Barrera Pkwy.							
San Antonio, TX 78227	74-2122979	501(c)(3)	15,000.	0.			Summer Meals for Kids
San Bernardino Community							
Scholarship Association - 777 N. F							2019-2020 Scholarship
St San Bernardino, CA 92410	23-7358556	501(c)(3)	10,000.	0.			Distribution
San Bernardino Community							
	1	1	1			1	Lava sasa di di di

Schedule I (Form 990)

Scholarship Association - 777 N. F

St. - San Bernardino, CA 92410

10,000.

23-7358556 501(c)(3)

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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.)

				, i i i i i i i i i i i i i i i i i i i		,	
(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
San Bernardino Valley College							
Foundation - Resource Development,							
Comm. Relations, 701 S. Mt. Vernon							
Ave San Bernardino, CA 92410	23-7321533	501(c)(3)	1,000.	0.			To fund a scholarship.
San Bernardino Valley College							
Foundation - Resource Development,							
Comm. Relations, 701 S. Mt. Vernon							2019-2020 Scholarship
Ave. – San Bernardino, CA 92410	23-7321533	501(c)(3)	17,772.	0.			Distributions
San Bernardino Valley College							
Foundation - Resource Development,							
Comm. Relations, 701 S. Mt. Vernon							2019-2020 Scholarship
Ave. – San Bernardino, CA 92410	23-7321533	501(c)(3)	3,779.	0.			Distributions
San Bernardino Valley College							
Foundation - Resource Development,							
Comm. Relations, 701 S. Mt. Vernon							2019-2020 Scholarship
Ave. – San Bernardino, CA 92410	23-7321533	501(c)(3)	16,447.	0.			Distributions
San Francisco State University							
Bursar's Office, ADM 155, 1600							
Holloway Ave. – San Francisco, CA							Scholarship for 2019-2020
94132	94-1384645	501(c)(3)	5,000.	0.			Academic Year
							To support Youth
Santa Claus Inc. of Greater San							Enrichment Services
Bernardino - P.O. Box 2642 - San							Program for impoverished
Bernardino, CA 92406	95-6101275	501(c)(3)	10,075.	0.			children
Santa Rosa Plateau Foundation							To support Santa Rosa
P.O. Box 941							Plateau fire relief
Murrieta, CA 92564	71-0946697	501(c)(3)	10,000.	0.			efforts
Save Oswit Canyon, Inc.							
1610 Dunham Road							
Palm Springs, CA 92264	83-2006672	501(c)(3)	5,000.	0.			For general support
Second Harvest Food Bank of the							
Mahoning Valley - 2805 Salt							
Springs Road - Youngstown, OH							
44509	34-1380074	501(c)(3)	15,000.	0.			Food For Hungry Families

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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
Second Harvest Foodbank of							
Southern Wisconsin - 2802 Dairy							
Dr Madison, WI 53718	39-1490691	501(c)(3)	15,000.	0.			Food Purchase
Seniors in Service of Tampa Bay,							
Inc 1306 W. Sligh Ave Tampa,							
FL 33604	59-2422975	501(c)(3)	25,000.	٥.			Senior Companion Program
Service Center for Independent							
Life - 107 S. Spring St							California Complete
Claremont, CA 91711	95-3536676	501(c)(3)	19,100.	٥.			Count-Census 2020
			,				James Irvine
SIGMA BETA XI, INC							Foundation-Census
14340 Elsworth St., Suite 104							Collaboration (Sigma Beta
Moreno Valley, CA 92553	30-0779014	501(c)(3)	20,000.	0.			XI,INC)
SIGMA BETA XI, INC							California Complete
, 14340 Elsworth St., Suite 104							Count- Census 2020 (SIGMA
Moreno Valley, CA 92553	30-0779014	501(c)(3)	93,042.	0.			BETA XI,INC)
SIGMA BETA XI, INC							
14340 Elsworth St., Suite 104							California For All
Moreno Valley, CA 92553	30-0779014	501(c)(3)	49,171.	0.			Emergency Preparedness
Soaring High Academy							
8826 Lebec Road							Physical activity class
Phelan, CA 92371	45-3979594	501(c)(3)	5,000.	0.			sponsorships
Southwest Indian Foundation							
100 W. Coal Ave.	95 0003500	$E 0 1 \langle z \rangle \langle 2 \rangle$	F 000	0.			
Gallup, NM 87301	85-0203522	501(c)(3)	5,000.	U.			For general support
Special Olympics Inland Empire							Special Olympics Schools
Region - 41880 Kalmia St., Suite							Program in Riverside
155 - Murrieta, CA 92562	95-4538450	501(c)(3)	2,500.	0.			County

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
Special Olympics Inland Empire Region – 41880 Kalmia St., Suite 155 – Murrieta, CA 92562	95-4538450	501(c)(3)	2,500.	0.			Special Olympics Schools Program in Riverside County
St. Louis Area Foodbank 70 Corporate Woods Dr. Bridgeton, MO 63044	43-1253102	501(c)(3)	14,925.	0.			Fighting Hunger, Feeding Hope
Stanford University Financial Aid Montag Hall, 355 Galvez St. Stanford, CA 94305-6106	94-1156365	501(c)(3)	8,816.	0.			Designated Distribution
Stanford University Financial Aid Montag Hall, 355 Galvez St. Stanford, CA 94305-6106	94-1156365	501(c)(3)	5,003.	0.			Scholarship for 2019-2020 Academic Year
Starting Over, Inc. 1390 W. 6th St., Suite 100 Corona, CA 92882	90-0455003	501(c)(3)	56,182.	0.			Funders Alliance-Census 2020 Collaboration (Starting Over, INC)
Success Institute 10722 Arrow Route, Suite 516 Rancho Cucamonga, CA 91730	33-0705363	501(c)(3)	15,000.	0.			Leadership Connection: Train H.S. seniors and young adults 18-24 leadership skills
Success Institute 10722 Arrow Route, Suite 516 Rancho Cucamonga, CA 91730	33-0705363	501(c)(3)	1,500.	0.			To support scholarships
Surrey Services For Seniors, Inc. 60 Surrey Way Devon, PA 19333	23-2610145	501(c)(3)	25,000.	0.			Services for seniors
The Carolyn E. Wylie Center for Children, Youth & Families - 4164 Brockton Ave Riverside, CA 92501	93-0670286	501(c)(3)	29,744.	0.			California for All Emergency Preparedness

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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.)

