

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047

2024Open to Public
Inspection**A For the 2024 calendar year, or tax year beginning and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

Pasadena Community Foundation

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

301 E. Colorado Blvd.

Room/suite

810

City or town, state or province, country, and ZIP or foreign postal code

Pasadena, CA 91101

F Name and address of principal officer: Mariver Copeland

same as C above

D Employer identification number

20-0253310

E Telephone number

(626) 796-2097

G Gross receipts \$ 35,284,459.**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: www.pasadenacf.org**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: 1953 **M** State of legal domicile: CA**Part I Summary**

| | | |
|-----------------------------|---|--|
| Activities & Governance | 1 | Briefly describe the organization's mission or most significant activities: Pasadena Community Foundation (PCF) strives to improve and enrich lives of people in the greater |
| | 2 | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) 20 |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) 20 |
| | 5 | Total number of individuals employed in calendar year 2024 (Part V, line 2a) 2 |
| | 6 | Total number of volunteers (estimate if necessary) 18 |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 0. |
| 7b | Net unrelated business taxable income from Form 990-T, Part I, line 11 0. | |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) 9,433,213. |
| | 9 | Program service revenue (Part VIII, line 2g) 0. |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,037,636. |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 65,067. |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 16,535,916. |
| | Expenses | 13 |
| 14 | | Benefits paid to or for members (Part IX, column (A), line 4) 0. |
| 15 | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,514,027. |
| 16a | | Professional fundraising fees (Part IX, column (A), line 11e) 0. |
| b | | Total fundraising expenses (Part IX, column (D), line 25) 825,592. |
| 17 | | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 630,440. |
| 18 | | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,232,017. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 6,303,899. | |
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) 156,186,370. |
| | 21 | Total liabilities (Part X, line 26) 7,653,637. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 148,532,733. |

Part II Signature Block

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

| | | |
|------------------------|---|--------------------------|
| Sign Here | Signature of officer | Date |
| | Mariver Copeland, Chief Financial Officer | |
| Paid Preparer Use Only | Preparer's name | Preparer's signature |
| | Oswaldo D. Torres, CPA | |
| Preparer Use Only | Firm's name | Firm's EIN |
| | Harrington Group, CPAs, LLP | 95-4557617 |
| Preparer Use Only | Firm's address | Phone no. (626) 403-6801 |
| | 2698 Mataro Street Pasadena, CA 91107 | |

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

LHA For Paperwork Reduction Act Notice, see the separate instructions.

432001 12-10-24

Form **990** (2024)

See Schedule O for Organization Mission Statement Continuation

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:

Pasadena Community Foundation builds and preserves permanently endowed charitable funds, provides grants and assistance to nurture and strengthen community organizations, serves donors to meet their philanthropic goals and promotes and participates in community

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

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

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

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

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

4a (Code:) (Expenses \$ 10,224,131. including grants of \$ 9,421,107.) (Revenue \$)
PCF strives to improve and enrich lives of people in the greater Pasadena area through: the establishment and management of charitable funds with an emphasis on permanently endowed funds that benefit the local community, providing grants and services to non-profits, working with donors and engaging in community partnerships. This grant includes PCF, Donor Advised and Field of Interest Grants.

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

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

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

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

4e Total program service expenses 10,224,131.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

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

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

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

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

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

☒**Section A. Governing Body and Management**

| | 1a | 1b | Yes | No |
|--|----|----|-----|----|
| 1a Enter the number of voting members of the governing body at the end of the tax year | 20 | | | |
| 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 | | 20 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | | | | X |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? | | | | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | | | X |
| 6 Did the organization have members or stockholders? | | | | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | | | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | | | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a The governing body? | | | X | |
| b Each committee with authority to act on behalf of the governing body? | | | X | |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | | | X |

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

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

Section C. Disclosure

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, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
Pasadena Community Foundation Office - (626) 796-2097
301 E. Colorado Blvd., 810, Pasadena, CA 91101

