# **PUBLIC DISCLOSURE COPY**

### **PLEASE FILE IN A SAFE PLACE**

# ARMANINO LLP

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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

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

Department of the Treasury Internal Revenue Service

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

A F	or the	2021 calendar year, or tax year beginning OC	T 1, 2021 and	ending SI	EP 30, 2022	
<b>B</b> (a	Check if pplicable	C Name of organization			D Employer iden	tification number
	Addres		ON			
	Name change	Doing business as			77-01650	29
	Initial return	Number and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone num	iber
	Final return/	4001 MISSION OAKS BLVD.	<u> </u>	1	(805) 988-	0196
	termin- ated	City or town, state or province, country, and 2	IP or foreign postal code		G Gross receipts \$	46,837,782.
	Amend return	CAMARILLO, CA 93012			H(a) Is this a grou	p return
	Application	F Name and address of principal officer: VALVES	SA BECHTEL		for subordina	ites? Yes X No
	pendin	SAME AS C ABOVE			<b>H(b)</b> Are all subordinate	es included? Yes No
			◀ (insert no.) 4947(a)(1) c	or 527	If "No," attacl	h a list. See instructions
		e: WWW.VCCF.ORG			H(c) Group exemp	
		- 9	ociation Other >	<b>L</b> Year	of formation: 1987	M State of legal domicile; CA
Pa	_	Summary				
φ		Briefly describe the organization's mission or most		MOTE AND	ENABLE	
Activities & Governance		PHILANTHROPY TO IMPROVE OUR COMMUNITY				
ern	l	Check this box  if the organization discon			1	
<u>3</u> 0		Number of voting members of the governing body (				3 10 4 10
<u>«</u>		Number of independent voting members of the gov				5 25
ties		Total number of individuals employed in calendar years				6 100
ξį		Fotal number of volunteers (estimate if necessary)  Fotal unrelated business revenue from Part VIII, colu				7a -57,647.
Ac		Net unrelated business taxable income from Form S				7b 0.
	<u>'</u>	vet difference business taxable income from Forms	30-1, 1 art 1, iiile 11		Prior Year	Current Year
	8 (	Contributions and grants (Part VIII, line 1h)			44,987,15	
Jue		Program service revenue (Part VIII, line 2g)			1,164,30	<del></del>
Revenue		nvestment income (Part VIII, column (A), lines 3, 4,			7,034,01	
R		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,				0. 0.
	l	Fotal revenue - add lines 8 through 11 (must equal F			53,185,47	3. 29,608,234.
		Grants and similar amounts paid (Part IX, column (A			46,443,52	4. 12,434,872.
	ı	Benefits paid to or for members (Part IX, column (A)				0. 0.
ý	45 0	Salaries, other compensation, employee benefits (P			1,868,89	9. 1,993,777.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), lin				0.
be	b -	Total fundraising expenses (Part IX, column (D), line				
Û	17 (	Other expenses (Part IX, column (A), lines 11a-11d,			2,119,54	1,923,296.
	18	Total expenses. Add lines 13-17 (must equal Part IX	, column (A), line 25)		50,431,96	
	19	Revenue less expenses. Subtract line 18 from line 1	2		2,753,50	9. 13,256,289.
S OF				Be	ginning of Current Ye	
Sset	20				181,940,70	
Net Assets or	21	Total liabilities (Part X, line 26)			30,670,32	
	22 I	Net assets or fund balances. Subtract line 21 from l Signature Block	ine 20		151,270,37	7. 137,149,614.
			naludina accompanyina achadulac	and atatama	nto and to the heat of	my knowledge and holiaf it is
		ties of perjury, I declare that I have examined this return, i , and complete. Declaration of preparer (other than office)				my knowledge and belief, it is
uuc	, correct	, and complete. Declaration of preparer (other than officer	) is based on an information of wif	icii pi epai ei	ilas ally kilowieuge.	
Sig	n	Signature of officer			Date	
Her		VANESSA BECHTEL, PRESIDENT & CEO				
1101	Ŭ	Type or print name and title				
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN
Paid		** * *	ATY BROWN	0.8	3/02/23 if self-en	nployed P00650274
	arer	Firm's name ARMANINO LLP			Firm's EIN I	
	Only	Firm's address 11766 WILSHIRE BLVD 9TH 1	LOOR			
		LOS ANGELES, CA 90025			Phone no.3	10-478-4148
May	the IR	S discuss this return with the preparer shown abov	e? See instructions			X Yes No

Pa	rt 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:	
	THE MISSION OF THE VENTURA COUNTY COMMUNITY FOUNDATION (VCCF) IS	
	CONNECTING PEOPLE, RESOURCES, AND SOLUTIONS TO CREATE LASTING IMPACT	
	IN OUR SHARED WORLD.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	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		)
	CONNECTING DONORS TO THE COMMUNITY NEEDS THEY CARE ABOUT, THE VENTURA	
	COUNTY COMMUNITY FOUNDATION GRANTED \$11,136,000 TO 236 UNIQUE PUBLIC	
	CHARITIES AND \$1,373,650 TO MORE THAN THREE HUNDRED LOCAL STUDENTS VIA	
	OUR SCHOLARSHIP PROGRAM.	
	·	
4b	(Code: ) (Expenses \$ 1,451,244. including grants of \$ ) (Revenue \$	
40	(Code:) (Expenses \$1,451,244. including grants of \$) (Revenue \$) (Revenue \$)	, )
	ADDED TO DONOR FUNDS BRINGING THE TOTAL CHARITABLE ASSETS UNDER THE	
	STEWARDSHIP OF THE VENTURA COUNTY COMMUNITY FOUNDATION TO OVER \$179	
	MILLION.	
		_
4c	(Code:) (Expenses \$	1,291,639.)
	THE VENTURA COUNTY COMMUNITY FOUNDATION IS PROUD TO OFFER BELOW-MARKET	,
	RENT FOR TWELVE NONPROFITS IN VENTURA COUNTY. NONPROFIT TENANTS	
	INCLUDE: ECONOMIC DEVELOPMENT COLLABORATIVE OF VENTURA COUNTY, GOLD	
	COAST VETERANS FOUNDATION, CASA OF VENTURA, MAKE-A-WISH TRI-COUNTIES,	
	INTERFACE CHILDREN AND FAMILY, SERVICES/ 2-1-1 VENTURA COUNTY, BETHANY	
	CHRISTIAN SERVICES, AREAS CHRISTIANS TAKING INITIATIVE ON NEED	
	(ACTION), VISTA REAL PUBLIC CHARTER, SOTHERN CALIFORNIA ASSOCIATION OF	
	GOVERNMENTS (SCAG) AND THE BETTER BUSINESS BUREAU.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses ▶ 15,466,882.	
		Form <b>990</b> (2021)

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U			х	
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	- 21	<del>                                     </del>
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			l
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	Х	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
٨	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	110		<del></del>
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	$\vdash$
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	١		x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		X
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	Х	—
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? 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. See instructions	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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		x
20a	complete Schedule G, Part III	20a		X
	• •	20a 20b		<del></del>
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		$\vdash$
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	۱	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

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77-0165029

Form 990 (2021) VENTURA COUNTY COMMUNITION Part IV | Checklist of Required Schedules (continuous)

ı a	Officerist of nequired Scriedules (continued)			
	<b>-</b>		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		х	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Λ	<del>                                     </del>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24.5	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
<b>24</b> a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		x
h	Schedule K. If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del></del>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·		24c		
ч	Did the consist for a decrease the help of all insert for head and decrease the constant the conso	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
<b>2</b> 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	, ,	25b		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		<del></del> -
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	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		<del></del>
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
		27		x
20	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	21		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?   If			
а		28a		x
h	"Yes," complete Schedule L, Part IV  A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"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	25		
30	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? <i>If</i> "Yes," <i>complete</i>	31		<del></del>
32	, , ,	32		x
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<del></del>
33		33	х	
24	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	24	х	
25.0	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		$\vdash$
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256	х	
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	- 21	$\vdash$
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<del></del>
37	· · · · · · · · · · · · · · · · · · ·	27		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	1
Pa	Note: All Form 990 filers are required to complete Schedule O  't V   Statements Regarding Other IRS Filings and Tax Compliance	J 30	**	
	Check if Schedule O contains a response or note to any line in this Part V			
	Shook it contoud to contains a response of flote to any line in this fact v		Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	,	162	140
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b	-		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
C	(gambling) winnings to prize winners?	1c	Х	
	/aaa	1 10		4

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Form **990** (2021)

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Form 990	2021)	COMMUNITY FOUNDATION	77-0165029	Pa	age <b>5</b>
Part V	Statements Regarding Other	IRS Filings and Tax Compliance	(continued)		
				Voc	No

			Yes	No
<b>2</b> a	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 25		77	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
٥-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	0-	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Λ	
44	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
h	If "Yes," enter the name of the foreign country	<del>'1</del> a		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		х
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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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 -		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	•		
a	Did the constraint and in the contract of the	9a		
b	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	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?	13a		
L	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			
•	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	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		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Ves " complete Form 6069			

Form **990** (2021)
MUNITY 112937.1

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					Х
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	1a	1	ו		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	1	اد		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		any other	-		
_				2		х
2	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the					
3						x
_				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99			4		-
5	Did the organization become aware during the year of a significant diversion of the organization's asse			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app					
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockho	olders, or			
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by th	e following:			
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac					
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/eniie	Code )			
	(This occitor B reguests information about policies not required by the internal new	CHUC	Oode./		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such cha			100		
b		•		10b		
44-			ra filina tha farm?			х
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	belo	re illing the form?	11a		_ A
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				77	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es," c	lescribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent v	vith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi		•			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure			100		
17	List the states with which a copy of this Form 990 is required to be filed CA					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	4 000	)-T (section 501(a)(2)	is only)	availal	hle
10		u 33(	7 1 (360110113011(0)(3)	orny)	avallal	DIC
	for public inspection. Indicate how you made these available. Check all that apply.	_				
40	X Own website Another's website X Upon request Other (explain		,	-1 C		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor	ITIICT	or interest policy, an	d tinan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's book	ks an	d records			
	BONNIE GILLES - (805) 330-6681					
	4001 MISSION OAKS BLVD., A, CAMARILLO, CA 93012					

Form **990** (2021)

112937.1

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

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

**Employees, and Independent Contractors** 

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and title	(B) Average hours per week	box	not c , unle:	Pos heck ss per	more rson i	than o s both or/trus	n an	( <b>D</b> ) Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) VANESSA BECHTEL	40.00									
PRESIDENT AND CEO				Х				296,982.	0.	24,100.
(2) BONITA GILLES	40.00									
VICE-PRESIDENT AND CFO				Х				228,499.	0.	13,875.
(3) JEFFREY LAMBERT	40.00									
CHIEF OPERATING OFFICER						Х		182,271.	0.	13,889.
(4) TRACY TAGAWA	40.00									
CHIEF COMPLIANCE OFFICER						Х		141,337.	0.	11,436.
(5) SEAN LEONARD	1.00									
CHAIR		Х		Х				0.	0.	0.
(6) VERONICA QUINTANA	1.00									
TREASURER		Х		Х				0.	0.	0.
(7) LEAH LACAYO	1.00									
SECRETARY		Х		Х				0.	0.	0.
(8) SCOTT P. HANSEN	5.00									
IMMEDIATE PAST CHAIR		Х						0.	0.	0.
(9) MERYL CHASE	1.00									
DIRECTOR		Х						0.	0.	0.
(10) GEOFF DEAN	1.00									
DIRECTOR		Х						0.	0.	0.
(11) JACK EDELSTEIN	1.00									
DIRECTOR		Х						0.	0.	0.
(12) JOHN KEARNEY	1.00									
DIRECTOR		Х						0.	0.	0.
(13) JIM MCGEE	1.00									
DIRECTOR (LEFT 5/2022)		Х						0.	0.	0.
(14) MIKE POWERS	1.00									
DIRECTOR		Х		L	L	L		0.	0.	0.
(15) CATHERINE SEPULVEDA	1.00									
DIRECTOR		Х		L	L	L		0.	0.	0.
(16) VENKAT YEPURI	1.00									
DIRECTOR		х						0.	0.	0.
(17) GUSTAVO ZARATE	1.00									
DIRECTOR (LEFT 6/2022)		Х	l	l	l	1		0.	0.	0.