The Carter Center One CopeNhill, 453 Preedes Pkwy. S8-1454716 501(c)(3) 5,000. 0. Atlanta, GA 30307 S8-1454716 501(c)(3) 5,000. 0. The Empowerment Center 27262 Via Industria S6-2497243 501(c)(3) 8,500. 0. The Empowerment Center 27262 Via Industria S6-2497243 501(c)(3) 8,500. 0. The Empowerment Center 27262 Via Industria S6-2497243 501(c)(3) 1,750. 0. The Empowerment Center 27262 Via Industria S6-2497243 501(c)(3) 1,750. 0. The Empowerment Center 27262 Via Industria S6-2497243 501(c)(3) 1,700. 0. The Food Bank of Western NA, Inc. P.O. Bax 160 S6-2497243 501(c)(3) 15,000. 0. The Heat and Warmth Pund (THAM) 35 Griewoid St., Suite 200 S8-266524 501(c)(3) 15,000. 0. The Liber Stanctuary Pain Springe 55 S. Sumice War, Suite 203 S8-266524 501(c)(3) 50,000. 0. The Liber Stanctuary Pain Springe 55 S. Sumice War, Suite 203 S8-266524 501(c)(3) 10,000. 0. Pain Springe, CA 22244 46-2867323 501(c)(3) 10,000. 0. Pianning 4 Teplesentation Pain Springe, CA 22244 46-2867323 501(c)(3) 10,000. 0. <td< th=""><th>(a) Name and address of organization or government</th><th>(b) EIN</th><th>(c) IRC section if applicable</th><th>(d) Amount of cash grant</th><th>(e) Amount of non-cash assistance</th><th>(f) Method of valuation (book, FMV, appraisal, other)</th><th>(g) Description of non-cash assistance</th><th>(h) Purpose of grant or assistance</th></td<>	(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
Atlanta, GA 30307 58-1454716 501(c)(3) 5,000. 0. Por general support The Empowerment Center 7252 Via Industria Sol(c)(3) 8,500. 0. Youth Leadership Academy: Bolf-Bateem, Financial Literacy, Social Skills The Empowerment Center 56-2497243 Sol(c)(3) 1,750. 0. Brengths Discovery 27262 Via Industria 56-2497243 Sol(c)(3) 1,750. 0. Brengths Discovery 27262 Via Industria 56-2497243 Sol(c)(3) 1,750. 0. Brengths Discovery 27262 Via Industria 56-2497243 Sol(c)(3) 1,700. 0. Brengths Discovery Program 56-2497243 Sol(c)(3) 1,700. 0. Brengths Discovery Program 56-2497243 Sol(c)(3) 1,700. 0. Brengths Discovery Program 64-2497243 Sol(c)(3) 1,700. 0. Brengths Discovery Program 64-2497243 Sol(c)(3) 15,000. 0. Brengths Discovery Brengths Sol(c)(3) 15,000. 0.	The Carter Center							
The Empowerment Center Youth Leadership Academy: 27262 Via Industria 56-2497243 501(c)(3) 8,500. 0. The Empowerment Center 27262 Via Industria Strengths Discovery The Empowerment Center 56-2497243 501(c)(3) 1,750. 0. Premerula, CA 92590 56-2497243 501(c)(3) 1,750. 0. The Empowerment Center 27262 Via Industria Strengths Discovery Tremerula, CA 92590 56-2497243 501(c)(3) 1,700. 0. Program Strengths Discovery Program The Food Bank of Western NA, Inc. Prod Name Prod Name P.O. Rox 160 04-2751023 501(c)(3) 15,000. 0. The Heat and Warmth Fund (THAW) Strengths 201 Strengths 201 Prod Acquisition and Distribution The LoBT Sanctuary Palm Springe Strengths 201 Strengths 201 Donor Development Palm Springe, CA 92264 45-2867323 S01(c)(3) 10,000. 0. Palming 4 Emplementation Motivation 4 Change Program for low-income Palming 5 Statistic Way, Suite 203 S01(c)(3) 10,000. 0. Palming 4 Emplementation Motivation 4 Change Program for low-income Palming 4 Emplementation	One Copenhill, 453 Freedom Pkwy.							
27262 Via Industria Temerula, CA 9259056-2497243501(c)(3)8,500.0.\$elf-Esteen, Financial Literacy, Social SkillsThe Empowerment Center 27262 Via Industria Temecula, CA 9259056-2497243501(c)(3)1,750.0.Strengtha Discovery ProgramThe Empowerment Center 27262 Via Industria Prescula, CA 9259056-2497243501(c)(3)1,750.0.Strengtha Discovery ProgramThe Empowerment Center 27262 Via Industria Prescula, CA 9259056-2497243501(c)(3)1,700.0.Strengtha Discovery ProgramThe Empowerment Center 27262 Via Industria Prescula, CA 9259056-2497243501(c)(3)1,700.0.Strengtha Discovery ProgramThe Food Bank of Western MA, Inc. P.O. Box 16064-2751023501(c)(3)15,000.0.Food Acquisition and pistributionThe Heat and Warmth Fund (THAW) 533 Criswold St., suite 200 Detroit, NT 4822638-2646924501(c)(3)50,000.0.TheHeat and Warmth Fund (THAW) - 2019 Detroit, NT 48226The LGBT Sanctuary Palm Springs 555 S. Suite 203 - VictorVille, CA 22395501(c)(3)10,000.0.Donor Development Planmig 4 Implementation Planmig 4 Implementation Program for low-Income Single familiesThe Links Poundation, Inc. 1200 Massachusetts Ave., NWSuite(3)10,000.0.Single families	Atlanta, GA 30307	58-1454716	501(c)(3)	5,000.	0.			For general support
Pemerula, CA 9259056-2497243501(c)(3)8,500.0.Literacy, Social SkillsThe Empowerment Center 27362 Via IndustriaSol(c)(3)1,750.0.Strengths Discovery ProgramThe Empowerment Center 27362 Via IndustriaSol(c)(3)1,750.0.Strengths Discovery ProgramThe Empowerment Center 27362 Via IndustriaSol(c)(3)1,700.0.Strengths Discovery ProgramThe Empowerment Center 27362 Via IndustriaSol(c)(3)1,700.0.Strengths Discovery ProgramThe Food Bank of Western NA, Inc. F.O. Box 160 Hatfield, MA 0103804-2751023Sol(c)(3)15,000.0.Food Acquisition and DistributionThe Heat and Warmth Fund (THAW) 355 Griswold St., Suite 200 Detroit, MI 48226Selectory Sol(c)(3)Sol(c)(0)0.Food Acquisition Planing & Sol(c)(3)Sol(c)(3)Sol(c)(0)The LoGF Sanctuary Pain Springs S55 S. Sunrise Way, Suite 203B Paim Springs, CA 92264Sol(c)(3)Sol(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA St2395Sol(c)(3)10,000.0.Solici Solici So	The Empowerment Center							Youth Leadership Academy:
The Empowerment Center27.620127.62 Yia Industria56-2497243501(c)(3)1,750.0.The Empowerment Center27.62 Yia IndustriaStrengths Discovery27.62 Yia Industria56-2497243501(c)(3)1,700.0.The Empowerment Center27.62 Yia IndustriaStrengths Discovery27.62 Yia Industria56-2497243501(c)(3)1,700.0.The Empowerment Center56-2497243501(c)(3)1,700.0.27.62 Yia Industria56-2497243501(c)(3)1,700.0.The Food Bank of Western MA, Inc.Food Acquisition and DistributionFood Acquisition and DistributionThe Heat and Warmth Fund (THAW)55501(c)(3)15,000.0.755 Grisevid St., Suite 20038-2646924501(c)(3)50,000.0.Petroit, MI 4822638-2646924501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - VictorVille, CA 9239545-4234788501(c)(3)10,000.0.The Links Foundation, Inc. 1200 Massachusetts Ave., NWNotivation 4Change Bernardino Valley (CA)	27262 Via Industria							Self-Esteem, Financial
27262 Via Industria Tenecula, CA 9259056-2497243501(c)(3)1,750.0.Strengths Discovery ProgramThe Empowerment Center 27262 Via Industria Tenecula, CA 9259056-2497243501(c)(3)1,700.0.Strengths Discovery ProgramThe Food Bank of Western MA, Inc. P.O. Box 160 Hatfield, MA 0103856-2497243501(c)(3)1,700.0.ProgramThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 48226501(c)(3)15,000.0.Strengths Discovery ProgramThe LGBT Sanctuary Palm Springs 555 S. sunrise Way, suite 2038 Palm Springs, CA 92264S01(c)(3)10,000.0.Planning & Implementation Planning & Implementation Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., suite 203 - Victorville, CA 92395S01(c)(3)10,000.0.Story of the san single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NWS01(c)(3)10,000.0.Story of the san sernardino Valley (CA)	Temecula, CA 92590	56-2497243	501(c)(3)	8,500.	0.			Literacy, Social Skills
27262 Via Industria Tenecula, CA 9259056-2497243501(c)(3)1,750.0.Strengths Discovery ProgramThe Empowerment Center 27262 Via Industria Tenecula, CA 9259056-2497243501(c)(3)1,700.0.Strengths Discovery ProgramThe Food Bank of Western MA, Inc. P.O. Box 160 Hatfield, MA 0103856-2497243501(c)(3)1,700.0.ProgramThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 48226501(c)(3)15,000.0.Strengths Discovery ProgramThe LGBT Sanctuary Palm Springs 555 S. sunrise Way, suite 2038 Palm Springs, CA 92264S01(c)(3)10,000.0.Planning & Implementation Planning & Implementation Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., suite 203 - Victorville, CA 92395S01(c)(3)10,000.0.Story of the san single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NWS01(c)(3)10,000.0.Story of the san sernardino Valley (CA)	The Empowerment Center							