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|--|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) Jennifer DeVoll President & CEO | 40.00 0.20 | | | X | | | | 284,723. | 0. | 69,882. |
| (2) Mariver Copeland CFO | 40.00 0.20 | | | X | | | | 249,051. | 0. | 57,680. |
| (3) Jeanine Bogaard Director of Programs | 40.00 | | | | X | | | 134,141. | 0. | 27,477. |
| (4) Elizabeth Alergimissen Director of Development | 40.00 | | | | X | | | 141,220. | 0. | 14,998. |
| (5) Priscilla Gamb Chair | 0.20 0.20 | X | | X | | | | 0. | 0. | 0. |
| (6) Gloria Pitzer Secretary | 0.20 0.20 | X | | X | | | | 0. | 0. | 0. |
| (7) Koko Archibong Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (8) Dave Beringer Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (9) William Bogaard Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (10) Frank Cardenas Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (11) Scott Christopher Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (12) Phyllis Crandon Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (13) K. George Dulgeryan Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (14) Sandra Ell Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| (15) Greta Johnson Mandell, M.D. Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (16) Tracy S. McCormick Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (17) Scott Nesbit Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) Nick Rodriguez Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (19) Maggie Sabbag Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (20) Uma Shrivastava Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (21) Sonia Singla Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (22) Armineh Tavitian, M.D. Board Member | 0.20 | X | | | | | | 0. | 0. | 0. |
| (23) Alex Wei Board Member | 0.20 0.20 | X | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Subtotal | | | | | | | | 809,135. | 0. | 170,037. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 809,135. | 0. | 170,037. |

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

4

3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

| | Yes | No |
|----------|-----|----|
| 3 | | X |
| 4 | X | |
| 5 | | X |

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| Principal Financial Services PO Box 9394, Des Moines, IA 50306 | Investment Management | 302,574. |
| | | |
| | | |
| | | |
| | | |
| 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization | 1 | |

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

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|--|--|-----------|---------------------------|----------------------|--|--------------------------------------|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | 5,580,000. | | | | |
| | e Government grants (contributions) | 1e | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above ... | 1f | 9,210,097. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 6,365,506. | | | | |
| | h Total. Add lines 1a-1f | | | | | | |
| Program Service Revenue | | | Business Code | | | | |
| | 2 a | | | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| g Total. Add lines 2a-2f | | | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | 7,572,227. | | | 7572227. |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | 6a | (i) Real (ii) Personal | | | | |
| | b Less: rental expenses ... | 6b | | | | | |
| | c Rental income or (loss) | 6c | | | | | |
| | d Net rental income or (loss) | | | | | | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | (i) Securities (ii) Other | | | | |
| | b Less: cost or other basis and sales expenses | 7b | | | | | |
| | c Gain or (loss) | 7c | | | | | |
| | d Net gain or (loss) | | | 1,224,810. | | | 1224810. |
| | 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | | |
| | b Less: direct expenses | 8b | | | | | |
| | c Net income or (loss) from fundraising events | | | | | | |
| | 9 a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | |
| | b Less: direct expenses | 9b | | | | | |
| | c Net income or (loss) from gaming activities | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | | | | | | |
| b Less: cost of goods sold | 10b | | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | |
| Miscellaneous Revenue | | | Business Code | | | | |
| | 11 a Miscellaneous | | 900099 | 30,357. | | | 30,357. |
| | b | | | | | | |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | | 30,357. | | | |
| 12 Total revenue. See instructions | | | | 23,617,491. | 0. | 0. | 8827394. |

Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 9,421,107. | 9,421,107. | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 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 | 661,336. | 203,188. | 221,892. | 236,256. |
| 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 | 702,104. | 322,785. | 172,425. | 206,894. |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 50,304. | 30,477. | 7,697. | 12,130. |
| 9 | Other employee benefits | 44,234. | 17,460. | 13,375. | 13,399. |
| 10 | Payroll taxes | 94,898. | 37,355. | 27,037. | 30,506. |
| 11 | Fees for services (nonemployees): | | | | |
| a | Management | | | | |
| b | Legal | 5,490. | | 5,490. | |
| c | Accounting | 26,500. | 10,431. | 16,069. | |
| d | Lobbying | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | 158,993. | | 158,993. | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) | 90,050. | 31,969. | 15,861. | 42,220. |
| 12 | Advertising and promotion | 124,452. | | | 124,452. |
| 13 | Office expenses | 95,640. | 37,646. | 27,249. | 30,745. |
| 14 | Information technology | 98,281. | 38,687. | 28,001. | 31,593. |
| 15 | Royalties | | | | |
| 16 | Occupancy | 98,541. | 38,789. | 28,075. | 31,677. |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 38,693. | 15,231. | 11,024. | 12,438. |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 22,115. | 8,705. | 6,301. | 7,109. |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a | Event expense | 37,761. | | | 37,761. |
| b | Membership dues | 26,169. | 10,301. | 7,456. | 8,412. |
| c | | | | | |
| d | | | | | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 11,796,668. | 10,224,131. | 746,945. | 825,592. |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