Pai	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	d Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	(do box	not c	Pos Pos heck i ss per	C) ition more rson i		one n an	(D)  Reportable compensation from	(D) (E)  Reportable Reportable compensation compensation		(F) Estimated amount of other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	s SC/	com fr orga	pensa om the anizat d relate anization	e ion ed
1b	Subtotal							<b></b>	849,089.		0.		63,	300.
	Total from continuation sheets to Part VI								0.		0.			0.
	Total (add lines 1b and 1c)							<b>•</b>	849,089.		0.		63,	300.
2	Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable	 }			
	compensation from the organization													4
											1		Yes	No
3	Did the organization list any former officer,	•		сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
_	line 1a? If "Yes," complete Schedule J for s											3		Х
4	For any individual listed on line 1a, is the su	•		•					•	•			х	
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a											4		
3	rendered to the organization? If "Yes," com	•				,			•			5		х
Sec	tion B. Independent Contractors	picto ocricadio	<i>20 1</i> 0	<i>51</i> 50	, CII	<i>5075</i>	011							
1	Complete this table for your five highest co	•	•								ensat	tion fro	om	
	(A)	S Carolinaar y			. <u></u>				(B)			(C	 )	
	Name and business	address							Description of s	ervices	С	omper		n
	TERBURY CONSULTING, 610 NEWPORT C	ENTER												
	/E #500, NEWPORT BEACH, CA 92660							_	INVESTMENT CONSULT	ING			273,	104.
RODE	RIGUEZ HORII CHOI & CAFFERATA :	LLP												

the organization. Report compensation for the calendar year ending with or within	n the organization's tax year.	
(A) Name and business address	<b>(B)</b> Description of services	(C) Compensation
CANTERBURY CONSULTING, 610 NEWPORT CENTER		
DRIVE #500, NEWPORT BEACH, CA 92660	INVESTMENT CONSULTING	273,104.
RODRIGUEZ, HORII, CHOI, & CAFFERATA LLP,		
777 S. FIGUEROA STREET, SUITE 2150, LOS	LEGAL SERVICES	145,893.
2 Total number of independent contractors (including but not limited to those listed	above) who received more than	

Form **990** (2021)

\$100,000 of compensation from the organization

77-0165029

Form 990 (2021) VENTURA COR Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					iunction revenue	business revenue	sections 512 - 514
S S	1 2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
2 5		Fundraising events 1c					
fts,		d Related organizations 1d	4,228,781.				
ig ig		e Government grants (contributions)	371,871.				
ons,			371,071.				
atio er	'	All other contributions, gifts, grants, and	16 402 606				
ĕ		similar amounts not included above 1f	16,402,606.				
on t		Noncash contributions included in lines 1a-1f	5,562,332.	01 002 050			
<u>0</u> <u>6</u>	ŀ	Total. Add lines 1a-1f	······ • •	21,003,258.			
			Business Code				
9	2 8	RENTAL INCOME	531120	914,734.	914,734.		
Program Service Revenue	ŀ	MANAGEMENT FEES	561000	372,210.	372,210.		
Series	(	·					
am		i					
og B	•	•					
ď	1	All other program service revenue					
		Total. Add lines 2a-2f		1,286,944.			
	3	Investment income (including dividends, interes					
		other similar amounts)		2,486,381.	4,695.	-57,647.	2,539,333.
	4	Income from investment of tax-exempt bond pr	I		,	·	
	5	Royalties					
	Ŭ	(i) Real	(ii) Personal				
	6 .		(.,,				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	(") OH				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 21,309,749.	751,450.				
	ŀ	Less: cost or other basis					
ne		and sales expenses <b>7b</b> 16,599,548.	630,000.				
ther Revenue	(	Gain or (loss) <b>7c</b> 4,710,201.	121,450.				
Be		Net gain or (loss)		4,831,651.			4,831,651.
ē	8 8	Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 <b>8a</b>					
	ŀ	Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	- '	Part IV, line 19 9a	l				
	,	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	10 6	•					
		and allowances 10a Less: cost of goods sold 10b					
$\dashv$		Net income or (loss) from sales of inventory	Business Osd				
જ			Business Code				
Miscellaneous Revenue	11 a						
lan en	ŀ	·					
Sel Sev	(						
Mis	(	All other revenue					
	•	Total. Add lines 11a-11d					
	12	Total revenue. See instructions	▶│	29,608,234.	1,291,639.	-57,647.	7,370,984.

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#### Part IX Statement of Functional Expenses

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

Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	10,653,222.	10,653,222.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,781,650.	1,781,650.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	605,433.	376,334.	143,112.	85,987
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,140,275.	867,865.	183,445.	88,965
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	47,184.	37,184.	6,858.	3,142
9	Other employee benefits	88,258.	66,787.	14,701.	6,770
10	Payroll taxes	112,627.	81,310.	20,455.	10,862
11	Fees for services (nonemployees):				
а	Management	40,115.	40,115.		
b	Legal	76,858.	40,145.	36,713.	
С	Accounting	75,555.	18,770.	56,785.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	495,446.	495,446.		
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	81,295.	72,221.	2,174.	6,900
12	Advertising and promotion	57,877.	14,674.	37,703.	5,500
13	Office expenses	59,523.	41,235.	10,753.	7,535
14	Information technology	95,773.	68,477.	17,815.	9,481
15	Royalties				
16	Occupancy	360,868.	351,214.	9,654.	
17	Travel	995.	711.	284.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	48,030.	4,570.	20,580.	22,880
20	Interest	181,633.	156,592.	25,041.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	203,832.	200,862.	2,970.	
23	Insurance	116,489.	87,695.	18,792.	10,002
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	MEMBERSHIP	29,007.	9,803.	19,204.	
b		-	-	·	
С					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	16,351,945.	15,466,882.	627,039.	258,024
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)				

# Form 990 (2021) Part X Balance Sheet

rar	τX	Balance Sneet					
		Check if Schedule O contains a response or	note to any lir	ne in this Part X	(A)		
					Beginning of year		End of year
	1	Cash - non-interest-bearing			71,987.	1	38,742
	2	Savings and temporary cash investments	3,971,600.	2	4,871,563		
	3	Pledges and grants receivable, net			600,000.	3	2,235,740
	4	Accounts receivable, net			326,616.	4	117,23
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ıbstantial conf	tributor, or 35%			
		controlled entity or family member of any of t	· L		5		
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri	bed in sectior	n 4958(c)(3)(B)		6	
ပ္	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	5			145,379.	9	127,75
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	2,392,646.	8,375,747.	10c	8,176,90
	11	Investments - publicly traded securities			139,013,908.	11	117,576,81
	12	Investments - other securities. See Part IV, lin			28,149,896.	12	29,639,70
	13	Investments - program-related. See Part IV, li	ne 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	1,285,571.	15	1,657,87		
	16	Total assets. Add lines 1 through 15 (must e			181,940,704.	16	164,442,33
	17	Accounts payable and accrued expenses	698,164.	17	478,62		
	18	Grants payable			448,988.	18	2,778,76
	19	Deferred revenue			25,000.	19	ı
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple			22,391,354.	21	19,380,12
ņ	22	Loans and other payables to any current or f	ormer officer,	director,			
Itie		trustee, key employee, creator or founder, su	ıbstantial conf	tributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese persons	· L		22	
֡֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֞֜֞֡֡֡֡֡֡	23	Secured mortgages and notes payable to un		4,401,200.	23	4,280,850	
	24	Unsecured notes and loans payable to unrela	ated third part	ties	2,000,000.	24	
	25	Other liabilities (including federal income tax,	payables to r	related third			
		parties, and other liabilities not included on li	nes 17-24). C	omplete Part X			
		of Schedule D		L	705,621.	25	374,349
	26	Total liabilities. Add lines 17 through 25			30,670,327.	26	27,292,72
		Organizations that follow FASB ASC 958,	check here	X			
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			146,534,863.	27	132,074,15
ра	28	Net assets with donor restrictions		4,735,514.	28	5,075,459	
u u		Organizations that do not follow FASB AS	C 958, check	here			
ב		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current fur	nds			29	
מנו	30	Paid-in or capital surplus, or land, building, o				30	
AS	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		Г	151,270,377.	32	137,149,61
_	33	Total liabilities and net assets/fund balances			181,940,704.	33	164,442,334
					<u> </u>		Form <b>990</b> (20)

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,	608,	234.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,	351,	945.	
3	Revenue less expenses. Subtract line 2 from line 1	3	13,	256,	289.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	151,	270,	377.	
5	Net unrealized gains (losses) on investments	5	-28,	704,	054.	
6						
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1,	327,	002.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	137,	149,	614.	
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	Act and OMB Circular A-133?		За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			1	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2021)	

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** VENTURA COUNTY COMMUNITY FOUNDATION 77-0165029 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	4,274,639.	28,140,045.	17,822,803.	44,987,154.	21,003,258.	116,227,899.	
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	4,274,639.	28,140,045.	17,822,803.	44,987,154.	21,003,258.	116,227,899.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						3,630,124.	
6	Public support. Subtract line 5 from line 4.						112,597,775.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total	
7	Amounts from line 4	4,274,639.	28,140,045.	17,822,803.	44,987,154.	21,003,258.	116,227,899.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	1,755,338.	1,952,738.	2,121,649.	1,701,422.	2,539,333.	10,070,480.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on				7,056.		7,056.	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	<b>Total support.</b> Add lines 7 through 10						126,305,435.	
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	5,303,749.	
13	First 5 years. If the Form 990 is for the	ie organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)		
	organization, check this box and stor						<b>&gt;</b>	
Sec	tion C. Computation of Publi							
14	Public support percentage for 2021 (I					14	89.15 %	
15	Public support percentage from 2020					15	91.60 %	
16a	33 1/3% support test - 2021. If the o	organization did not	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box		
	stop here. The organization qualifies as a publicly supported organization							
b	33 1/3% support test - 2020. If the o				line 15 is 33 1/3%	or more, check thi	s box	
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			▶□	
17a	10% -facts-and-circumstances test	- <b>2021.</b> If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,	
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	<b>e.</b> Explain in Part	VI how the organiz	ation	
	meets the facts-and-circumstances te	· ·						
b	10% -facts-and-circumstances test	- <b>2020.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or	
	more, and if the organization meets the				-			
	organization meets the facts-and-circu	umstances test. The	e organization qua	lifies as a publicly	supported organiz	ation	▶∐	
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box ar	nd see instructions	· <b>&gt;</b>	

#### 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.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to r expended on its behalf						
<b>5</b> T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
<b>b</b> U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
<b>11</b> N a	dd lines 10a and 10b						
<b>12</b> C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						<b>&gt;</b>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

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## Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 За 3b Зс 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9с 10a 10b

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Sched	1010 / (1 01111 000) 202 1	0165029	Pa	age <b>5</b>
Par				
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		$\vdash$
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	1115		
		11c		
Sect	<sub>detail in</sub> Part Ⅵ. ion B. Type I Supporting Organizations	110		
000	Type reapporting organizations		V	-
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)	'		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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		<u> </u>
Sect	ion 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		
Sect	ion 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		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
Sect	supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations	3		<u> </u>
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction). The organization satisfied the Activities Test. Organization satisfied the Activities Test.	люј.		
a b	The organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
			\	
с 2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below.	e instruction	Yes	No
			162	INO
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	200		
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	Ole		
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations must		•						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or								
•	collection of gross income or for management, conservation, or								
	maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
a	Average monthly value of securities	1a							
	Average monthly cash balances	1b							
	Fair market value of other non-exempt-use assets	1c							
	Total (add lines 1a, 1b, and 1c)	1d							
	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,								
	see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
	ion C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see					
	inate actional	, 5	5 9-	`					

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations <sub>(continued</sub>	<u>d)</u>						
Secti	on D - Distributions				Current Year					
_1_	1 Amounts paid to supported organizations to accomplish exempt purposes 1									
2	Amounts paid to perform activity that directly furthers exemp									
	organizations, in excess of income from activity		2							
3	Administrative expenses paid to accomplish exempt purpose	3	3							
4	Amounts paid to acquire exempt-use assets			4						
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5						
6	Other distributions (describe in Part VI). See instructions.			6						
7	Total annual distributions. Add lines 1 through 6.			7						
8	Distributions to attentive supported organizations to which the	ne organization is responsive								
	(provide details in Part VI). See instructions.			8						
9	Distributable amount for 2021 from Section C, line 6			9						
10	Line 8 amount divided by line 9 amount		1	10						
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021		(iii) Distributable Amount for 2021					
1	Distributable amount for 2021 from Section C, line 6									
2	Underdistributions, if any, for years prior to 2021 (reason-									
	able cause required - explain in Part VI). See instructions.									
3	Excess distributions carryover, if any, to 2021									
а	From 2016									
b	From 2017									
С	From 2018									
d	From 2019									
е	From 2020									
f	Total of lines 3a through 3e									
g	Applied to underdistributions of prior years									
h	Applied to 2021 distributable amount									
i_	Carryover from 2016 not applied (see instructions)									
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.									
4	Distributions for 2021 from Section D,									
	line 7: \$									
a	Applied to underdistributions of prior years									
b	Applied to 2021 distributable amount									
с	Remainder. Subtract lines 4a and 4b from line 4.									
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h									
	and 4b from line 1. For result greater than zero, explain in									
	Part VI. See instructions.									
7	Excess distributions carryover to 2022. Add lines 3j									
	and 4c.									
	Breakdown of line 7:			$\dashv$						
	Excess from 2017									
	Excess from 2018									
	Excess from 2019  Excess from 2020									
	Excess from 2020  Excess from 2021									
e	Excess from 2021									

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

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2021

Schedule B (Form 990) (2021)

	VENT	TURA	COUNTY COMMUNITY FOUNDATION	77-0165029			
Organiz	ation type (check on	ne):					
Filers of	:	Section	on:				
Form 99	0 or 990-EZ	X	501(c)( <sup>3</sup> ) (enter number) organization				
			4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
			527 political organization				
Form 99	0-PF		501(c)(3) exempt private foundation				
			4947(a)(1) nonexempt charitable trust treated as a private foundation				
			501(c)(3) taxable private foundation				
Note: Or	nly a section 501(c)(7		ed by the <b>General Rule</b> or a <b>Special Rule.</b> or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.			
General	Rule						
	-	-	form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ntributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·			
Special	Rules						
X	sections 509(a)(1) ar contributor, during t	nd 170 the yea	bed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to (b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and Ir, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) F Complete Parts I and II.	d that received from any one			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
answer "	aution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must newer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify at it doesn't meet the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

VENTURA COUNTY COMMUNITY FOUNDATION

77-0165029

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 4,228,781. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions Type of contribution
2		\$ 3,226,101. Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions Type of contribution
3		\$ 3,082,896. Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. <u>4</u>	Name, address, and ZIP + 4	\$ 2,436,540. Type of contribution  \$ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	Nume, addiess, and Eir T T	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
<b>No.</b> 6	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X Payroll Noncash X (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021) Page **2** 

Name of organization

Employer identification number

VENTURA COUNTY COMMUNITY FOUNDATION

77-0165029

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Humo, dudioss, and Zif T T	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Hame, address, and ZIF + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021) Page **3** 

Name of organization Employer identification number

VENTURA COUNTY COMMUNITY FOUNDATION

77-0165029

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	VARIOUS SECURITIES		
2			
		\$\$	08/02/22
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	VARIOUS SECURITIES		
3	VARIOUS SECURITIES		
		\$1,754,661.	12/14/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	SECURITIES		
5			
		\$	05/02/22
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	VARIOUS SECURITIES		
6			
		\$\$	09/30/22
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	SECURITIES		
7			
		\$\$	12/08/21
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Cabadula P (Farm 000) (0004)