Penecula, CA 9259056-2497243501(c)(3)1,750.0.ProgramThe Empowerment Center 27262 Via Industria Temecula, CA 9259056-2497243501(c)(3)1,700.0.Strengths Discovery ProgramThe Food Bank of Western MA, Inc. P.O. Box 160 Hatfield, MA 0103856-2497243501(c)(3)1,700.0.Food Acquisition and DistributionThe Heat and Warmth Fund (THAW) 535 offiswold St., Suite 200 Detroit, MI 4822604-2751023501(c)(3)15,000.0.Food Acquisition and DistributionThe LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 52264601(c)(3)50,000.0.Planning & Implementation Poor Poor Poelopment Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.Notivation 4 Change Frogram for low-income single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NWK54-4234788501(c)(3)10,000.0.Foo support the San Bernardino Valley (CA)								Strengths Discovery
The Empowerment Center 27262 Via Industria Temecula, CA 9259056-2497243501(c)(3)1,700.0.The Food Bank of Western MA, Inc. P.O. Box 160 Haffield, MA 0103856-2497243501(c)(3)1,700.0.The Food Bank of Western MA, Inc. P.O. Box 160 Haffield, MA 0103804-2751023501(c)(3)15,000.0.The Heat and Warmth Fund (THAW) 535 Griewold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226436-2867323501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc 1500 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc 1500 7th St., Suite 203 - Victorville, CA 92395501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc. 1200 Massachusetts Ave., NWTo support the San Bernardino Valley (CA)To support the San Bernardino Valley (CA)	Temecula, CA 92590	56-2497243	501(c)(3)	1,750.	0.			
27262 Via Industria Temecula, CA 9259056-2497243501(c)(3)1,700.0.Strengths Discovery FrogramThe Food Bank of Western MA, Inc. P.O. Box 160 Hatfield, MA 0103804-2751023501(c)(3)15,000.0.Food Acquisition and DistributionThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.FneHeat and Warmth Fund (THAW) - 2019 Docket 3The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Flanning & Implementation Program for low-income single familiesThe Lighthouse of Restoration 0rganization, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.Motivation 4 Change Program for low-income single families	· · ·			, ,				
Temecula, CA 92590 56-2497243 501(c)(3) 1,700. 0. Program The Food Bank of Western MA, Inc. P.O. Box 160 Production Production <td< td=""><td>The Empowerment Center</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	The Empowerment Center							
The Food Bank of Western MA, Inc. P.O. Box 160Food Acquisition and Pood Acquisition and DistributionHatfield, MA 0103804-2751023501(c)(3)15,000.0.The Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226436-2867323501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.The Links Foundation, Inc. 1200 Massachusetts Ave., NW501(c)(3)10,000.0.0.	27262 Via Industria							Strengths Discovery
P.O. Box 160 Hatfield, MA 0103804-2751023501(c)(3)15,000.0.Food Acquisition and pistributionThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.Image: Constraint of the state o	Temecula, CA 92590	56-2497243	501(c)(3)	1,700.	0.			Program
P.O. Box 160 Hatfield, MA 0103804-2751023501(c)(3)15,000.0.Food Acquisition and pistributionThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.Image: Constraint of the state o	The Food Bank of Western MA Inc.							
Hatfield, MA 0103804-2751023501(c)(3)15,000.0.DistributionThe Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.TheHeat and Warmth Fund (THAW) - 2019 Docket 3The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Donor Development Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.The Links Foundation, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.								Food Acquisition and
The Heat and Warmth Fund (THAW) 535 Griswold St., Suite 200 Detroit, MI 4822638-2646924501(c)(3)50,000.0.TheHeat and Warmth Fund (THAW) - 2019 Docket 3The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th 81., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.The Links Foundation, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.	Hatfield MA 01038	04-2751023	501(c)(3)	15,000.	0.			-
Detroit, MI 4822638-2646924501(c)(3)50,000.0.(THAW) - 2019 Docket 3The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Donor Development Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.Motivation 4 Change Program for low-income single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NWLow Law Law Law Law Law Law Law Law Law La								
The LGBT Sanctuary Palm Springs 555 S. Sunrise Way, Suite 203B Palm Springs, CA 92264de-2867323501(c)(3)10,000.0.Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.The Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 92395Motivation 4 Change Program for low-income single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.	,	20.0545004		50.000				
555 S. Sunrise Way, Suite 203B Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Donor Development Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.Motivation 4 Change Program for low-income single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NW45-4234788501(c)(3)10,000.0.To support the San Bernardino Valley (CA)	Detroit, MI 48226	38-2646924	501(c)(3)	50,000.	0.			(THAW) - 2019 Docket 3
Palm Springs, CA 9226446-2867323501(c)(3)10,000.0.Planning & ImplementationThe Lighthouse of Restoration Organization, Inc 15000 7th St., Suite 203 - Victorville, CA 9239545-4234788501(c)(3)10,000.0.Motivation 4 Change Program for low-income single familiesThe Links Foundation, Inc. 1200 Massachusetts Ave., NWKernardino Valley (CA)To support the San Bernardino Valley (CA)	The LGBT Sanctuary Palm Springs							
The Lighthouse of Restoration Motivation Organization, Inc 15000 7th Motivation 4 Change St., Suite 203 - Victorville, CA Program for low-income 92395 45-4234788 501(c)(3) 10,000. 0. The Links Foundation, Inc. To support the San Bernardino Valley (CA)	555 S. Sunrise Way, Suite 203B							Donor Development
Organization, Inc 15000 7th Motivation 4 Change St., Suite 203 - Victorville, CA 45-4234788 501(c)(3) 10,000. 0. Notivation 4 Change 92395 45-4234788 501(c)(3) 10,000. 0. Notivation 4 Change The Links Foundation, Inc. 10,000. 0. Notivation 4 Change Single families 1200 Massachusetts Ave., NW Notivation 4 Change Notivation 4 Change Single families	Palm Springs, CA 92264	46-2867323	501(c)(3)	10,000.	0.			Planning & Implementation
St., Suite 203 - Victorville, CA 45-4234788 501(c)(3) 10,000. 0. Program for low-income single families Program for low-income single families 10,000. 0. 0. Image: String of the st	-							
92395 45-4234788 501(c)(3) 10,000. 0. single families The Links Foundation, Inc. 1200 Massachusetts Ave., NW Image: Comparison of the second dependence	-							
The Links Foundation, Inc. 1200 Massachusetts Ave., NW Bernardino Valley (CA)	,							-
1200 Massachusetts Ave., NW Bernardino Valley (CA)	92395	45-4234788	501(c)(3)	10,000.	0.			single families
1200 Massachusetts Ave., NW Bernardino Valley (CA)	The Links Foundation Inc							To support the San
	Washington, DC 20005	52-1170830	501(c)(3)	10,000.	0.			Chapter Programs