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

| | | (A) Beginning of year | | (B) End of year |
|--|--|--------------------------|--------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 746,830. | 1 | 1,242,653. |
| | 2 Savings and temporary cash investments | 7,338,851. | 2 | 53,245,236. |
| | 3 Pledges and grants receivable, net | | 3 | |
| | 4 Accounts receivable, net | 120. | 4 | 0. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 10,003. | 9 | 9,634. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | | |
| | b Less: accumulated depreciation | 10b | 10c | |
| | 11 Investments - publicly traded securities | 147,271,170. | 11 | 132,607,922. |
| | 12 Investments - other securities. See Part IV, line 11 | 296,876. | 12 | 617. |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 522,520. | 15 | 393,412. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 156,186,370. | 16 | 187,499,474. | |
| Liabilities | 17 Accounts payable and accrued expenses | 1,020,172. | 17 | 1,274,963. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 6,633,465. | 25 | 16,734,434. |
| | 26 Total liabilities. Add lines 17 through 25 | 7,653,637. | 26 | 18,009,397. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 59,613,671. | 27 | 71,754,759. |
| | 28 Net assets with donor restrictions | 88,919,062. | 28 | 97,735,318. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 148,532,733. | 32 | 169,490,077. |
| | 33 Total liabilities and net assets/fund balances | 156,186,370. | 33 | 187,499,474. |

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|-----------|--|-----------|--------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 23,617,491. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 11,796,668. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 11,820,823. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 148,532,733. |
| 5 | Net unrealized gains (losses) on investments | 5 | 9,136,521. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 169,490,077. |

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

| | Yes | No |
|---|-----------|----------|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | X |
| b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | X |
| c 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. | 2c | X |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____ | 3a | X |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____ | 3b | |

Form 990 (2024)

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|--|-----------|-----------|----------|----------|-----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 15203221. | 23421771. | 8637424. | 9433213. | 14790097. | 71485726. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 15203221. | 23421771. | 8637424. | 9433213. | 14790097. | 71485726. |
| 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) | | | | | | 17721880. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 53763846. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|---|-----------|-----------|----------|----------|-----------|--------------------------|
| 7 Amounts from line 4 | 15203221. | 23421771. | 8637424. | 9433213. | 14790097. | 71485726. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 4899291. | 6328256. | 5648921. | 5158136. | 7572227. | 29606831. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 15,000. | 12,157. | 56,099. | 65,067. | 30,357. | 178,680. |
| 11 Total support. Add lines 7 through 10 | | | | | | 101271237 |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|-----------|-------------------------------------|
| 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) | 14 | 53.09 % |
| 15 Public support percentage from 2023 Schedule A, Part II, line 14 | 15 | 49.16 % |
| 16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | <input type="checkbox"/> |

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|---|----------|----------|----------|----------|----------|--------------------------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | | |
|---|-----------|--|---|
| 15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) | 15 | | % |
| 16 Public support percentage from 2023 Schedule A, Part III, line 15 | 16 | | % |

Section D. Computation of Investment Income Percentage

| | | | |
|--|-----------|--|---|
| 17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) | 17 | | % |
| 18 Investment income percentage from 2023 Schedule A, Part III, line 17 | 18 | | % |

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

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

☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

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

| Section D - Distributions | | Current Year |
|--|-----------|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 Amounts paid to acquire exempt-use assets | 4 | |
| 5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>) | 5 | |
| 6 Other distributions (describe in Part VI). See instructions. | 6 | |
| 7 Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions. | 8 | |
| 9 Distributable amount for 2024 from Section C, line 6 | 9 | |
| 10 Line 8 amount divided by line 9 amount | 10 | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2024 | (iii) Distributable Amount for 2024 |
|--|-----------------------------|--|---|
| 1 Distributable amount for 2024 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2024 | | | |
| a From 2019 | | | |
| b From 2020 | | | |
| c From 2021 | | | |
| d From 2022 | | | |
| e From 2023 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to under distributions of prior years | | | |
| h Applied to 2024 distributable amount | | | |
| i Carryover from 2019 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2024 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2024 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 7 Excess distributions carryover to 2025. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2020 | | | |
| b Excess from 2021 | | | |
| c Excess from 2022 | | | |
| d Excess from 2023 | | | |
| e Excess from 2024 | | | |

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 D
(Form 990)