Page 4

Name of or	rganization		Employer identification number							
VENTURA	COUNTY COMMUNITY FOUNDATION		77-0165029							
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cluse duplicate copies of Part III if additional s	through (e) and the following line en haritable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less for the year. (Enter this info. once.) \$							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of gif	t							
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
-	(e) Transfer of gift									
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
-	(e) Transfer of gift									
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
ļ	(e) Transfer of gift									
_	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee							

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

VENTURA COUNTY COMMUNITY FOUNDATION

**Employer identification number** 77 - 0165029

roganization answered "Yes" on Form 990, Part IV, line 6.  1 Total number at end of year 2 Aggregate value of grants from (during year) 3 770, 290, 44.0, 978, 3 3 Aggregate value of grants from (during year) 3 770, 290, 44.0, 978, 3 4 Aggregate value of grants from (during year) 3 770, 290, 44.0, 978, 3 5 Did the organization in prome all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 5 Did the organization in property, subject to the organization's exclusive legal control? 6 Did the organization in grants and form of the benefit of the donor or donor advisor, or for any other purpose conferring impermental private benefit? 7 Part III Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(9) or conservation casements held by the organization benefit and presentation of a conservation of a contribution of a conservation of public use (for example, recreation or education) Preservation of a conservation assement and the preservation of pone space 2 Complete lines 2s through 2d if the organization held a qualified conservation conservation easements included in (a) application of a conservation assements included in (a) application of a conservation assements included in (a) application of a conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  1 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year  2 Number of econservation easements modified, transferred, released, extinguished, or terminated by the organization during the year  2 Number of conservation easements modified, transferred, released, extinguished, or terminate asset t	Pai			Accounts. Complete if the
1 Total number at end of year  2 Aggregate value of contributions to (furing year)  3 Aggregate value of contributions to (furing year)  3 Aggregate value of and of year  3 770, 290,  440, 978.  4 Aggregate value of and of year  5 Did the organization inform all donors and donor advisors in writing that the assests held in donor advised funds are the organization is property, subject to the organization's exclusive legal control?  8 Yes No  10 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impremisable private benefit?  Part III Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation esaments held by the organization (heck all that apply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Preservation of a historically important land area   Preservation of the funds of the complete in the organization funds. If the organization in the form of a conservation esaments held by the organization (heck all that apply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Preservation of a historically important land area   Preservation of the fund of the fund of the Tax Year   2 organization of the complete in the organization held a qualified conservation conservation esaments in conservation esaments   2 organization   2		organization answered "Yes" on Form 990, Part IV, line		(b) Funds and other accounts
Aggregate value of contributions to (during year)  Aggregate value of contributions to (during year)  Aggregate value of prains from (author) year)  Aggregate value of prains from (author) year)  Aggregate value at and of year  Aggregate value of the separation of year  Aggregate value at an of year  Aggregate value of the year  Aggregate value of year  Aggregate val		Tatal group have at an el of consu	` '	
3 Aggregate value of grants from (during year)  4 Aggregate value and of year  3 1, 826, 599.  136, 675, 162.  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control?  No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes benefit?  Pert II Conservation Easements. Complete if the organization can severed. Yes' on Form 990, Part IV, line 7.  1 Purpose(s) of conservation essements held by the organization (check all that apply).  □ Preservation of land for public use (for example, recreation or education) □ Preservation of a conservation assement in part of the organization of a conservation of a conservation of a conservation of a conservation assements on a certified historic structure instead in the National Register  1 Total number of conservation easements included in (c) acquired after 7/25/05, and not on a historic structure listed in the National Register  1 Number of conservation easements on a certified historic structure included in (a)  2 Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements thoused with the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  S Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)  and section 170(h)(4)(B)(ii)  1 Part XIII, describe how the organization reports conservation easements in lits revenue and expense statement and				
Aggregate value at and of year 31, 226, 999. 136, 675, 162.  5 Did the organization inform all clonors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring impermisable purposes and not for the the most of the donor of a donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor of a donor advisor, or for any other purpose conferring impermisable private benefit?  Part II Conservation easements. Complete if the organization check all that apply.  □ Preservation of land for public use (for example, recreation or education) □ Preservation of a historically important land area □ Preservation of pone space  2 Complete lines 2 a through 3 did the organization held a qualified conservation contribution in the form of a certified historic structure □ Preservation of open space  2 Complete lines 2 a through 3 did the organization held a qualified conservation contribution in the form of a certified historic structure included in (a) 1 number of conservation easements and a certified historic structure included in (a) 1 number of conservation easements in content in the state of the National Register  3 Number of conservation easements modellified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3				<u> </u>
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors, or for any other purpose conferring impermissable private benefits?    X Yes   No				
are the organization's property, subject to the organization's exclusive legal control?			•	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Part III   Conservation Easements held by the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements held by the organization (check all that apply).   Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of inatural habitation   Preservation of pone space	·	-	_	
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impromissible private benefit?    Part II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(§) of conservation easements held by the organization (check all that apply).   Preservation of an for public use for examine the property of the preservation of a historically important land area   Protection or natural habitat   Protection or natural habitat   Preservation of a certified historic structure   Preservation of a conservation easement on the last day of the tax year.	6			······· — —
Part III Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  □ Preservation of land for public use (for example, recreation or education) □ Preservation of a historically important land area □ Protection of natural habitat □ Preservation of pens space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements  4 Total acreage restricted by conservation easements  5 Total acreage restricted by conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  9 Loss the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  9 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ S  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)				
Part II   Conservation Easements . Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  □ Preservation of land for public use (for example, recreation or education) □ Preservation of a historically important land area □ Protection of natural habitat □ Preservation of on factural habitat □ Preservation of one space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements  4 Total acreage restricted by conservation easements  5 Total acreage restricted by conservation easements   2a		impermissible private benefit?		X Yes No
Preservation of land for public use (for example, recreation or education)	Par			
Protection of natural habitat	1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
□ Preservation of open space  2 Complete lines 2 through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶ \$  8 Does seach conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l))  and section 170(h)(4)(B)(l))?  and section 170(h)(4)(B)(l))?  and section 170(h)(4)(B)(l))?  Part IIII Organizations have include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization security of the footnote to its financial statements that describes these items.  b If the organization security of the footnote to its financial statements that describes these items.  b If the organization security of the footnote to its financial statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or		Preservation of land for public use (for example, recreat	ion or education) Preservation of a his	storically important land area
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)  and section 170(h)(4)(B)(ii)?  I Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization easements.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  a If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works		Protection of natural habitat	Preservation of a ce	ertified historic structure
a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (6) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  5 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li)  and section 170(h)(4)(B)(lii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organization shall intaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held fo		Preservation of open space		
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  S Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  I reart XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part XIII, line 1  S S Does each conservation easements to other provide the follow	2		ed conservation contribution in the form of a	
b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's infancial statements that describes the organization's accounting for conservation easements.  Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.  1a If the organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further		day of the tax year.		Held at the End of the Tax Year
c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li) and section 170(h)(4)(B)(li))?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  b If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  a If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for publi	а			•
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	b	•		
listed in the National Register	С			.   2c
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part XII, line 1  (ii) Assets inclu	d			
A Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  S	_			
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(fi) and section 170(h)(4)(B)(fi)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part XIII, line 1  If the organization recei	3		eased, extinguished, or terminated by the orga	anization during the tax
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  No lose each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)  and section 170(h)(4)(B)(iii)?  Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included o			amount in Incomed .	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  ▶			' <del></del>	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Shamount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  No  Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sthe the organization's accounting for conservation easements in the footnote to the organization's financial statements and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  Revenue incl	3			Ves No
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    Some of the part of the provided in the provided in the provided in Form 990, Part XIII.   Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Some of the organization easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)   and section 170(h)(4)(B)(iii)?	6			
<ul> <li>▶ \$</li></ul>	Ū	Land voluntees means devoted to mornioring, inspecting, i	ianaming of violations, and emoroting conserva	ation outsernerits during the year
<ul> <li>▶ \$</li></ul>	7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conservation	easements during the year
and section 170(h)(4)(B)(ii)?				
and section 170(h)(4)(B)(ii)?	8		e satisfy the requirements of section 170(h)(4)(	(B)(i)
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X				
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If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  Assets included in Form 990, Part X	Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	Similar Assets.
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service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X	1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement and b	alance sheet works
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X		of art, historical treasures, or other similar assets held for public	lic exhibition, education, or research in further	rance of public
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(i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X		•	exhibition, education, or research in furtheran	nce of public service,
<ul> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> <li>b S</li> </ul>				
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the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  \$ \$	.=	,		
a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X  \$ \bullet\$	2	-		n, provide
<b>b</b> Assets included in Form 990, Part X		•	-	

112937.1

77-0165029

Par	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Othe	er Simila	r Assets	(contin	ued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the f	ollowing that make	significant	use of its		
	collection items (check all that apply):							
а	Public exhibition	d	I Loan or exc	hange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	e organization's exe	empt purpo	se in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other simila	ar assets			
	to be sold to raise funds rather than to be ma						Yes	No
Par	rt IV Escrow and Custodial Arrang		ete if the organizatio	n answered "Yes" o	n Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contributions	s or other assets no	t included		_	
	on Form 990, Part X?					L	Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:					
							Amount	
С	Beginning balance				1c			391,354.
	Additions during the year							248,325.
	Distributions during the year				1e			259,550.
	Ending balance				1f			380,129.
	Did the organization include an amount on Fo				•	<u>X</u>	Yes	No
	If "Yes," explain the arrangement in Part XIII.							X
Par	rt V Endowment Funds. Complete i					b.al.	(-) [	
		(a) Current year	(b) Prior year	(c) Two years back	+	years back		
	0 0 ,	146,941,259.	125,365,799.	119,914,481.		19,906.		828,306.
	Contributions	11,741,008.	3,748,596.		+	16,881.		966,146.
		Net investment earnings, gains, and losses -21,487,683. 25,121,265. 9,144,438. 3,367,292						820,966.
	Grants or scholarships	9,263,982.	7,294,401.	7,058,432.	5,1	89,598.	5,	595,512.
е	Other expenditures for facilities							
	and programs				+			
Ţ	Administrative expenses	127,930,602.	146,941,259.	125,365,799.	110 0	14,481.	106	019,906.
g	End of year balance				119,9	14,401.	100,	019,900.
2	Provide the estimated percentage of the curr	ent year end balance		) neid as:				
	Board designated or quasi-endowment		%					
	Permanent endowment ► .8950  Term endowment ► 1.4017	%						
C	The percentages on lines 2a, 2b, and 2c short							
32	Are there endowment funds not in the posses	•	ation that are held an	nd administered for t	he organiz	ation		
Ja	by:	331011 Of the organiza	tion that are new ar	id administered for t	ine organiza	ation	Γ	Yes No
	(i) Unrelated organizations						3a(i)	х
	(ii) Related organizations						3a(ii)	х
b	If "Yes" on line 3a(ii), are the related organiza						3b	
4	Describe in Part XIII the intended uses of the							
Par	rt VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, Part X	(, line 10.			
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumulate	ed	(d) Book	value
		basis (investr	` '	' '	epreciation			
1a	Land		2	,185,000.			2,	185,000.
	Buildings		7	,879,841.	1,891,	679.	5,	988,162.
	Leasehold improvements			124,931.	124,	931.		0.
	Equipment			379,780.	376,	036.		3,744.
	Other							
Total	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. column (B). line 1	Oc.)		<b>&gt;</b>	8,:	176,906.
				,		Schedule	D (Form	990) 2021

Schedule D (Form 990) 2021 VENTURA COUNTY CO	OMMUNITY FOUNDATION		77-0165029	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	1b. See Form 990. Part X. line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-vear market	value
(A) en	(b) Book value	(b) Motriod of Valuation. Cook of	cria or year market	- Value
1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A) HEDGE FUND COMPOSITE	13,450,770.	END-OF-YEAR MARKET VALUE		
(B) PRIVATE EQUITY COMPOSITE	16,188,936.	END-OF-YEAR MARKET VALUE		
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	20 520 725			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	29,639,706.			
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1			
(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 1	1d. See Form 990. Part X. line 15.		
-	Description	, , , , , , , , , , , , , , , , , , , ,	(b) Book	value
	Boompaon		(2) 20011	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)			_	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<u> </u>	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line	25.	
1. (a) Description of liability			(b) Book	value
(1) Federal income taxes				
(2) PLANNED GIVING LIABILITY				315,619.
(3) SECURITY DEPOSITS				58,730.
(0)			+	20,700.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				

Schedule D (Form 990) 2021

374,349.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

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

Sche	edule D (Form 990) 2021 VENTURA COUNTY COMMUNITY FOUNDATION			77-016	5029 P	age <b>4</b>
Pai	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With	Revenue per Ret	turn.		
	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	1,310,	752.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-28,704,054.			
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	902,018.			
е				2e	-27,802,	036.
3	Subtract line 2e from line 1			3	29,112,	788.
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	4a	495,446.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines <b>4a</b> and <b>4b</b>			4c	495,	446.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	29,608,	234.
	rt XII Reconciliation of Expenses per Audited Financial Statemer	nts With	n Expenses per R	eturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	15,876,	562.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-		
– a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c	20,063.			
d	Other (Describe in Part XIII.)	2d	,		20	063
е	•			2e		063.
3	Subtract line 2e from line 1			3	15,856,	499.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	495,446.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines <b>4a</b> and <b>4b</b>			4c	495,	446.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	16,351,	945.
Pa	rt XIII Supplemental Information.					
Prov	ide 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, lin	e 2; Part XI,	
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal infori	mation.			
PARI	IV, LINE 2B:					
VCCE	MAINTAINS AGENCY FUNDS FOR VARIOUS NONPROFIT ORGANIZATIONS AND	LOCAL				
GOVE	RNMENT UNITS LOCATED IN VENTURA COUNTY. THE AGENCY FUNDS ARE IN	CLUDED				
WITH	HIN VCCF'S LIABILITIES, BUT THE UNDERLYING FUNDS (NET ASSETS) BE	ELONG TO	)			
тнг	OUTSIDE ENTITIES. AS OF 9/30/2022, VCCF MAINTAINED 96 AGENCY FU	INDS				
	The state of the s	1125				
m T	I NEW ACCEMIC MOMALITAG 610 200 120					
MIJL	NET ASSETS TOTALING \$19,380,129					
PARI	V, LINE 4:					
THE	FOUNDATION IS A FIDUCIARY OVER MORE THAN 600 INDIVIDUAL FUNDS,	EACH				
ESTA	ABLISHED WITH A GIFT INSTRUMENT DESCRIBING EITHER THE GENERAL OF	ł .				