Schedule I (Form 990)

	33-0748536	Page 1
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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
The Nature Conservancy							
201 Mission St., 4th Floor							Ten Mile River Estuary
San Francisco, CA 94105	53-0242652	501(c)(3)	2,000,000.	0.			Restoration Project
The Phoenix Foundation							To fund funeral expenses
P.O. Box 803							(90%) and administrative
Apple Valley, CA 92307	30-0491720	501(c)(3)	10,000.	Ο.			expenses (10%)
The Racine County Food Bank							
2000 DeKoven Ave., Unit #1							Emergency Food
Racine, WI 53403-2481	39-1269080	501(c)(3)	14,985.	0.			Distribution
The Regents of the University of							
California, on behalf of its							
Riverside Cam - University of							California Complete Count
California, Riverside, 245	95-6006142	501(c)(3)	121,900.	0.			- Census 2020
The Salvation Army-San Bernardino							
Citadel Corps - Path to							
Prosperity, 730 W. Spruce St							
San Bernardino, CA 92410	94-1153647	501(c)(3)	5,311.	0.			Designated Distribution
The Salvation Army-San Bernardino							
Citadel Corps - Path to							
Prosperity, 730 W. Spruce St							To support food bank
San Bernardino, CA 92410	94-1153647	501(c)(3)	500.	0.			distributions
							Community Theatre Arts
The Umbrella Latch-Key Program							Education, Writing;
15864 Rimrock Road							Acting, Producing, and
Apple Valley, CA 92307	33-0654542	501(c)(3)	15,000.	0.			Film Making
The University of Iowa Foundation							
Levitt Center for University							
Advancement, One West Park Road -							
Iowa City, IA	42-0796760	501(c)(3)	25,000.	0.			For General Support
The University of Iowa Foundation							
Levitt Center for University							
Advancement, One West Park Road -							
Iowa City, IA	42-0796760	501(c)(3)	1,000.	Ο.			For general support