(Rev. December 2024)
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

Open to Public
Inspection

Name of the organization

Pasadena Community Foundation

Employer identification number

20-0253310

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

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|------------------------------|
| 1 Total number at end of year | 170 | 91 |
| 2 Aggregate value of contributions to (during year) | 5,673,788. | 10,752,600. |
| 3 Aggregate value of grants from (during year) | 6,161,756. | 2,913,971. |
| 4 Aggregate value at end of year | 46,011,362. | 69,880,441. |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

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

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

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

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

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included on line 2a | 2c |
| d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register | 2d |

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X \$

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

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

b Assets included in Form 990, Part X \$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 108,340,356. | 90,681,900. | 105,744,599. | 81,548,992. | 66,001,056. |
| b Contributions | 2,296,913. | 5,152,171. | 4,259,775. | 16,469,800. | 5,588,528. |
| c Net investment earnings, gains, and losses | 13,164,711. | 15,873,062. | -16,335,730. | 10,842,002. | 12,264,299. |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 4,218,960. | 3,230,261. | 2,870,878. | 3,003,114. | 2,208,535. |
| f Administrative expenses | 158,993. | 136,516. | 115,866. | 113,081. | 96,356. |
| g End of year balance | 119,424,027. | 108,340,356. | 90,681,900. | 105,744,599. | 81,548,992. |

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

a Board designated or quasi-endowment 30.7770 %

b Permanent endowment 51.7410 %

c Term endowment 17.4820 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐

(ii) Related organizations? ☐

| | Yes | No |
|--------|-----|----|
| 3a(i) | X | |
| 3a(ii) | | X |
| 3b | | |

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | | | |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) | | | | 0. |

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) Agency Funds | 16,216,093. |
| (3) Lease liability - operating lease | 235,918. |
| (4) Lease liability - financing lease | 5,687. |
| (5) Charitable foundation | 276,736. |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) | 16,734,434. |

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

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

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

| | | | | |
|----------|--|-----------|-----------|--|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | | 5 | |

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

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

| | | | | |
|----------|---|-----------|-----------|--|
| 1 | Total expenses and losses per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | 5 | |

Part XIII Supplemental Information

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

Part V, line 4:

Certain unrestricted net assets have been designated by the Board of Directors to be maintained as quasi endowment fund for granting purposes. Generally accepted accounting principles provide that when the governing body of an organization, such as a community foundation, has the unilateral power to redirect the use of donors' contributions to another beneficiary, such contributions must be classified as unrestricted net assets. The Board of Directors of the Foundation has such power (variance power). However, the Board of Directors would exercise this authority if the stated purpose of a contribution is no longer applicable and incapable of fulfillment. It is the expressed intention of the Foundation to honor the designations of the donors. For purposes of complying with net asset accounting, this fund is included in unrestricted net assets at December 31, 2024.

Part X, Line 2:

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

Generally accepted accounting principles provide accounting and disclosure guidance about positions taken by an organization in its tax returns that might be uncertain. Management has considered its tax positions and believes that all of the positions taken by the Foundation in its federal and state exempt organization tax returns are more likely than not to be sustained upon examination. The Foundation returns are subject to

Part XIII Supplemental Information *(continued)*

examination by federal and state taxing authorities, generally for three and four years, respectively, after they are filed.

Lined area for supplemental information.

SCHEDULE I
(Form 990)

(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **Pasadena Community Foundation** Employer identification number **20-0253310**

Part I General Information on Grants and Assistance

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

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

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|------------|---------------------------------|--------------------------|----------------------------------|---|---------------------------------------|------------------------------------|
| A Noise Within 3352 E. Foothill Blvd. Pasadena, CA 91107 | 95-4443878 | 501(c)(3) | 64,400. | 0. | | | Donor Advised |
| A Place Called Home 2830 S. Central Ave Los Angeles, CA 90011 | 95-4427291 | 501(c)(3) | 7,708. | 0. | | | Donor Advised |
| Academy of Music for the Blind 911 Norumbega Drive Monrovia, CA 91016 | 20-1148737 | 501(c)(3) | 10,000. | 0. | | | PCF Discretionary |
| Africa Sustaining Angels c/o HRS True Hope - 134 Woodland Road - Georgetown, TX 78628 | 20-5347588 | 501(c)(3) | 6,455. | 0. | | | Donor Advised |
| Altadena Mountain Rescue Team 780 E. Altadena Dr. Altadena, CA 91101 | 95-2554123 | 501(c)(3) | 25,098. | 0. | | | Donor Advised |
| American Cancer Society PO Box 34309 Los Angeles, CA 90034 | 13-1788491 | 501(c)(3) | 7,500. | 0. | | | Donor Advised |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **195.**