Schedule D (Form 990) 2021

SPECIFIC PURPOSE FOR WHICH GRANTS ARE MADE.

#### **SCHEDULE I** (Form 990)

Department of the Treasury Internal Revenue Service

**Grants and Other Assistance to Organizations.** Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection Name of the organization **Employer identification number** 77-0165029 VENTURA COUNTY COMMUNITY FOUNDATION Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) CALIFORNIA STATE UNIVERSITY TO COVER THE CONSTRUCTION CHANNEL ISLANDS FOUNDATION -COSTS OF RENOVATION OF RICHARD R. RUSH HALL ONE THE MANZANITA FIRST FLOOR UNIVERSITY DRIVE - CAMARILLO, CA 77-0433230 501(C)(3) WEST WING AND RESTORATION 3,081,961, 0 FOR THE 2022 CAREER DEVELOPMENT AWARD FOR DR. PANCREATIC CANCER ACTION NETWORK JANIELLE P. MAYNARD AT INC. - 1500 ROSECRANS AVE., SUITE 200 - MANHATTAN BEACH, CA 90266 33-0841281 501(C)(3) JOHNS HOPKINS AND TO 340,000 0 HUMANE SOCIETY OF THE UNITED TO SUPPORT THE PETS FOR STATES - 1255 23RD STREET, NW. LIFE PROGRAM FOR VENTURA 53-0225390 501(C)(3) СОПИТУ SUITE 450 - WASHINGTON, DC 20037 289,459 0 TN SUPPORT OF THE CASA PACIFICA CENTERS FOR CHILDREN MATCHING PROGRAM FOR THE & FAMILIES - 1722 SOUTH LEWIS ROAD TRANSTITIONAL YOUTH 77-0195022 501(C)(3) SERVICE AND IN SUPPORT OF - CAMARILLO CA 93012-8520 280 000 0. TO SPONSOR SITE 54 AT THE VENTURA BOTANICAL GARDENS VENTURA BOTANICAL GARDEN AND TO SUPPORT THE P.O. BOX 3127 20-8416864 501(C)(3) CHARITABLE MISSION OF THE VENTURA CA 93006-3127 260 000 0. TO PROVIDE FINANCIAL CITY OF THOUSAND OAKS SUPPORT TO THE CITY OF 2100 E. THOUSAND OAKS BLVD. CITY OF THOUSAND THOUSAND OAKS FOR THE THOUSAND OAKS, CA 91362 95-2367314 OAK 219 176 0 CIVIC AUDITORIUM/FORUM 109. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
							TO SUPPORT HSVC	
HUMANE SOCIETY OF VENTURA COUNTY							INFRASTRUCTURE UPGRADE	
P.O. BOX 297							AND HSVC SPAY AND NEUTER	
OJAI, CA 93024	95-2272598	501(C)(3)	203,950.	0.			CLINIC SERVICES	
ALZHEIMER'S ASSOCIATION CALIFORNIA							IN SUPPORT OF THE	
CENTRAL COAST CHAPTER - 2290 N.							ALZHEIMER'S ASSOCIATION	
1ST ST., STE #101 - SAN JOSE, CA							INITIATIVE TO LAUNCH THE	
95131	77-0006745	501(C)(3)	200,000.	0.			INCREASING ACCESS TO	
							IN SUPPORT OF THE	
BOYS & GIRLS CLUB OF CAMARILLO							EXPANDING POSSIBILITIES	
1500 TEMPLE AVENUE							CAMPAIGN WHICH AIMS TO	
CAMARILLO, CA 93010	95-6194547	501(C)(3)	257,500.	0.			FUND A 6,500-SQUARE-FOOT	
VENTURA COUNTY FAMILY JUSTICE			,				TO PROVIDE FUNDING FOR	
CENTER FOUNDATION, INC 3170							THE ADDITION OF A 4-UNIT	
LOMA VISTA ROAD - VENTURA, CA							TINY HOME VILLAGE AT THE	
93003	82-2765815	501(C)(3)	222,000.	0.			FAMILY JUSTICE CENTER FOR	
			, -				IN SUPPORT OF THE	
CITY OF CAMARILLO							CAMARILLO LIBRARY RFBC	
P.O. BOX 248							OPERATIONS AND MATERIAL	
CAMARILLO, CA 93011-0248	95-2313271	CITY OF CAMARILL	195,000.	0.			COSTS	
							TO SUPPORT THE CAMARILLO	
CAMARILLO HEALTH CARE DISTRICT							HEALTH CARE DISTRICT,	
3639 E. LAS POSAS RD., SUITE 117							ONLY TO BE USED FOR THE	
CAMARILLO, CA 93010	95-2834854		148,781.	0.			CARE-A-VAN SERVICE IN	
THE RELEASE OF STATE	JJ 2034034		140,701.	••			TO SUPPORT THE WILDFIRE	
UNITED POLICYHOLDERS							RISK REDUCTION AND ASSET	
							PROTECTION PROGRAM (WRAP)	
917 IRVING STREET, SUITE 4	94-3162024	E01/G\/3\	132,000.	0.				
SAN FRANCISCO, CA 94122	94-3162024	501(C)(3)	132,000.	0.			AND THE ROADMAP TO	
MEADOWIADW GEDUIGE LEAGUE								
MEADOWLARK SERVICE LEAGUE								
P.O. BOX 3063	02 5150004	501/61/21	100 000	_			IN SUPPORT OF GENERAL	
CAMARILLO, CA 93011-3063	23-7170994	501(C)(3)	100,000.	0.			CHARITABLE PURPOSES	
157.63							IN SUPPORT OF THE	
MESA							OPERATIONAL EXPENSES FOR	
335 ENCINO DR							THE ORGANIZATION'S TINY	
OAK VIEW, CA 93022	85-2978137	501(C)(3)	110,000.	0.			HOME AND WELLNESS CENTER	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
							IN SUPPORT OF	
THE CITY CENTER TRANSITIONAL							ESTABLISHING A 20X20	
LIVING - 837 E. THOMPSON BLVD -							LEARNING CENTER CAMPUS	
VENTURA, CA 93001	46-5674375	501(C)(3)	120,000.	0.			FOR CHILDREN OF THE	
							TO PROVIDE FUNDING FOR	
VENTURA COUNTY STAR							TWO REPORTING FELLOWSHIPS	
771 E. DAILY DRIVE, SUITE 300							AT THE VENTURA COUNTY	
CAMARILLO, CA 93010	47-1931054		100,000.	0.			STAR. THE JOURNALISTS	
							THE PURPOSE OF THIS GRANT	
COMMUNITY MEMORIAL HEALTH SYSTEM							IS FOR THE SALARIES FOR	
2674 E. MAIN ST, STE E #210							THE CAREGIVER NAVIGATION	
VENTURA, CA 93003	95-1683892	501(C)(3)	95,000.	0.			PROGRAM.	
THE SALVATION ARMY							IN SUPPORT OF THE	
30840 HAWTHORNE BLVD, BUILDING D -							SALVATION ARMY FOR USE IN	
GSD - RANCHO PALOS VERDES, CA							VENTURA COUNTY,	
90275	94-1156347	501(C)(3)	93,998.	0.			CALIFORNIA, PREFERABLY	
							TO PROVIDE HOME HARDENING	
CENTRAL VENTURA COUNTY FIRE SAFE							ASSESSMENTS AND	
COUNCIL - 5156 MCGRATH STREET,							IMPROVEMENTS TO 15	
SUITE 101 - VENTURA, CA 93003	27-1527559	501(C)(3)	82,500.	0.			HOUSEHOLDS IMPACTED BY	
							TO SUPPORT THE PURCHASE	
GREYFOOT CAT RESCUE							OF A VAN, AND A TNR	
P.O. BOX 310							COORDINATOR SALARY AND	
VENTURA, CA 93002	77-0501124	501(C)(3)	171,415.	0.			MEDICAL EMERGENCY CARE	
•								
OJAI RAPTOR CENTER								
P.O. BOX 182							TO PROVIDE VETERINARY	
OAK VIEW, CA 93022	77-0543286	501(C)(3)	75,000.	0.			MEDICAL SUPPORT	
			, , , , , , ,					
BOYS & GIRLS CLUB OF GREATER								
CONEJO VALLEY - 1 DOLE DRIVE #3331							IN SUPPORT OF GENERAL	
- WESTLAKE VILLAGE, CA 91362	91-2151731	501(C)(3)	70,713.	0.			CHARITABLE PURPOSES	
	22 2131,31		, , , , , , , , , , , , ,	· · ·			TO PROVIDE FUNDING FOR	
SIMI VALLEY HOSPITAL							SALARY EXPENSES FOR	
2975 N. SYCAMORE DR.							FAMILY CAREGIVER	
SIMI VALLEY, CA 93065	95-6064971	501(C)(3)	70,000.	0.			NAVIGATOR	
DIMI VAHIBI, CA 93003	73-00049/1	DOT (C)(3)	1 70,000.	٠.			NAVIGATOR	

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule i (Form 990), Pa T	π II.) Τ	Ī
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							IN SUPPORT OF REOPENING A
BOYS & GIRLS CLUB OF GREATER							DEDICATED CLUB WITHIN THE
OXNARD & PORT HUENEME - 1900 WEST							PLEASANT VALLEY VILLAGE
FIFTH STREET - OXNARD, CA 93030	95-1785162	501(C)(3)	124,450.	0.			PUBLIC HOUSING PROJECT.
							IN SUPPORT OF TRAINING AT
NATIONAL DISASTER SEARCH DOG							NATIONAL DISASTER SEARCH
FOUNDATION - 6800 WHEELER CANYON							DOG FOUNDATION AND TO
ROAD - SANTA PAULA, CA 93060	77-0412509	501(C)(3)	70,000.	0.			SUPPORT ANIMAL CARE
							TO PROVIDE SCHOLARSHIPS
VENTURA COLLEGE FOUNDATION							TO GRADUATES OF VENTURA
4667 TELEGRAPH ROAD							COMMUNITY COLLEGE WHO ARE
VENTURA, CA 93003	77-0037747	501(C)(3)	252,431.	0.			FURTHERING THEIR
ODD FELLOW-REBEKAH CHILDREN'S HOME							TO SUPPORT THE ODD
OF CALIFORNIA - 290 I.O.O.F AVENUE							FELLOWS CHILDREN'S HOME
- GILROY, CA 95020	94-1167402	501(C)(3)	59,106.	0.			AT GILROY, CA
							TO SUPPORT THE
PROJECT UNDERSTANDING OF SAN							HOMELESS2HOME PROGRAM AND
BUENAVENTURA - 2734 JOHNSON DRIVE,							TO PROVIDE SUPPORT TO
SUITE E - VENTURA, CA 93003	95-3246871	501(C)(3)	61,299.	0.			PROJECT UNDERSTANDING TO
							TO PROVIDE DIRECT
UNITED WAY OF VENTURA COUNTY							FINANCIAL ASSISTANCE TO
702 COUNTY SQUARE DR., STE 100							VICTIMS OF THE THOMAS
VENTURA, CA 93003	95-1945833	501(C)(3)	52,500.	0.			FIRE AND TO SUPPORT THE
CANCER SUPPORT COMMUNITY							
VALLEY/VENTURA/SANTA BARBARA - 530							
HAMPSHIRE ROAD - WESTLAKE VILLAGE,							IN SUPPORT OF GENERAL
CA 91361-2218	77-0205691	501(C)(3)	50,000.	0.			CHARITABLE PURPOSES
							TO PROVIDE FUNDING FOR
SARAH'S HOUSE							SARAH'S HOUSE FOR THE
P.O. BOX 941768							HIRING OF A FULL-TIME
SIMI VALLEY, CA 93094	77-0285794	501(C)(3)	65,000.	0.			CASE MANAGER AND TO
GE ANEWONN OF PARTY STEWS TO							
ST. ANTHONY OF PADUA CATHOLIC							TO PROVIDE GUEROST TOT
CHURCH - P.O. BOX 3 - MORRIS, IN	25 4005000	501/62/22	50.00	_			TO PROVIDE SUPPORT FOR
47033	35-1225802	DOT(G)(3)	50,000.	0.			CAPITAL IMPROVEMENT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	<b>vernments</b> (Sch	edule I (Form 990), Pa T	rt II.) T	T
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SURFCAT CAFE & ADOPTIONS							
4515 GATESHEAD BAY							TO SUPPORT THE RETAIL
OXNARD, CA 93035	47-3663662	501(C)(3)	50,000.	0.			ADOPTION FACILITY
THE ARC OF VENTURA COUNTY							
5103 WALKER ST.							IN SUPPORT OF GENERAL
VENTURA, CA 93003-7358	95-2266987	501(C)(3)	100,000.	0.			CHARITABLE PURPOSES
							IN SUPPORT OF THE
SANTA MONICA MOUNTAINS FUND							WILDLIFE INTERN PROGRAM,
401 W HILLCREST DRIVE							IN SUPPORT OF THE JULY
THOUSAND OAKS, CA 91360	95-4187832	501(C)(3)	106,524.	0.			14TH UPDATED PROPOSAL FOR
							TO PROVIDE PERMANENT AND
MUSEUM OF VENTURA COUNTY							ONGOING FINANCIAL SUPPORT
100 E. MAIN STREET							FOR THE MUSEUM OF VENTURA
VENTURA, CA 93001-2607	95-1942930	501(C)(3)	136,766.	0.			COUNTY'S EXECUTIVE
							TO PROVIDE GENERAL
805 UNDOCUFUND							OPERATING SUPPORT TO 805
2471 PORTOLA ROAD, SUITE 100							UNDOCUFUND TO CARRY OUT
VENTURA, CA 93003	86-2230353	501(C)(3)	53,832.	0.			ITS ROLE AND MISSION AS
							IN SUPPORT OF THE
LUCHA, INC.							LITERACY AND EMPOWERMENT
1008 HILLSIDE DRIVE							PROJECT THAT WILL OFFER A
SANTA PAULA, CA 93060	95-3400870	501(C)(3)	121,690.	0.			SERIES OF WORKSHOPS THAT
SANTA PAULA ANIMAL RESCUE CENTER							
705 E SANTA BARBARA STREET							TO SUPPORT NO COST SPAY
SANTA PAULA, CA 93060	45-4185395	501(C)(3)	40,000.	0.			AND NEUTER SERVICES
		(-)(-)	1 , , , , ,				IN SUPPORT OF LAUNCHING
YMCA-SOUTHEAST VENTURA COUNTY							THE MY GENIUS PROGRAM IN
31105 THOUSAND OAKS BLVD.							SIMI VALLEY UNIFIED
WESTLAKE VILLAGE, CA 91362	95-2305501	501(C)(3)	40,000.	0.			SCHOOL DISTRICT
			,	-			
SPAY/NEUTER ANIMAL NETWORK							
110 N OLIVE STREET, SUITE A & B							TO SUPPORT GENERAL
VENTURA, CA 93001	77-0316327	501(C)(3)	35,040.	0.			OPERATIONS