Schedule I (Form 990) Inland Empire Community Foundation Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Page 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 non-cash assistance	(h) Purpose of grant or assistance
The Well in the Desert							
P.O. Box 5312							
Palm Springs, CA 92263	33-0694580	501(c)(3)	15,000.	0.			For general support
,			,				Professional development
The Youth Mentoring Action Network							to non-profit leaders
P.O. Box 1633							through Center for
Claremont, CA 91711	27-4560912	501(c)(3)	10,000.	0.			Critical Mentoring
			,				California Complete
Tides Advocacy/Inland Empire							Count- Census 2020 (Tides
United - 521 N. Euclid Ave							Advocacy/Inland Empire
Ontario, CA 91762	94-3153687	501(c)(3)	121,900.	0.			United)
			, -	-			Census 2020: Facilitate
Tides Foundation / Inland							Regional Census Outreach
Empowerment - P.O. Box 29903 - San							Table, Convene
Francisco, CA 94129	51-0198509	501(c)(3)	15,000.	0.			, Organizations
			, -	-			
TODEC Legal Center							
P.O. Box 1733							TCE-2020 Funders Alliance
Perris, CA 92570	33-0711527	501(c)(3)	50,425.	0.			Collaboration (TODEC)
			,				
TODEC Legal Center							California Complete
P.O. Box 1733							Count- Census 2020 (TODEC
Perris, CA 92570	33-0711527	501(c)(3)	128,263.	0.			Legal Center)
			, ,				To support earthquake
Trona Community Senior Center							relief efforts in the
Operations - 13187 Jones St							Trona area: food and
Trona, CA 93562	33-0879716	501(c)(3)	3,000.	0.			transportation needs
			,				
Trona Community Senior Center							To support families
Operations - 13187 Jones St							affected by the Trona
Trona, CA 93562	33-0879716	501(c)(3)	5,000.	0.			Earthquake
UC Regents/U.C. San Diego	·	, ,	-,••	••		1	
Student Services Center, 3rd Floor							
North, 9500 Gilman Dr., Mail Code.							
0013 -	95-6006144	501(c)(3)	2,000.	0.			Scholarship

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	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
UC Regents/U.C.L.A.							
Payment Solution & Compliance							
Office, Box 957089 - 1125 Murphy							Scholarship for 2019-2020
Hall - 405 Hi	94-3067788	501(c)(3)	1,000.	٥.			Academic Year
UC Regents/U.C.L.A.							
Payment Solution & Compliance							
Office, Box 957089 - 1125 Murphy							Scholarship for 2019-2020
Hall - 405 Hi	94-3067788	501(c)(3)	1,000.	٥.			Academic School Year
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							Scholarship distribution
92521-0209	94-6006143	501(c)(3)	10,000.	٥.			for 2019 - 2020
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							Scholarship for 2019-2020
92521-0209	94-6006143	501(c)(3)	5,000.	٥.			Academic Year
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							Scholarship for 2019-2020
92521-0209	94-6006143	501(c)(3)	2,000.	0.			Academic Year
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							2019-2020 Scholarship
92521-0209	94-6006143	501(c)(3)	7,602.	٥.			Distributions
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							2019-2020 Scholarship
92521-0209	94-6006143	501(c)(3)	5,000.	٥.			Distributions
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							2019-2020 Scholarship
92521-0209	94-6006143	501(c)(3)	5,714.	٥.			Distribution
UC Regents/U.C.Riverside							
Office of Financial Aid, 900							
University Ave Riverside, CA							Scholarship for 2019-2020
92521-0209	94-6006143	501(c)(3)	2,000.	0.			Academic Year

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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	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
				assistance	(book, FMV, appraisal, other)		
UC Riverside School of Medicine							
900 University Ave., 2608 SOM							
Education Building - Riverside, CA							Scholarship for 2019-2020
92521	23-7433570	501(c)(3)	15,000.	0.			Academic Year
							To support The
Unforgettables Foundation							Unforgettables Burial
345 Pearl Ave., Unit 230							Project for families of
Redlands, CA 92374	33-0885478	501(c)(3)	10,075.	0.			deceased children
Unforgettables Foundation							
345 Pearl Ave., Unit 230							L .
Redlands, CA 92374	33-0885478	501(c)(3)	2,500.	0.			For general support
The formation has been detained							
Unforgettables Foundation							
345 Pearl Ave., Unit 230	22 0005450		0 500				
Redlands, CA 92374	33-0885478	501(c)(3)	2,500.	0.			For general support
United States Adaptive Recreation							
Center - P.O. Box 2897 - Big Bear							USARC Program Efficiency
Lake, CA 92315-2897	95-3872771	501(c)(3)	10,000.	0.			Improvement Project
lake, en 92515 2097	55 5672771	501(0)(3)	10,000.	•.			To support adaptive water
United States Adaptive Recreation							ski and communications
Center - P.O. Box 2897 - Big Bear							equipment for wheelchair
Lake, CA 92315-2897	95-3872771	501(c)(3)	10,000.	0.			users
	55 5672771	501(0)(0)	10,000.	••			Results-based
United Way of the Desert							Accountability Alignment:
P.O. Box 13210							Development of Clear
Palm Desert, CA 92255	95-2783993	501(c)(3)	10,000.	0.			Impact Scorecard
	55 2703555	501(0)(3)	10,000.	•.			
United Way of the Inland Valleys							
1835 Chicago Ave., Suite B							
Riverside, CA 92507	95-1742174	501(c)(3)	5,311.	0.			Designated Distribution
,,,		, ,		°.			
United Way of the Inland Valleys							
1835 Chicago Ave., Suite B							
Riverside, CA 92507	95-1742174	501(c)(3)	2,209.	0.			Designated Distribution

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

932241 04-01-19

(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 Redlands							
Development Office/Administration							
Building, 1200 E. Colton Ave							
Redlands,	95-1643389	501(c)(3)	14,105.	0.			Designated Distribution
University of Redlands							
Development Office/Administration							
Building, 1200 E. Colton Ave							2019-2020 Scholarship
Redlands,	95-1643389	501(c)(3)	5,000.	0.			Distributions
University of Redlands							
Development Office/Administration							
Building, 1200 E. Colton Ave							2019-2020 Scholarship
Redlands,	95-1643389	501(c)(3)	5,351.	٥.			Distributions
University of San Diego							
Degheri Alumni Center, No. 137,							
5998 Alcala Park – San Diego, CA							
92110-2492	95-2544535	501(c)(3)	12,000.	٥.			For general support
Vermont Foodbank 33 Parker Road							Vermonters Feeding
Barre, VT 05641	22-3021942	501(c)(3)	15,000.	0.			Vermonters
Veterans Partnering with Communities, Inc 16779 Spring St Fontana, CA 92335	45-2784049	501(c)(3)	10,000.	0.			Reboot, Rebuild, Reconnect: Personal and Professional Growth for Veterans
Victor Valley College District Foundation – 18422 Bear Valley Road – Victorville, CA 92392	51-0141667	501(c)(3)	5,000.	0.			2019-2020 Scholarship Distributions
Victor Valley College District Foundation – 18422 Bear Valley Road – Victorville, CA 92392	51-0141667	501(c)(3)	3,050.	0.			2019-2020 Scholarship Distributions
Victor Valley College District Foundation – 18422 Bear Valley Road – Victorville, CA 92392	51-0141667	501(c)(3)	13,601.	0.			2019-2020 Scholarship Distributions

33-	07	48	53	6

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(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Victor Valley College District							
Foundation - 18422 Bear Valley							2019-2020 Scholarship
Road - Victorville, CA 92392	51-0141667	501(c)(3)	5,714.	0.			Distribution
Victor Valley Community Services							
Council - P.O. Box 1992 -							Senior and Disabled
Victorville, CA 92393-1992	95-2041473	501(c)(3)	10,000.	0.			Services
Victor Valley Community Services							To support senior and
Council - P.O. Box 1992 -							disabled wheelchair users
Victorville, CA 92393-1992	95-2041473	501(c)(3)	10,000.	0.			to have more independence
Victor Valley Family Resource							Financial Literacy: For
Center - 9378 SVL Box -							low-income seniors and
Victorville, CA 92395	26-4539631	501(c)(3)	10,000.	0.			underserved residents
				•••			
Victoria Avenue Forever							
P.O. Box 4152							
Riverside, CA 92514	33-0571694	501(c)(3)	6,708.	0.			Agency Distribution
							To support the Outdoor
VIP TOTS/Valley Intervention							Classroom for Early
Program for Tots - 41915 E. Acacia							Learning Center for
Ave Hemet, CA 92544	95-3425906	501(c)(3)	10,075.	0.			children with disabilites
Vitamin Angel Alliance, Inc.							
P.O. Box 4490							Vitamin A and Deworming
Santa Barbara, CA 93140	77-0485881	501(c)(3)	75,000.	0.			Coverage Caps
VNA Hospice & Pallative Care of							
So. Cal dba: Community Hospice							
of Victor Valley, 555 N. Benson							To support Charitable
Ave., Suite D - Upland, CA 91786	95-1733155	501(c)(3)	8,000.	0.			Care program
							Census 2020: Facilitate
Warehouse Workers Resource Center							Regional Census Outreach
P.O. Box 3892							Table, Convene
Ontario, CA 91761	45-2287926	501(c)(3)	15,000.	Ο.		1	Organizations

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
Warehouse Workers Resource Center							California Complete
P.O. Box 3892 Ontario, CA 91761	45-2287926	501(c)(3)	102,853.	0.			Count- Census 2020 (WWRC)
	45 2207520	501(0)(5)	102,000.	Ū.			California Complete
Warehouse Workers Resource Center							Count- Census 2020
P.O. Box 3892							(Warehouse Workers
Ontario, CA 91761	45-2287926	501(c)(3)	87,701.	0.			Resouce Center)
Weld Food Bank 1108 H St. Greeley, CO 80631	74-2244826	501(c)(3)	15,000.	0.			Kids Backpack Program
West Suburban Community Pantry Inc. – 6809 Hobson Valley Dr., Suite 118 – Woodridge, IL 60517	36-3857072	501(c)(3)	15,000.	0.			Healthy Food and Resources for Families
Wichita Children's Home 7271 E. 37th St. N. Wichita, KS 67226	48-0547706	501(c)(3)	25,000.	0.			Kidzcope: Hope for Grieving Families
Women Helping Women 2803 McGaw Ave. Irvine, CA 92614	33-0576900	501(c)(3)	15,000.	0.			Employment Success Program
Woodcrest Christian School System 18401 Van Buren Blvd. Riverside, CA 92508	95-1756426	501(c)(3)	69,093.	0.			Scholarship distribution for 2019 - 2020 academic school year.
World Vision, Inc. P.O. Box 9716, M/S 110 Federal Way, WA 98063-9716	95-1922279	501(c)(3)	10,000.	0.			Designated Distribution
Yavapai Big Brothers Big Sisters 3208 Lakeside Village Prescott, AZ 86301	86-0278779		24,000.	0.			Strengthening School-Based Mentoring - Yavapai Big Brothers Big Sisters

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Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	anizations in the U	nited States (Sch	edule I (Form 990), Pa T	art II.) T	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 non-cash assistance	(h) Purpose of grant or assistance
Yavapai Food Bank, Inc.							
P.O. Box 4151							
Prescott, AZ 86302	86-0709163	501(c)(3)	15,000.	٥.			Food Purchase
							Young Idyllwild Capacity
Young Idyllwild, Inc.							Building Project: Youth
P.O. Box 3578							Training & Mentoring
Idyllwild, CA 92549	81-4850695	501(c)(3)	7,500.	0.			Programs
Young Scholars For Academic							Verse Gebelene fer
Empowerment - 11801 Pierce St.,	06 0050770		40.000				Young Scholars for
Suite 296 - Riverside, CA 92505	26-2350778	501(c)(3)	40,000.	0.			Academic Empowerment
Young Women's Resource Center							
818 5th Ave.							
Des Moines, IA 50309	51-0186073	501(c)(3)	25,000.	0.			EmpowHER
				·			
Youth Leadership Institute							TCE-2020 Funders Allianc
209 9th St., Suite 200							Collaboration (Youth
San Franscisco, CA 94103	68-0184712	501(c)(3)	25,000.	٥.			Leadership Institute)
Zion Lutheran Church							
15342 Jeraldo Dr.							
Victorville, CA 92394	95-2272643	501(c)(3)	6,842.	0.			Designated Distribution
						1	
	1	1	1	1	1	1	1

Part III can be duplicated if additional space is needed. (c) Amount of (a) Type of grant or assistance (b) Number of (d) Amount of non-(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) recipients cash grant cash assistance Scholarships for students attending colleges and universities 443 1,034,158. 0.