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T ago 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							IN SUPPORT OF A COMMUNITY
SOARING SPIRITS INTERNATIONAL							NEEDS AND PROGRAM
2828 COCHRAN STREET # 194				_			ASSESSMENT AND
SIMI VALLEY, CA 93065	38-3787893	501(C)(3)	35,000.	0.			DEVELOPMENT OF MARKETING
MIRACLE LEAGUE OF THE 805							IN SUPPORT OF THE MIRACLE
2310 PONDEROSA DRIVE, SUITE # 21							LEAGUE CHARITY BASEBALL
CAMARILLO, CA 93010	81-2907645	501(C)(3)	42,722.	0.			FIELD
			,				IN SUPPORT OF THE YOUTH
BOYS & GIRLS CLUB OF SANTA CLARA							PROGRAMS AT THREE CLUB
VALLEY - P.O. BOX 152 - SANTA							SITES IN SANTA PAULA,
PAULA, CA 93061	95-2497853	501(C)(3)	74,095.	0.			FILLMORE, AND PIRU AS
·			,				·
MOORPARK COLLEGE FOUNDATION							
7075 CAMPUS ROAD							TO SUPPORT THE PARROT
MOORPARK, CA 93021	95-3533986	501(C)(3)	30,000.	0.			AVIARY ENHANCEMENT
RAIN COMMUNITIES, INC.							
P.O. BOX 1934							IN SUPPORT OF GENERAL
CAMARILLO, CA 93011-1934	61-1419784	501(C)(3)	30,000.	0.			CHARITABLE PURPOSES
							IN SUPPORT OF THE HARMONY
NEW WEST SYMPHONY ASSOCIATION							PROJECT FOR THE
2100 THOUSAND OAKS BLVD., SUITE D							CELEBRATION CONCERT ON
THOUSAND OAKS, CA 91362	77-0406042	501(C)(3)	73,704.	0.			APRIL 30, 2022, AT
BUDDY NATION							
159 W PROSPECT ST							TO SUPPORT GENERAL
VENTURA, CA 93001	81-3432620	501(C)(3)	25,000.	0.			OPERATIONS
CENTRAL COAST ALLIANCE UNITED FOR							
A SUSTAINABLE ECONOMY - 2021							
SPERRY AVENUE, SUITE 9 - VENTURA,							IN SUPPORT OF GENERAL
CA 93003	77-0578864	501(C)(3)	25,000.	0.			OPERATIONS
							TO PROVIDE FUNDING FOR
CONEJO VALLEY SENIOR CONCERNS							THE SUPPORTIVE SERVICES
401 HODENCAMP ROAD							FOR SENIORS AND FAMILY
THOUSAND OAKS, CA 91360-5467	95-2992927	501(C)(3)	25,000.	0.			CAREGIVERS

(a) Name and address of organization or government (b) EN (c) IFO section of san grant or cash stance or sessitance or sessitanc	Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
ELADERS OF AMERICA   CADRESTIC AND   CADREST	` '	<b>(b)</b> EIN	` '	` '	noncash	valuation (book, FMV,		
P.O. BXX 51637								
ORNARD, CA 93031 77-0071036 501(C)(3) 25,000. 0. DEVELOPMENT  INTERFACE CHILDREN FAMILY SERVICES 4001 MISSION GAKS BLVD., SUITE I CAMARILLO, CA 93012-5121 95-2944459 501(C)(3) 34,900. 0. INDOMENTION SYSTEM (DRIE)  KIDSTREAM 3100 E. FONDEROSA DRIVE CAMARILLO, CA 93010 81-3055601 501(C)(3) 25,000. 0. PULFILL THEIR GREATEST  LIVINGSTON MEMORIAL, VNA 1996 EASTEMA AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. CHARITABLE PURPOSES  OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93000 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED  SACKED HEART CHURCH 1080 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. CAPITAL LIVENOVEMENTS AND ADMINISTRATE FREE CLINIC 2673 SAM MIGUAL CIRCLE THOUGHAND DAKS, CA 93060 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTEDOE DRIVE - VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS THOUGHAND DAKS, CA 93060 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTEDOE DRIVE - VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS THOUGHAND DAKS, CA 93003 95-600944 CUNTY OF VENTUR 51,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTEDOE DRIVE - VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH AND AWARRNSS ACTIVITIES AS HOUSENGLDS IMPACTED BY VACCINS OUTERACH BY VACCINS								
DOCUMPLETE THE   DEVELOPMENT OF THE								
INTERFACE CHILDREN FAMILY SERVICES   A010 MISSION OAKS BLVD., SUITE   CAMARILLO, CA 93012-5121   95-2944459 501(C)(3) 34,900. 0.   INFORMATION SYSTEM (DRIE)	OXNARD, CA 93031	77-0071036	501(C)(3)	25,000.	0.			
4001 MISSION OAKS BLVD., SUITE I CAMARILLO, CA 93012-5121 95-2944459 501(C)(3) 34,900. 0. IN SUPPORT OF THE KIDSTREAM 3100 B. PONDEROSA DRIVE CAMARILLO, CA 93010 81-3055601 501(C)(3) 25,000. 0. ELIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. ELIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. EARARILLO, CA 93006 PS-3594759 501(C)(3) 66,986. 0. EARARILLO, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSES EARTH APAULA, CA 93006 PS-3594759 501(C)(3) 66,986. 0. EARARILADE PURPOSES EARTH APAULA, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSES EARTH APAULA, CA 93006 PS-3594759 501(C)(3) 66,986. 0. EARARILADE PURPOSES EARTH APAULA, CA 93006 PS-3594759 501(C)(3) 66,986. 0. EARARILADE PURPOSES EARTH APAULA, CA 93006 PS-3594759 FOR CAPITAL IMPROVEMENTS AND MAINTENNANCE, PLEASE HOUSENDIAN MAY VENTURA, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSES EARTH APAULA, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSES EARTH APAULA, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSE EARARILADE PURPOSES EARARILADE PURPOSES EARTH APAULA, CA 93004 PS-1979938 501(C)(3) 25,000. 0. EARARILADE PURPOSE								
CAMARILLO, CA 93012-5121 95-2944459 501(C)(3) 34,900. 0. INFORMATION SYSTEM (DRIE)  KIDSTREAM 3100 B. PONDERGORA DRIVE CAMARILLO, CA 93010 81-3055601 501(C)(3) 25,000. 0. FULFILL THEIR GREATEST  LIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. HARITABLE PURPOSES  OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-3594759 501(C)(3) 25,000. 0. FOR CAPITAL INFROVMENTS SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-197938 501(C)(3) 25,000. 0. FOR CAPITAL INFROVMENTS SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-197938 501(C)(3) 25,000. 0. FOR CAPITAL INFROVMENTS SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-197938 501(C)(3) 25,000. 0. FOR CAPITAL INFROVMENTS SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-197938 501(C)(3) 25,000. 0. FOR CAPITAL INFROVMENTS AND MAINTENANCE, PLEASE THOUSAND DAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. FOR CAPITAL PROPORTION FOR CAPITAL P								
IN SUPPORT OF THE   MUSEUM'S NEXT STAGE OF	•							
MUSEUM'S NEXT STAGE OF DEVELOPMENT AND TO CAMARILLO, CA 9 3010   81-3055601 501(C)(3)   25,000.   0.   PULFILL THEIR GREATEST	CAMARILLO, CA 93012-5121	95-2944459	501(C)(3)	34,900.	0.			
3100 E. PONDEROSA DRIVE CAMARILLO, CA 93010  81-3055601  501(C)(3)  25,000.  0.  10.  11N SUPPORT OF GENERAL PURPOSES  LIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101  VENTURA, CA 9300.3-5768  95-1693538  501(C)(3)  25,000.  0.  11N SUPPORT OF GENERAL PURPOSES  TO CONDUCT COVID-19  VACCINE OUTREACH AND AWARRISS ACTIVITIES AS SANTA PAULA, CA 93060  95-3594759  501(C)(3)  50.  50.  50.  50.  50.  50.  50.  50								
CAMARILLO, CA 93010 81-3055601 501(C)(3) 25,000. 0. FULFILL THEIR GREATEST  LIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. CHARITABLE PURPOSES  OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED  SACRED HEART CHURCH 10800 HENDERSON ROAD  VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR  VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR  TO CONDUCT COVID-19 WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COVID-19. GRANTS WILL BE HUBENEMS SCHOOL DISTRICT 205 N. VENTURA ROAD  HUBERTINISTER FOR  IN SUPPORT OF GENERAL IN SUPPORT OF GENERAL  HUBENEMS SCHOOL DISTRICT  FURTHER SCHOOL DISTRICT  LIN SUPPORT OF GENERAL IN SUPPORT OF GENERAL  IN SUPPORT OF GENERAL  IN SUPPORT OF GENERAL  IN SUPPORT OF GENERAL  IN SUPPORT OF GENERAL  FURTHER SCHOOL DISTRICT	KIDSTREAM							MUSEUM'S NEXT STAGE OF
LIVINGSTON MEMORIAL, VNA 1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. CHARITABLE PURPOSES  TO CONDUCT COVID-19 VACCINE OUTREACH AND AWARENESS ACTIVITIES AS SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED  SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. DEFINED IN THE SIGNED  WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COVID-19. GRANTS TO DUALIFIED FARM WORKER HOUSEHOLDS IMPACTED BY VENTURA ROAD  LIBRANES CHOOL DISTRICT 205 N. VENTURA ROAD	3100 E. PONDEROSA DRIVE							DEVELOPMENT AND TO
1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. CHARITABLE PURPOSES  OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. DEFINED IN THE SIGNED NOTE THAT GRANT FUNDS MAY VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. LIBRARIES LOCATED IN THE	CAMARILLO, CA 93010	81-3055601	501(C)(3)	25,000.	0.			FULFILL THEIR GREATEST
1996 EASTMAN AVE., STE. 101 VENTURA, CA 93003-5768 95-1693538 501(C)(3) 25,000. 0. CHARITABLE PURPOSES  OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. DEFINED IN THE SIGNED NOTE THAT GRANT FUNDS MAY VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. LIBRARIES LOCATED IN THE								
VENTURA, CA 93003-5768   95-1693538   501(C)(3)   25,000.   0.   CHARITABLE PURPOSES	•							
OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR TO CONDUCT COVID-19 WESTMINSTER PREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED TO CONDUCT COVID-19 VACCINE OUTREACH AND AWARENESS ACTIVITIES AS TO COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. TO PROVIDE GRANTS WILL BE HUENNEME SCHOOL DISTRICT USUAL PROVIDE STRICT FOR CAPITAL IMPROVEMENTS AMARENESS ACTIVITIES AS TO PROVIDE GRANTS TO COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. DEFINED IN THE SIGNED TO PROVIDE SUAPCATED BY VENTURA ROAD LIBRARIES LOCATED IN THE	1996 EASTMAN AVE., STE. 101							IN SUPPORT OF GENERAL
OUR LADY OF GUADALUPE CHURCH 427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED FOR CAPITAL IMPROVEMENTS ADD MAINTENNACE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED VACCINE OUTREACH AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED TO COUNDIT COVID-19 WACCINE OUTREACH AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED TO PROVIDE GRANTS TO QUALIFIED FARM WORKER AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. DEFINED IN THE SIGNED TO PROVIDE GRANTS TO QUALIFIED FARM WORKER HUENEME SCHOOL DISTRICT UNDERSON ON THE SUPPORT TO THE HUENEME SCHOOL DISTRICT LIBRARIES LOCATED IN THE	VENTURA, CA 93003-5768	95-1693538	501(C)(3)	25,000.	0.			CHARITABLE PURPOSES
427 N. OAK STREET SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOTE BE USED FOR WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED TO PROVIDE GRANTS TO QUALIFIED FARM WORKER HOUSEHOLDS IMPACTED BY VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD								
SANTA PAULA, CA 93060 95-3594759 501(C)(3) 66,986. 0. DEFINED IN THE SIGNED  SACRED HEART CHURCH 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COVID-19. GRANTS WILL BE HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  DEFINED IN THE SIGNED  O. DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0.  TO PROVIDE SUPPORT TO THE	OUR LADY OF GUADALUPE CHURCH							VACCINE OUTREACH AND
FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE 10800 HENDERSON ROAD VENTURA, CA 93004 95-1979938 501(C)(3) 25,000. 0. NOT BE USED FOR TO CONDUCT COVID-19 WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  FOR CAPITAL IMPROVEMENTS AND MAINTENANCE, PLEASE NOTE THAT GRANT FUNDS MAY N	427 N. OAK STREET							AWARENESS ACTIVITIES AS
SACRED HEART CHURCH  10800 HENDERSON ROAD  VENTURA, CA 93004  95-1979938 501(c)(3)  25,000.  0.  NOT BE USED FOR  TO CONDUCT COVID-19  VACCINE OUTREACH AND  2673 SAN MIGUEL CIRCLE  THOUSAND OAKS, CA 91360  77-0563241 501(c)(3)  65,000.  0.  COUNTY OF VENTURA HUMAN SERVICES  AGENCY - 855 PARTRIDGE DRIVE -  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR 51,000.  0.  AND MAINTENANCE, PLEASE  NOTE THAT GRANT FUNDS MAY  VACCINE OUTREACH AND  AWARENESS ACTIVITIES AS  0.  DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  QUALIFIED FARM WORKER  HOUSEHOLDS IMPACTED BY  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  TO PROVIDE SUPPORT TO THE  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD	SANTA PAULA, CA 93060	95-3594759	501(C)(3)	66,986.	0.			DEFINED IN THE SIGNED
10800 HENDERSON ROAD  VENTURA, CA 93004  95-1979938 501(C)(3)  25,000.  0.  NOTE THAT GRANT FUNDS MAY  NOT BE USED FOR  TO CONDUCT COVID-19  VACCINE OUTREACH AND  AWARENESS ACTIVITIES AS  THOUSAND OAKS, CA 91360  77-0563241 501(C)(3)  65,000.  0.  DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  QUALIFIED FARM WORKER  HOUSEHOLDS IMPACTED BY  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR 51,000.  0.  TO PROVIDE SUPPORT TO THE  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD								FOR CAPITAL IMPROVEMENTS
VENTURA, CA 93004  95-1979938 501(C)(3)  25,000.  0.  NOT BE USED FOR  TO CONDUCT COVID-19  VACCINE OUTREACH AND  AWARENESS ACTIVITIES AS  THOUSAND OAKS, CA 91360  77-0563241 501(C)(3)  65,000.  0.  DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  QUALIFIED FARM WORKER  HOUSEHOLDS IMPACTED BY  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR 51,000.  0.  TO PROVIDE SUPPORT TO THE  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD	SACRED HEART CHURCH							AND MAINTENANCE, PLEASE
WESTMINSTER FREE CLINIC  2673 SAN MIGUEL CIRCLE  THOUSAND OAKS, CA 91360  77-0563241 501(C)(3)  65,000.  0.  DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  QUALIFIED FARM WORKER  HOUSEHOLDS IMPACTED BY  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD	10800 HENDERSON ROAD							NOTE THAT GRANT FUNDS MAY
WESTMINSTER FREE CLINIC  2673 SAN MIGUEL CIRCLE  THOUSAND OAKS, CA 91360  77-0563241 501(C)(3)  65,000.  0.  DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  QUALIFIED FARM WORKER  AGENCY - 855 PARTRIDGE DRIVE -  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD  VACCINE OUTREACH AND  AWARENESS ACTIVITIES AS  DEFINED IN THE SIGNED  O.  O.  O.  TO PROVIDE GRANTS TO  COVID-19. GRANTS WILL BE  PUBLIC ELEMENTARY SCHOOL  LIBRARIES LOCATED IN THE	VENTURA, CA 93004	95-1979938	501(C)(3)	25,000.	0.			NOT BE USED FOR
2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000.  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED  O. COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COVID-19. GRANTS WILL BE TO PROVIDE SUPPORT TO THE HUENEME SCHOOL DISTRICT LIBRARIES LOCATED IN THE								TO CONDUCT COVID-19
THOUSAND OAKS, CA 91360 77-0563241 501(C)(3) 65,000. 0. DEFINED IN THE SIGNED  TO PROVIDE GRANTS TO  COUNTY OF VENTURA HUMAN SERVICES AGENCY - 855 PARTRIDGE DRIVE -  VENTURA, CA 93003 95-6000944 COUNTY OF VENTUR 51,000. 0. COVID-19. GRANTS WILL BE  HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD LIBRARIES LOCATED IN THE	WESTMINSTER FREE CLINIC							VACCINE OUTREACH AND
TO PROVIDE GRANTS TO QUALIFIED FARM WORKER AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR 51,000.  0.  COVID-19. GRANTS WILL BE TO PROVIDE SUPPORT TO THE HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD	2673 SAN MIGUEL CIRCLE							AWARENESS ACTIVITIES AS
COUNTY OF VENTURA HUMAN SERVICES  AGENCY - 855 PARTRIDGE DRIVE -  VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  51,000.  0.  COVID-19. GRANTS WILL BE  TO PROVIDE SUPPORT TO THE  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD  LIBRARIES LOCATED IN THE	THOUSAND OAKS, CA 91360	77-0563241	501(C)(3)	65,000.	0.			DEFINED IN THE SIGNED
AGENCY - 855 PARTRIDGE DRIVE - VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  51,000.  0.  COVID-19. GRANTS WILL BE TO PROVIDE SUPPORT TO THE HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  HOUSEHOLDS IMPACTED BY COVID-19. GRANTS WILL BE TO PROVIDE SUPPORT TO THE LIBRARIES LOCATED IN THE								TO PROVIDE GRANTS TO
VENTURA, CA 93003  95-6000944 COUNTY OF VENTUR  51,000.  0.  COVID-19. GRANTS WILL BE  TO PROVIDE SUPPORT TO THE  HUENEME SCHOOL DISTRICT  205 N. VENTURA ROAD  LIBRARIES LOCATED IN THE	COUNTY OF VENTURA HUMAN SERVICES							QUALIFIED FARM WORKER
TO PROVIDE SUPPORT TO THE HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  TO PROVIDE SUPPORT TO THE	AGENCY - 855 PARTRIDGE DRIVE -							HOUSEHOLDS IMPACTED BY
HUENEME SCHOOL DISTRICT 205 N. VENTURA ROAD  PUBLIC ELEMENTARY SCHOOL LIBRARIES LOCATED IN THE	VENTURA, CA 93003	95-6000944	COUNTY OF VENTUR	51,000.	0.			COVID-19. GRANTS WILL BE
205 N. VENTURA ROAD								TO PROVIDE SUPPORT TO THE
	HUENEME SCHOOL DISTRICT							PUBLIC ELEMENTARY SCHOOL
	205 N. VENTURA ROAD							LIBRARIES LOCATED IN THE
	PORT HUENEME, CA 93041-3065	95-6001639	501(C)(3)	21,613.	0.			CITY OF PORT HUENEME