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part I, Line 2:

Inland Empire Community Foundation monitors its grants to ensure that funds

awarded are used for the purposes specified in the grant proposal submitted

through:

A) Award letter - Grantees receive an award letter specifying the

performance period for the grant, typically one year. The award letter

delineates the objectives that the grant is supporting as specified in the

proposal, alerts the grantee to review and sign the grant agreement, and

Page 2

informs the grantee of the deadline of the final report.

B) Grant agreement - Grantees are required to sign the grant agreement before any funds are disbursed. The grant agreement explicitly describes the following:

1. Section 1: Use of Grant Funds

Grant funds must be expended within the grant period, for the purpose and objectives described in the grant proposal. Grant funds may not be expended for any other purpose without prior written approval by Inland Empire Community Foundation. If the organization encounters significant difficulties in making use of the funds as specified in the proposal, or if the grant funds cannot be spent within the grant period, grantee must notify Inland Empire Community Foundation in writing promptly. Requests for variances or extensions are reviewed on a case-by-case basis. If a request is denied, unused funds must be immediately refunded to the Foundation.

2. Section 4: Final Report and Records

The Grantee will submit the Grant Evaluation report per the deadline set forth in the award letter. This report includes a narrative on outcomes based on goals and objectives set forth in the grant proposal and an expenditure report documenting use of grant funds. If equipment was purchased, copies of receipts need to be included.

SC	HEDULE J Compensation Information	I	OMB No. 1	545-00	47
	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		20	40	
(. 0	Compensated Employees		20	19	1
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to	Publ	ic
	Attach to Form 990. al Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan		mployer id	entificatio	on nui	mber
	Inland Empire Community Foundation	33-0'	74853	6	
Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	90,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or charter travel Housing allowance or residence for personal	ıl use			
	Travel for companions Payments for business use of personal resid	dence			
	Tax indemnification and gross-up payments				
	Discretionary spending account Personal services (such as maid, chauffeur,	chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
•					
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's				
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	1 to			
	establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract				
	□ Independent compensation consultant □ Form 990 of other organizations □ X Compensation survey or study □ X Approval by the board or compensation com	mmittaa			
		IIIIIIIII			
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:				
а	Receive a severance payment or change-of-control payment?		4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				Х
с	Participate in, or receive payment from, an equity-based compensation arrangement?				Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
	contingent on the revenues of:				
	The organization?				X
b	Any related organization?		5 b		X
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
	contingent on the net earnings of:				v
	The organization?				X
b	Any related organization?		6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		-	х	
•	not described on lines 5 and 6? If "Yes," describe in Part III		7	л	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract execution departies in Part III.				x
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 (1958-6(c))?		9		
цци	Regulations section 53.4958-6(c)? For Paperwork Reduction Act Notice, see the Instructions for Form 990.		le J (Forn	1 900	2010
- 1/ ⁻		Juneau		. 550)	2013

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 (1) Regis Michelle Decker (i) President & CEO (i)	(i) Base compensation 142,614. 0.	(ii) Bonus & incentive compensation 4,800. 0.	(iii) Other reportable compensation 13,300. 0.	other deferred compensation 5 , 493 . 0 .	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990 0 •
President & CEO (ii) (i) (i) (i) (i) (i) (i) (i) (i) (i)	142,614. 0.		13,300.	5,493. 0.		188,792.	0.
President & CEO (ii) (i) (i) (i) (i) (i) (i) (i) (i) (i)	0.	0.	0.	0.	0.	^	
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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.

Part I, Line 7:

The organization maintains a discretionary bonus pool that is distributed

to all staff annually. CEO is included in this pool. The amount is

determined and approved by the Board.

SCHE	DULE	Μ
(Form	990)	

Noncash Contributions

OMB No. 1545-0047

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.

Open to Public Inspection

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information. Inland Empire Community Foundation

Employer identification number 33 - 0748536

Pa	rt I Types of Property		_					
	·	(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		•	e
		applicable	items contributed	Form 990, Part VIII, line 1g	noneasir contribu	ation an		,
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	6	22,757.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	Х	8	1,290.	FMV			
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (<u>Miscellaneous</u>)	Х	14	· / ·				
26	Other (Tickets)	Х	5					
27	Other (Gift cards)	Х	18					
28	Other • (Gift baskets)	Х	4	855.	FMV			
29	Number of Forms 8283 received by the organized	zation during	g the tax year for c	contributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	itions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		<u>X</u>

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.

LA FOI Fabel WORK REDUCTION ACT NOTICE, See the instructions for Form 390	LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.
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Schedule M (Form 990) 2019

b If "Yes," describe in Part II.

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.

Part I, Other Types of Property:

Jewelry

(a) Check if applicable = X

(b) Number of Contributions = 1

(c) Revenue Reported on Form 990, Part VIII \$ 100.

(d) Method of determining revenue: FMV

Schedule M, Part I, Column (b):

The number of items donated is based on the number of individual

donors.

s part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.



Inland Empire Community Foundation

Form 990, Part III, Line 4a, Program Service Accomplishments:

Health and Human Services (\$3,053,172)

Civic & Environmental Benefit (\$7,363,362)

Arts & Culture (\$155,903)

Other (\$197,100)

Included in our grantmaking are funds providing support to particular issues or places. These include Field of Interest Funds (\$273,564) which are restricted to a specific program area or geographic area. As a sampling, funds are currently helping with ADA compliance, the cities of Perris and Idyllwild, the High Desert, victims of domestic abuse, senior pet-owners and vet care, and the treatment and care of low income children in Riverside County. IECF is proud to offer donors a way to invest long term in the issues and places they care about, and sees its geographic funds as crucial investments to strengthen all parts of the Inland Empire.

The Foundation's unrestricted grantmaking supports the capacity building needs of nonprofit organizations. The Community Impact Fund (\$192,000) supports training and workshops such as Board Governance, Fund Development, Leadership, Advocacy, Finance & Budgets, Evaluation, Marketing, and more.

 IECF has been administering the S. L. Gimbel Foundation Fund, whose

 mission is to enhance the quality of life in memory of Susan Gimbel.

 Program interest areas include health, environmental protection and

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2019)

 932211 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)	Page 2				
Name of the organization Inland Empire Community Foundation	Employer identification number 33-0748536				
enhancement, education, and human dignity. IECF awarded \$	3,984,420 to				
nonprofits in partnership with the Gimbel Foundation trustees in 2019.					
In addition to their grantmaking program, in 2019, the S.	L. Gimbel				
Foundation Scholarship Fund awarded \$ 446,331 in financia	1 support for				
low-income students. Scholarship awards are for students	attending				
University of California, Riverside (UCR) who have unmet need to be					
used for tuition, books, education fees, housing and other educational					
expenses. The intent is to provide scholarships equally to students					
studying liberal arts and the sciences. Low income students,					
undergraduate or graduate, accepted to attend UCR and current UCR					
students from all backgrounds regardless of age, race, religion,					
gender, sexual preference or national origin are eligible to apply.					
First generation college-going students, and/or tradition	ally				
underrepresented students in higher education are highly	encouraged to				
apply.					

Inland Empire Community Foundation	
	33-0748536
LISTOS Riverside County	
IECF is helping to build community resiliency and connec	ct state
residents to preparedness and response efforts. In Decen	nber 2019, the
organization awarded grants of \$600,000 to 13 nonprofits	s serving
Riverside County residents to fund the efforts of commu	nity-based

The funding comes from Listos California - a campaign led by the Governor's Office of Emergency Services and California volunteers to make sure residents at most risk during natural disasters are safe and better prepared. IECF received \$2.1 million to support nonprofits in Riverside County provide education and awareness training and resources on natural disaster preparedness.

2020 Census Inland Empire

Census IE is a project of the Inland Empire Community Foundation, which has been selected by the State to serve as the Administrative Community Based Organization to lead Census 2020 outreach efforts in Riverside and San Bernardino Counties. IECF received \$2.4 million to motivate, educate, and activate IE hard to count populations to ensure that everyone gets counted during the Census 2020.

Building on the growing collaborative capacity of the Inland Empire, Census IE has formed a broad coalition of community-based organizations with deep roots in under-served areas to coordinate Census awareness and outreach. Forty five organizations, each with a unique mission and expertise, were awarded subcontracts. By and through working together and sharing resources, the collective can best ensure our community at 932212 09-06-19

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large and on the regional level is counted fully and accurately in the 2020 Census.

IECF Graduate Success Program: A Community Philanthropy Initiative

(CPI) grant funded by the College Futures Foundation

* Purpose: Award strategic, need-based scholarships to low-income and underrepresented students in Riverside and San Bernardino Counties, and attract sustainable funding from local donors for these scholarships.

* Scholarships awarded was \$351,616, with a maximum award of \$2,500. Additionally, nonprofit partners distributed scholarships to their student constituencies that meet the criteria: Promise Scholars -\$50,000; Blu Education Foundation - \$50,000; Making Hope Happen Foundation - \$50,000; Cal State San Bernardino - \$12,500.

* Six nonprofit scholarship giving programs from the Inland Empire continue to work together on aligning models to maximize needs-based scholarships: Blu Foundation, Promise Scholars, Making Hope Happen Foundation, RIMS AVID, Growing Inland Achievement, One Future Coachella Valley. Critical issues center on the importance of aligning college access and success and sharing models/approaches that support needsbased scholarships.

Form 990, Part VI, Section A, line 2: J. Sergio Bohon, Chair of the Board, has an indirect business relationship with Nefertiti U. Long, Board Secretary.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization Inland Empire Community Foundation	Employer identification number 33-0748536
Form 990, Part VI, Section A, line 4:	
The organization's board members voted on, and approved,	the amended Bylaws
which confirms the request to change the organization's n	ame from The
Community Foundation to Inland Empire Community Foundatio	n. The name change
was effective as of November 18th, 2019 and all appropria	te forms and
notices were filed with the appropriate authority to pres	ent the
organization with the changed name.	
Form 990, Part VI, Section B, line 11b:	

The Form 990 review process starts with a presentation by the tax preparer to the Audit Committee, the CFO, the Sr. VP of Finance and Stewardship, and the President of The Inland Empire Community Foundation. Once satisfied with the completion of the Form 990, the draft will be made available to the Board of Directors via the IECF Board Member Portal and the audit committee will make a recommendation that the Executive Committee or the Board of Directors accept the Form 990 for filing. The forms will be signed by the President and filed with the Internal Revenue Service.

Form 990, Part VI, Section B, Line 12c: Conflict of Interest forms are distributed to all staff and members of the Board of Directors of The Inland Empire Community Foundation annually. The forms are signed by officers and directors, then collected and reviewed by the SVP of Finance and Stewardship and the President. Items of note (if any) are brought to the attention of the Executive Committee for follow-up.

Form 990, Part VI, Section B, Line 15a: The Compensation Committee gathers appropriate salary survey information from organizations including, but not limited to, the Council on 932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page 2	
Name of the organization Inland Empire Community Foundation	Employer identification number 33-0748536	
Foundations, the League of California Community Foundatio	ns and others.	
Local conditions are also taken into account. The Compensation Committee		
makes a recommendation to the Executive Committee regarding CEO and staff		
pay ranges, and specifically about CEO pay and other benefits. The		
Executive Committee has Board authorization to determine the President and		
CEO's compensation package, within ranges approved by the Board.		

The President and CEO determines the annual salaries of other officers and key employees using the ranges approved by the Compensation Committee.

Form 990, Part VI, Section C, Line 19:

Once the Foundation's Audited Financial Statements have been accepted by The Board of Directors, they are posted to the Foundation's website as well as on Guidestar, a nonprofit database. Once the Form 990 and 990-T (if applicable) are filed with the Internal Revenue Service, public copies of the completed forms are posted on the Foundation's website and also uploaded to Guidestar. The current forms, as well as prior year forms, and other governing documents are also available at the Foundation's office upon request; as is the Foundation's Conflict of Interest Policy.

Form 990, Part XI, line 9, Changes in Net Assets:	
Change in value of split-interest agreements	127,455.
Agency Fund Share of Investment Income	-3,785,437.
Management fees	269,563.
Support from agency funds	-1,993,861.
Agency fund expense	3,058,459.
Prior year grants returned	187,912.
Total to Form 990, Part XI, Line 9	-2,135,909.
932212 09-06-19	Schedule O (Form 990 or 990-EZ) (2019)