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO PROVIDE SUPPORT FOR
CONEJO RECREATION & PARK DISTRICT							CONEJO RECREATION & PARK
403 W. HILLCREST DRIVE							DISTRICT FOR THE PEER
THOUSAND OAKS, CA 91360-4223	95-2265201	CITY OF THOUSAND	20,800.	0.			MENTOR CAMP, THE YOUTH
							SUPPORT TO PADRES SERRA
ARCHDIOCESE OF LOS ANGELES							PARISH MUSIC MINISTRY,
3424 WILSHIRE BLVD., 6TH FLOOR	05 1640200	501/61/21	50.000	•			SUPPORT TO ST. JOHN'S
LOS ANGELES, CA 90010-2241	95-1642382	501(C)(3)	50,000.	0.			SEMINARY CAPITAL PROJECT
CALIFORNIA STATE UNIVERSITY							TO PROVIDE FUNDING FOR
NORTHRIDGE FOUNDATION - 18111							THE MATT WINN MEMORIAL
NORDHOFF STREET, VALERA HALL 110 -	05 6106006	E01/G)/3)	20 000	0.			EHSS SCHOLARSHIP AT
NORTHRIDGE, CA 91330-8296	95-6196006	501(0)(3)	20,000.	٠.			CALIFORNIA STATE TO PROVIDE SUPPORT FOR
CAMBOLIC CUADIMIES VENMINA COLLINAV							MOORPARK PANTRY PLUS FOR
CATHOLIC CHARITIES, VENTURA COUNTY 303 N. VENTURA AVENUE							THE "SHOE PROGRAM" AND
VENTURA, CA 93001	95-1690973	501 (C) (3)	20,000.	0.			THE "SENIOR BACKPACK AND
LOS ANGELES PHILHARMONIC	JJ 10J0J73	501(0)(3)	20,000.	٠.			THE BENTOK BACKFACK AND
ASSOCIATION - C/O FRIENDS AND							
PATRONS OF THE LA PHIL, 151 S							IN SUPPORT OF THE ANNUAL
GRAND AVE - LOS ANGELES, CA 90012	95-1696734	501(C)(3)	20,000.	0.			FUND
	30 2030701	552(5)(5)	20,000.	-			IN SUPPORT OF THE
MANY MANSIONS							CHILDREN'S SERVICE IMPACT
1259 E. THOUSAND OAKS BLVD.							PROGRAM AND TO PROVIDE
THOUSAND OAKS, CA 91362	95-3424516	501(C)(3)	35,000.	0.			FUNDING FOR THE
·			,				IN SUPPORT OF THE MARK
OAKS CHRISTIAN SCHOOL							AND JACOB ISKANDER
31749 LA TIENDA DRIVE							SCHOLARSHIP AT OAKS
WESTLAKE VILLAGE, CA 91362	95-4656912	501(C)(3)	20,000.	0.			CHRISTIAN SCHOOL
							IN SUPPORT OF THE BRAVO!
OJAI MUSIC FESTIVAL							EDUCATION THROUGH MUSIC
P.O. BOX 185							(ETM) PROGRAM EXPANSION
OJAI, CA 93024	95-2122508	501(C)(3)	40,000.	0.			TO THE SUNSET ELEMENTARY
SIMI VALLEY NON-PROFIT SPAY AND							TO SUPPORT GENERAL
NEUTER CLINIC, INC 1659 E LOS							OPERATIONS AND TO PROVIDE
ANGELES AVE - SIMI VALLEY, CA							FUNDING FOR THE PURCHASE
93065	77-0568506	501(C)(3)	29,710.	0.			OF A SURGICAL TABLE GIFT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. JOHN'S HEALTHCARE FOUNDATION,							RESTRICTED SUPPORT TO ST.
OXNARD & PLEASANT VALLEY - 1600							JOHN'S REGIONAL EMERGENCY
NORTH ROSE AVENUE - OXNARD, CA							MENTAL HEALTH SERVICES
93030	20-2865781	501(C)(3)	81,250.	0.			UNIT AND IN SUPPORT OF
VENTURA COUNTY TAXPAYERS							TO PROVIDE FUNDING FOR
FOUNDATION - P.O. BOX 3878 -							ECONOMIST RESEARCH &
VENTURA, CA 93006	88-2295308	501(C)(3)	20,000.	0.			SPEAKING FEES
VENTORA, CA 93000	00-2293300	501(0)(3)	20,000.	0.			SPEARING PEES
VENTURA LAND TRUST							TO PROVIDE FUNDING FOR
P.O. BOX 1284							THE STEWARDSHIP OF THE
VENTURA, CA 93002	01-0769456	501(C)(3)	18,000.	0.			HARMON CANYON PRESERVE
·			,				TO PROVIDE FUNDING FOR AN
CEC/SEABEE HISTORICAL FOUNDATION							UPDATED WI-FI / INTERNET
P.O. BOX 657							SYSTEM (\$4,000) AND
GULFPORT, MS 39502-0657	58-1998577	501(C)(3)	15,000.	0.			TRANSPORTATION FOR
			,				TO CONDUCT COVID-19
CHILD DEVELOPMENT RESOURCES							VACCINE OUTREACH AND
221 E. VENTURA BOULEVARD							AWARENESS ACTIVITIES AS
OXNARD, CA 93036	95-3543275	501(C)(3)	15,000.	0.			DEFINED IN THE SIGNED
·			·				TO CONDUCT COVID-19
CONEJO FREE CLINIC							VACCINE OUTREACH AND
80 E. HILLCREST DR. SUITE 102							AWARENESS ACTIVITIES AS
THOUSAND OAKS, CA 91360-4219	95-3177953	501(C)(3)	25,000.	0.			DEFINED IN THE SIGNED
							TO SUPPORT THE ONGOING
OXNARD COMMUNITY K-9 FOUNDATION							OPERATIONAL COSTS
251 SOUTH "C" STREET							INCLUDING OFF-DUTY CARE,
OXNARD, CA 93030	27-4954316	501(C)(3)	15,000.	0.			EQUIPMENT, FOOD, AND
							IN SUPPORT OF THE GIVEN
CATE SCHOOL							FAMILY ENDOWMENT FUND AND
1960 CATE MESA ROAD							IN SUPPORT OF THE CATE
CARPINTERIA, CA 93013	95-1644630	501(C)(3)	12,500.	0.			SCHOOL ANNUAL FUND
							TO CONDUCT COVID-19
OXNARD PERFORMING ARTS CENTER							VACCINE OUTREACH AND
CORPORATION - 800 HOBSON WAY -							AWARENESS ACTIVITIES, TO
OXNARD, CA 93030	77-0524980	501(C)(3)	49,500.	0.			SUPPORT THE RESCUECON

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNCIL ON AMERICAN-ISLAMIC							TO PROVIDE EDUCATION AND
RELATIONS CA - 2180 W CRESCENT							OUTREACH TO SUPPORT THE
AVE, SUITE F - ANAHEIM, CA							VENTURA COUNTY
92801-3842	77-0411194	501(C)(3)	11,230.	0.			REDISTRICTING PROCESS
							TO SUPPORT THE CALIFORNIA
CALIFORNIA OIL MUSEUM							OIL MUSEUM AND ITS
P.O. BOX 48							PROGRAMS AS DEFINED IN
SANTA PAULA, CA 93061-0048	45-3830307	501(C)(3)	10,981.	0.			ITS MISSION STATEMENT
							TO CONDUCT COVID-19
OXNARD ALANO CLUB							VACCINE OUTREACH AND
4910 S C ST							AWARENESS ACTIVITIES AS
OXNARD, CA 93033	95-2756184	501(C)(3)	10,500.	0.			DEFINED IN THE SIGNED
							TO PROVIDE EDUCATION AND
FAITH MISSION CHRISTIAN FELLOWSHIP							OUTREACH TO SUPPORT THE
483 BLOOMFIELD PL							VENTURA COUNTY
CAMARILLO, CA 93012	82-4764542	501(C)(3)	17,500.	0.			REDISTRICTING PROCESS AND
							FOR GENERAL OPERATING
FELLOWSHIP OF CHRISTIAN ATHLETES							SUPPORT SPECIFICALLY FOR
8701 LEEDS ROAD							THE SOUTH VENTURA COUNTY
KANSAS CITY, MO 64129	44-0610626	501(C)(3)	10,000.	0.			CHAPTER IN CALIFORNIA
							TO CONDUCT COVID-19
FOOD SHARE, INC.							VACCINE OUTREACH AND
4156 SOUTHBANK ROAD							AWARENESS ACTIVITIES AS
OXNARD, CA 93036	77-0018162	501(C)(3)	130,000.	0.			DEFINED IN THE SIGNED
HILLSDALE COLLEGE							
33 E COLLEGE ST.							IN SUPPORT OF GENERAL
HILLSDALE, MI 49242	38-1374230	501(C)(3)	10,000.	0.			CHARITABLE PURPOSES
MANNA CONEJO VALLEY FOOD							IN SUPPORT OF FEEDING OUR
DISTRIBUTION CENTER, INC P.O.							NEIGHBORS CONEJO VALLEY
BOX 1114 - THOUSAND OAKS, CA 91358	95-3413415	501(C)(3)	10,000.	0.			FOOD BANK
MICHAEL P. NOSCO FOUNDATION, INC.							
3248 HANOVER CT							IN SUPPORT OF GENERAL
NEWBURY PARK, CA 91320	45-3794018	501(C)(3)	10,000.	0.			CHARITABLE PURPOSES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO PROVIDE OPPORTUNITIES
REALITY VENTURA							FOR CHILDREN, YOUTH AND
1954 GOODYEAR AVENUE							ADULTS TO SERVE THE
VENTURA, CA 93003	82-2394675	501(C)(3)	10,000.	0.			COMMUNITY IN ASSISTING
REVIVE COMMUNITY CHURCH							TO CONDUCT COVID-19
P.O. BOX 575							VACCINE OUTREACH AND
OXNARD, CA 93032	84-1910131	501(C)(3)	10,000.	0.			AWARENESS ACTIVITIES
CIMME, CIL 3505E	01 1310131	501(0)(3)	10,000.	•			THE STATE OF THE S
RUBICON THEATRE COMPANY							
1006 EAST MAIN STREET							TO PROVIDE FUNDING FOR
VENTURA, CA 93001-0048	77-0495901	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPOR
,			,				TO SUPPORT THE CHARITABL
SANTA PAULA ART MUSEUM							MISSION OF THE
117 NORTH 10TH STREET							ORGANIZATION AND IN
SANTA PAULA, CA 93060-2877	92-0179722	501(C)(3)	35,544.	0.			SUPPORT OF THE OPERATING
			,				TO CONDUCT COVID-19
SANTA PAULA CHAMBER OF COMMERCE							VACCINE OUTREACH AND
P.O. BOX 1							AWARENESS ACTIVITIES AS
SANTA PAULA, CA 93061	95-1192410	501(C)(3)	20,000.	0.			DEFINED IN THE SIGNED
,			,				TO PROVIDE FUNDING FOR
SPIRIT OF SANTA PAULA							THE ONGOING SUPPORT OF
P.O. BOX 728							THE HOMELESS SHELTER CAS
SANTA PAULA, CA 93061	27-0005506	501(C)(3)	30,000.	0.			MANAGER AND TO PROVIDE
ST. JUDE THE APOSTLE CATHOLIC							IN SUPPORT OF LOAVES &
CHURCH - 32032 WEST LINDERO CANYON							FISHES UNRESTRICTED USE
ROAD - WESTLAKE VILLAGE, CA							  PLEASE SEE ATTACHED LIST
91361-4270	95-2758216	501(C)(3)	10,000.	0.			OF SERVICE ORGANIZATIONS
			<u> </u>				
THE RONALD REAGAN PRESIDENTIAL							
FOUNDATION - 40 PRESIDENTIAL DRIVE							IN SUPPORT OF GENERAL
- SIMI VALLEY, CA 93065	77-0054631	501(C)(3)	10,000.	0.			CHARITABLE PURPOSES
			1				TO PROVIDE FUNDING FOR
TURNING POINT FOUNDATION							SECURITY ENHANCEMENTS
P.O. BOX 24397							(FENCING AND LIGHTING) A
VENTURA, CA 93002	77-0213467	501(C)(3)	10,000.	0.			RIVER HAVEN

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO PROVIDE FUNDING FOR
VENTURA COUNTY FAMILY JUSTICE							THE NECESSARY
CENTER FOUNDATION - 3170 LOMA							INFRASTRUCTURE FOR THE
VISTA ROAD - VENTURA, CA 93003	82-2765815	501(C)(3)	10,000.	0.			PETS OF THE RESIDENTS IN
VENTURA MUSIC FESTIVAL ASSOCIATION							
472 E. SANTA CLARA STREET							TO PROVIDE FUNDING FOR
VENTURA, CA 93001	77-0314562	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
	,, 0011001		20,000.	•			TO PROVIDE EDUCATION AND
YMCA - SOUTHEAST VENTURA COUNTY							OUTREACH TO SUPPORT THE
31105 THOUSAND OAKS BLVD.							VENTURA COUNTY
WESTLAKE VILLAGE, CA 91362	95-2305501	501(C)(3)	10,000.	0.			REDISTRICTING PROCESS
CENTER FOR SPIRITUAL LIVING, SIMI		(-,(-,					TO SUPPORT THE SIMI
VALLEY CHURCH OF RELIGIOUS - 1756							VALLEY CHURCH OF
ERRINGER ROAD #100 - SIMI VALLEY,							RELIGIOUS SCIENCE BEA
CA 93065	77-0071366	501(C)(3)	9,558.	0.			THOMPSON MAKE A
	77 0072000		7,000.	•			
CARING HAND FOR CHILDREN							
6901 MCLAREN AVE.							IN SUPPORT OF GENERAL
WEST HILLS, CA 91307	91-2102436	501(C)(3)	9,500.	0.			EXPENSES
mbr mrab, on side,	31 2102130	301(0)(3)	3,300.	•			
MOUNT VERNON LADIES ASSOCIATION							
P.O. BOX 110							IN SUPPORT OF RESTORING
MOUNT VERNON, VA 22121	54-0564701	501(C)(3)	9,000.	0.			THE MANSION APPEAL
NYELAND PROMISE							TO CONDUCT COVID-19
3701 ORANGE DRIVE							VACCINE OUTREACH AND
OXNARD, CA 93036	83-2109489	501(C)(3)	17,040.	0.			AWARENESS ACTIVITIES
							IN SUPPORT OF THE IMAGINE
OJAI VALLEY SCHOOL							CONCERT FEATURING THE
723 EL PASEO ROAD							OJAI O'DAIKO TAIKO
OJAI, CA 93023	95-1661099	501(C)(3)	7,600.	0.			DRUMMING GROUP AS
							IN SUPPORT OF GENERAL
H.O.M.E. INC., D.B.A. NINOS DE							CHARITABLE USES AND
BAJA - 2390-C LAS POSAS RD #169 -							PURPOSES GENERAL
CAMARILLO, CA 93010	33-0119870	501(C)(3)	7,500.	0.			ADMINISTRATION AND OTHER

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE NER SIMCHA 5737 KANAN ROAD, UNIT 176 AGOURA HILLS, CA 91301	47-2556081	501(C)(3)	7,500.	0.			IN SUPPORT OF GENERAL CHARITABLE USES AND PURPOSES NEW YEAR DONATION
SOCIAL JUSTICE FUND FOR VENTURA COUNTY - P.O. BOX 1271 - CAMARILLO, CA 93011	46-2569938	501(C)(3)	14,000.	0.			TO SUPPORT AND CELEBRATE THE LEADERSHIP AND EFFORTS OF TWO SOCIAL JUSTICE FUND FELLOWS: FO
THE GARDEN CONSERVANCY P.O. BOX 608 GARRISON, NY 10524	13-3570145	501(C)(3)	7,000.	0.			IN SUPPORT OF A DIVIDE GIFT, FOR FILM DOCUMENTATION AND FOR GARDEN PRESERVATION
CHANNEL ISLANDS YMCA-VENTURA FAMILY BRANCH - 3760 TELEGRAPH RD VENTURA, CA 93003	95-1643379	501(C)(3)	6,486.	0.			TO SUPPORT THE CHANNEL ISLANDS YMCA-VENTURA FAMILY BRANCH
CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS - 1 UNIVERSITY DRIVE - CAMARILLO, CA 93012	91-2153805	501(C)(3)	6,050.	0.			TO SUPPORT THE IMPLEMENTATION OF THE CAREGIVER INITIATIVE ASSESSMENT TOOL
INTERNATIONAL OCD FOUNDATION, INC. P.O. BOX 961029 BOSTON, MA 02196	22-2894564	501(C)(3)	6,000.	0.			IN SUPPORT OF GENERAL RESEARCH

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					APPLICATION PROCESS DRIVEN BY
					SCHOLARSHIP FUND PARAMETERS,
CHOLARSHIPS PAID TO VARIOUS EDUCATIONAL					OVERSEEN BY SCHOLARSHIP
NSTITUTIONS	312	1,373,650.	0.		COMMITTEE AND RATIFIED BY VCCF
					FINANCIAL ASSISTANCE TO
					REBUILD HOMES AFTER WILDFIRE
UNDING FOR DISASTER VICTIMS	5	408,000.	0.		DISASTERS
Part IV Supplemental Information. Provide the information					1

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

PART I, LINE 2:

VCCF MAINTAINS DOCUMENTS BASED ON THE FUNDHOLDERS GRANT REQUEST AND THE

ACTUAL FUND PURPOSE AND COMPARES BEFORE ANY GRANTS ARE MADE. IN ADDITION,

ALL GRANTS ARE APPROVED BY THE VCCF BOARD OF DIRECTORS. WE DO DUE DILIGENCE

WORK TO CONFIRM A GRANTEES GOOD STANDING WITH THE ATTORNEY GENERAL

REPORTING REQUIREMENTS AND STATUS WITH THE IRS. ALL GRANTEES RECEIVED A

LETTER IDENTIFYING THE PURPOSE WHICH FURTHER EXPLAINS THAT CASHING OF THE

CHECK CONFIRMS THEIR COMPLIANCE WITH THE DESIGNATED PURPOSE.

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF THOUSAND OAKS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FINANCIAL SUPPORT TO THE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE WILDFIRE RISK

REDUCTION AND ASSET PROTECTION PROGRAM (WRAP) AND THE ROADMAP TO RECOVERY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE HOME HARDENING

ASSESSMENTS AND IMPROVEMENTS TO 15 HOUSEHOLDS IMPACTED BY THE THOMAS FIRE

AND TO SUPPORT THE ADMINISTRATIVE COSTS OF IMPLEMENTING THE CALIFORNIA

Schedule I (Form 990) VENTURA COUNTY COMMUNITY FOUNDATION	77-0165029	Page 2
Part IV Supplemental Information		
FIRE FOUNDATION GRANT		
NAME OF ORGANIZATION OR GOVERNMENT:		
BOYS & GIRLS CLUB OF GREATER OXNARD & PORT HUENEME		
(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF REOPENING A DEDICATED		
CLUB WITHIN THE PLEASANT VALLEY VILLAGE PUBLIC HOUSING PROJECT. THIS		
PROGRAM WILL PROVIDE EVIDENCE-BASED APPROACHES OF ACADEMIC SUPPORT AND		
SOCIAL/EMOTIONAL HEALTH FOR APPROXIMATELY 60 SOUTH OXNARD KIDS, TEENS,		
AND ADULTS. FUNDING SUPPORT TO EXPAND OUTREACH EFFORTS, TO SERVE		
ADDITIONAL MEMBERS, AND TO GUIDE YOUNG PEOPLE TOWARD GREAT FUTURES AS		
DESCRIBED IN THE YOUTH AND FAMILY OUTREACH BUDGET 2021-2022. TO PROVIDE		
EDUCATION AND OUTREACH TO SUPPORT THE VENTURA COUNTY REDISTRICTING		
PROCESS. LASTLY, IN SUPPORT OF GENERAL CHARITABLE PURPOSES.		
NAME OF ORGANIZATION OR GOVERNMENT:		
NATIONAL DISASTER SEARCH DOG FOUNDATION		
(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF TRAINING AT NATIONAL		
DISASTER SEARCH DOG FOUNDATION AND TO SUPPORT ANIMAL CARE ACTIVITIES		
NAME OF ORGANIZATION OR GOVERNMENT: VENTURA COLLEGE FOUNDATION		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE SCHOLARSHIPS TO GRADUATES		
OF VENTURA COMMUNITY COLLEGE WHO ARE FURTHERING THEIR EDUCATION AT ANY		
4-YEAR COLLEGE OR UNIVERSITY AND TO SUPPORT VETERINARY TECHNICAL		
EQUIPMENT AND TWO PART-TIME INSTRUCTIONAL ASSISTANT TO SUPPORT THE		
VENTURA COLLEGE VETERINARY TECHNOLOGY PROGRAM		
NAME OF ORGANIZATION OR GOVERNMENT:		
PROJECT UNDERSTANDING OF SAN BUENAVENTURA		

OF GEORGE STUART'S HISTORICAL FIGURES AND/OR REPAIRS AND IMPROVEMENTS TO

FOR THE PURCHASE, MAINTENANCE, AND RESTORATION OF THE MUSEUM'S COLLECTION

(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF THE YOUTH PROGRAMS AT

THREE CLUB SITES IN SANTA PAULA, FILLMORE, AND PIRU AS DESCRIBED IN THE

BOYS & GIRLS CLUB OF SANTA CLARA VALLEY AFTERSCHOOL STEM ACADEMY BUDGET

OF GUADALUPE.

Schedule I (Form 990)

REDISTRICTING PROCESS AND IN SUPPORT OF THE ESPERANZA PROJECT AT OUR LADY

Part IV Supplemental Information
NAME OF ORGANIZATION OR GOVERNMENT: SACRED HEART CHURCH
(H) PURPOSE OF GRANT OR ASSISTANCE: FOR CAPITAL IMPROVEMENTS AND
MAINTENANCE, PLEASE NOTE THAT GRANT FUNDS MAY NOT BE USED FOR
ADMINISTRATIVE PURPOSES
NAME OF ORGANIZATION OR GOVERNMENT: WESTMINSTER FREE CLINIC
(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT COVID-19 VACCINE OUTREACH
AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED AGREEMENT WITH VCCF,
AND IN SUPPORT OF GENERAL CHARITABLE USES AND PURPOSES WHERE MOST NEEDED
NAME OF ORGANIZATION OR GOVERNMENT:
COUNTY OF VENTURA HUMAN SERVICES AGENCY
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE GRANTS TO QUALIFIED FARM
WORKER HOUSEHOLDS IMPACTED BY COVID-19. GRANTS WILL BE ADMINISTERED BY
THE FARMWORKER RESOURCE PROGRAM UNDER DIRECTION OF HSA MANAGERS
NAME OF ORGANIZATION OR GOVERNMENT: CONEJO RECREATION & PARK DISTRICT
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE SUPPORT FOR CONEJO
RECREATION & PARK DISTRICT FOR THE PEER MENTOR CAMP, THE YOUTH SUMMER
CAMP, SCHOLARSHIPS, THE STARLIGHT BALL, AND GRAYSON'S
NAME OF ORGANIZATION OR GOVERNMENT: ARCHDIOCESE OF LOS ANGELES
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO PADRES SERRA PARISH MUSIC
MINISTRY, SUPPORT TO ST. JOHN'S SEMINARY CAPITAL PROJECT AND IN SUPPORT
OF THE CALLED TO RENEW CAMPAIGN WITH CREDIT TO ST. MAXIMILION KOLBE
NAME OF ORGANIZATION OR GOVERNMENT:

REGIONAL EMERGENCY MENTAL HEALTH SERVICES UNIT AND IN SUPPORT OF SALARY

PART OF HIS 45TH ANNIVERSARY TOUR ACROSS AMERICA.

Schedule I (Form 990) VENTURA COUNTY COMMUNITY FOUNDATION  Part IV   Supplemental Information	77-0165029	Page 2
Part IV Supplemental Information		
NAME OF ORGANIZATION OR GOVERNMENT: OXNARD ALANO CLUB		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT COVID-19 VACCINE OUTREACH		
AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED AGREEMENT WITH VCCF		
NAME OF ORGANIZATION OR GOVERNMENT: FAITH MISSION CHRISTIAN FELLOWSHIP		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EDUCATION AND OUTREACH TO		
SUPPORT THE VENTURA COUNTY REDISTRICTING PROCESS AND TO CONDUCT COVID-19		
VACCINE OUTREACH AND AWARENESS ACTIVITIES		
NAME OF ORGANIZATION OR GOVERNMENT: FOOD SHARE, INC.		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT COVID-19 VACCINE OUTREACH		
AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED AGREEMENT WITH VCCF AND		
TO SUPPORT THE CHARITABLE MISSION OF THE ORGANIZATION		
NAME OF ORGANIZATION OR GOVERNMENT: REALITY VENTURA		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE OPPORTUNITIES FOR		
CHILDREN, YOUTH AND ADULTS TO SERVE THE COMMUNITY IN ASSISTING WITH		
PRACTICAL, EMOTIONAL AND EDUCATIONAL NEEDS		
NAME OF ORGANIZATION OR GOVERNMENT: SANTA PAULA ART MUSEUM		
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE CHARITABLE MISSION OF		
THE ORGANIZATION AND IN SUPPORT OF THE OPERATING BUDGET OF THE SANTA		
PAULA MUSEUM OF ART		
NAME OF ODGANIZATION OF GOVERNMENT GANTA DAVIA GUANDED OF GOVERNO		
NAME OF ORGANIZATION OR GOVERNMENT: SANTA PAULA CHAMBER OF COMMERCE  (H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT COVID-19 VACCINE OUTREACH		
AND AWARENESS ACTIVITIES AS DEFINED IN THE SIGNED AGREEMENT WITH VCCF	Schedule I	(Form 990)

132291 04-01-21

Supplemental Information
NAME OF ORGANIZATION OR GOVERNMENT: SPIRIT OF SANTA PAULA
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDING FOR THE ONGOING
SUPPORT OF THE HOMELESS SHELTER CASE MANAGER AND TO PROVIDE FUNDING FOR
THE SPIRIT OF SANTA PAULA AUDIT
NAME OF ORGANIZATION OR GOVERNMENT: ST. JUDE THE APOSTLE CATHOLIC CHURCH
(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF LOAVES & FISHES
UNRESTRICTED USE PLEASE SEE ATTACHED LIST OF SERVICE ORGANIZATIONS ON
FILE WITH VCCF
NAME OF ORGANIZATION OR GOVERNMENT:
VENTURA COUNTY FAMILY JUSTICE CENTER FOUNDATION
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDING FOR THE NECESSARY
INFRASTRUCTURE FOR THE PETS OF THE RESIDENTS IN THE 4-UNIT TINY HOMES.
NAME OF ORGANIZATION OR GOVERNMENT:
CENTER FOR SPIRITUAL LIVING, SIMI VALLEY CHURCH OF RELIGIOUS
(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE SIMI VALLEY CHURCH OF
RELIGIOUS SCIENCE BEA THOMPSON MAKE A DIFFERENCE AWARD PROGRAM
NAME OF ORGANIZATION OR GOVERNMENT: OJAI VALLEY SCHOOL
(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF THE IMAGINE CONCERT
FEATURING THE OJAI O'DAIKO TAIKO DRUMMING GROUP AS PRESENTED BY THE OJAI
VALLEY SCHOOL AND THE OJAI MUSIC FESTIVAL AS PART OF THE BRAVO EDUCATION
PROGRAM
NAME OF ORGANIZATION OR GOVERNMENT: H.O.M.E. INC., D.B.A. NINOS DE BAJA

# SCHEDULE J (Form 990)

**Compensation Information** 

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

**2021** 

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

VENTURA COUNTY COMMUNITY FOUNDATION

Employer identification number 77-0165029

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		х
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	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		77	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		<u> </u>

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

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) VANESSA BECHTEL	(i)	248,682.	48,300.	0.	17,967.	6,133.	321,082.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BONITA GILLES	(i)	199,178.	29,321.	0.	13,875.	0.	242,374.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFFREY LAMBERT	(i)	164,771.	17,500.	0.	2,647.	11,242.	196,160.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TRACY TAGAWA	(i)	121,087.	20,250.	0.	3,446.	7,990.	152,773.	0.
CHIEF COMPLIANCE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 7:
THE VCCF BOARD OF DIRECTORS APPROVED A BONUS PAY STRUCTURE FOR THE
EXECUTIVE STAFF. THE CEO HAS A RANGE OF 0 TO 20%, AND THE CFO, CCO AND COO
HAVE RANGES FROM 5 TO 15%. THE BOARD APPROVES THE BONUS FOR THE OFFICERS
(CEO AND CFO) AND THE CEO APPROVES OTHER BONUSES. THESE BONUSES ARE
DETERMINED AND RECOMMENDED BASED ON THE ANNUAL REVIEW CYCLE FOR THE
EMPLOYEES.

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

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990.

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

Employer identification number VENTURA COUNTY COMMUNITY FOUNDATION 77-0165029

Par	TI Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of det		_	
		applicable		Form 990, Part VIII, line 1g	noncash contribu	tion an	nounts	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	9	5,562,332.	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							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other • ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	_	·				0	
	for which the organization completed Form 8283	3, Part V, D	onee Acknowledg	ement <b>29</b>			0	
<b>00</b> -	Don't a the control of the control o			and and the Donat I. Black of Manager			Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date					20-		Х
<b>L</b>	exempt purposes for the entire holding period?					30a		
	If "Yes," describe the arrangement in Part II.  Does the organization have a gift acceptance po	olicy that ro	auires the review o	of any nonstandard contribut	ions?	24	х	
31 322	Does the organization hire or use third parties of	•	•	•		31		
JZd		``	3	,,		32a		х
h	If "Yes," describe in Part II.					J_A		
33	If the organization didn't report an amount in co	lumn (c) for	a type of property	for which column (a) is chec	ked.			
55	describe in Part II.	(0) 101	a type of property	10. Willott Colditiit (a) 10 Offec	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

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

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## SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2021 Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

VENTURA COUNTY COMMUNITY FOUNDATION

Employer identification number 77-0165029

PART VI, SECTION B, LINE 11B: THE VCCF AUDIT COMMITTEE WILL REVIEW THE PUBLIC VERSION OF FORM 990 IN CONJUNCTION WITH THE CORRESPONDING AUDITED FINANCIAL STATEMENTS AND SUBMIT THEM FOR APPROVAL TO THE FULL BOARD OF DIRECTORS AS TWO SEPARATE VOTES. ALL VCCF BOARD OF DIRECTORS AND OFFICERS RECEIVED THE FORM 990 IMMEDIATELY BEFORE FILING. THE TAX RETURN IS SIGNED BY EITHER THE PRESIDENT & CEO OR CFO AT THE TIME OF SUBMITTAL, FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS. VCCF SCHOLARSHIP AND INVESTMENT COMMITTEES. RECOGNIZED BY THE VCCF BOARD OF DIRECTORS. STAFF AND ANY RECURRENT VOLUNTEERS ARE REQUIRED TO SIGN AND COMPLY WITH THE POLICY ANNUALLY. THE BOARD AND MANAGEMENT REGULARLY MONITORS FOR POTENTIAL CONFLICTS OF INTEREST. IF A CONFLICT IS FOUND TO EXIST. THE PERSON WITH THE CONFLICT IS ASKED TO RECUSE HIM/HERSELF FROM ANY VOTING ON RELATED MATTERS. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION AND PROPOSED INCREASES FOR SENIOR MANAGEMENT IS COMPARED WITH SALARY DATA PROVIDED BY THE SOUTHERN CALIFORNIA GRANTMAKERS COMPENSATION LEAGUE OF CALIFORNIA COMMUNITY FOUNDATIONS AND COUNCIL ON FOUNDATIONS NATIONAL DATA TO ENSURE REASONABLENESS FORM 990, PART VI, SECTION C, LINE 19: VCCF POSTED THE FORM 990 ON ITS WEBSITE AND PROVIDED IT UPON REQUEST IN EITHER ELECTRONIC OR PRINTED FORM. ALL GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST AND PROVIDED WITHIN ONE BUSINESS DAY. REQUESTS CAN BE MADE AT LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

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Schedule O (Form 990) 2021		Page 2
Name of the organization  VENTURA COUNTY COMMUNITY FOUNDATION		Employer identification number 77-0165029
WWW.VCCF.ORG.		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
CHANGE IN VALUE OF SPLIT INTEREST TRUSTS	-85,592.	
CHANGE IN VALUE OF INTEREST RATE SWAP	1,412,594.	
TOTAL TO FORM 990, PART XI, LINE 9	1,327,002.	
, ,		

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

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

VENTURA COUNTY COMMUN		77-0165029			
Part I Identification of Disregarded Entities. Complet	e if the organization answered "Yes" o	n Form 990, Part IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
VCCF NONPROFIT CENTER LLC - 46-0705326	RENTAL OF OFFICE BUILDING				
4001 MISSION OAKS BLVD., SUITE A	TO LOCAL NON-PROFIT				VENTURA COUNTY
CAMARILLO, CA 93012	ORGANIZATIONS	CALIFORNIA	1,193,705.	9,745,359.	COMMUNITY FOUNDATION
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization an	swered "Yes" on Form 990, Pa	rt IV, line 34, becaus	e it had one or more	related tax-exempt

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr ent	rolled
				501(c)(3))		Yes	No
MARTIN V AND MARTHA K SMITH FOUNDATION -	TO ENHANCE THE QUALITY OF				VENTURA COUNTY		
77-0048451, 4001 MISSION OAKS BLVD., SUITE	LIFE FOR RESIDENTS OF				COMMUNITY		
A, CAMARILLO, CA 93012	VENTURA CO, OXNARD PLAINS	CALIFORNIA	501(C)(3)	LINE 12A, I	FOUNDATION	х	
VCCF COMPLEX ASSETS SUPPORTING ORGANIZATION					VENTURA COUNTY		
- 85-1735066, 4001 MISSION OAKS BLVD., SUITE	]				COMMUNITY		
A, CAMARILLO, CA 93012	COMPLEX ASSETS MANAGEMENT	CALIFORNIA	501(C)(3)	LINE 12A, I	FOUNDATION	х	
	_						
	_						

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Direct controlling	Direct controlling Pred	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total		CO of Dispreparticulate		Code V-UBI	General o	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No			
				1					1				

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

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

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	eceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity								
	Gift, grant, or capital contribution to related organization(s)						Х		
	Gift, grant, or capital contribution from related organization(s)					Х			
	Loans or loan guarantees to or for related organization(s)						Х		
	Loans or loan guarantees by related organization(s)						Х		
f	Dividends from related organization(s)				1f		Х		
g	Sale of assets to related organization(s)				1g		Х		
	Purchase of assets from related organization(s)						Х		
	Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)							Х		
k	k Lease of facilities, equipment, or other assets from related organization(s)								
1	l Performance of services or membership or fundraising solicitations for related organization(s)								
m	Performance of services or membership or fundraising solicitations by related organi						Х		
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
	Sharing of paid employees with related organization(s)						Х		
р	Reimbursement paid to related organization(s) for expenses				1р		Х		
	Reimbursement paid by related organization(s) for expenses						Х		
r	Other transfer of cash or property to related organization(s)				1r		Х		
s	s Other transfer of cash or property from related organization(s)								
2	If the answer to any of the above is "Yes," see the instructions for information on wh	o must complete th	is line, including covered re	elationships and transaction thresholds.					
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	nvolved				
1) <sup>1</sup>	ARTIN V. AND MARTHA K. SMITH FOUNDATION	С	4,228,781.	CASH					
2) <sup>1</sup>	ARTIN V. AND MARTHA K. SMITH FOUNDATION	L	73,863.	CASH					
3)									

(4)

<u>(5)</u>

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	opor- ate ions?		Genera manag partn	(k) Percen ging owners	) ntage rship
								Ochodolo			