3 Enter total number of other organizations listed in the line 1 table **13.**

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

Schedule I (Form 990) (Rev. 12-2024)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| American Near East Refugee Aid (ANERA) - 1111 14th St. NW, Suite 400 - Washington, DC 02005 | 52-0882226 | 501(c)(3) | 8,000. | 0. | | | Donor Advised |
| Americans for Oxford 500 Fifth Avenue 32nd Floor New York, NY 10110 | 52-1495060 | 501(c)(3) | 12,000. | 0. | | | Donor Advised |
| AmeriCares Foundation, Inc. 88 Hamilton Avenue Stamford, CT 06902 | 06-1008595 | 501(c)(3) | 35,850. | 0. | | | Donor Advised |
| Amnesty International 5 Penn Plaza 16th Floor New York, NY 10001 | 52-0851555 | 501(c)(3) | 90,500. | 0. | | | Donor Advised |
| Arlington Garden in Pasadena PO Box 50617 Pasadena, CA 91105 | 20-2219627 | 501(c)(3) | 6,300. | 0. | | | Donor Advised |
| Armenian International Womens Association, Inc. - 1107 Arden Road - Pasadena, CA 91106 | 04-3113182 | 501(c)(3) | 25,000. | 0. | | | Agency |
| Armenian Relief Society 517 W. Glenoaks Blvd. Glendale, CA 91202 | 95-3928295 | 501(c)(3) | 14,000. | 0. | | | PCF Discretionary |
| Armory Center for the Arts 145 N. Raymond Avenue Pasadena, CA 91103 | 95-2907884 | 501(c)(3) | 72,467. | 0. | | | Field of Interest - Com A |
| Arroyos & Foothills Conservancy PO Box 1 Pasadena, CA 91102 | 95-4790045 | 501(c)(3) | 52,200. | 0. | | | PCF Discretionary |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| ArtCenter College of Design 1700 Lida Street Pasadena, CA 91103 | 95-1921340 | 501(c)(3) | 12,250. | 0. | | | Field of Interest - Com A |
| Assumption of the Blessed Virgin Mary School - 2660 E. Orange Grove Blvd. - Pasadena, CA 91107 | 95-1866063 | Religious Org | 22,000. | 0. | | | Donor Advised |
| Beacon Housing, Inc. 5000 Edenhurst Avenue Los Angeles, CA 90039 | 95-4594474 | 501(c)(3) | 26,400. | 0. | | | PCF Discretionary |
| Boston Court Pasadena PO Box 60187 Pasadena, CA 91116 | 56-2390086 | 501(c)(3) | 35,000. | 0. | | | PCF Discretionary |
| Bowers Museum Development Office 2002 N. Main Str Santa Ana, CA 92706 | 33-0106161 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |
| Boys & Girls Club of Hollywood 850 N. Cahuenga Blvd. Los Angeles, CA 90038 | 95-1775142 | 501(c)(3) | 129,319. | 0. | | | Designated |
| Boys & Girls Club of Pasadena 3230 E. Del Mar Blvd. Pasadena, CA 91107 | 95-1643305 | 501(c)(3) | 56,450. | 0. | | | PCHF Grants |
| Braille Institute of America, Inc. 741 N. Vermont Avenue Los Angeles, CA 90029 | 95-1641426 | 501(c)(3) | 10,200. | 0. | | | PCF Discretionary |
| Brandon Jackson Memorial Scholarship Fund - PO Box 5341 - Pasadena, CA 91107 | 77-0399522 | 501(c)(3) | 10,000. | 0. | | | Scholarship |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| California Native Plant Society San Gabriel Mountain Chapter - 1750 N. Altadena Dr - Pasadena, CA 91107 | 94-6116403 | 501(c)(3) | 7,662. | 0. | | | PCF Discretionary |
| Cancer Support Community Greater San Gabriel Valley - 331 W. Sierra Madre Blvd. - Sierra Madre, CA 91024 | 95-4201985 | 501(c)(3) | 8,600. | 0. | | | Donor Advised |
| Casa 160 N. El Molino Avenue Pasadena, CA 91101 | 95-2513421 | 501(c)(3) | 23,725. | 0. | | | PCF Discretionary |
| Catholic Community Foundation of Los Angeles - 3440 Wilshire Blvd Ste 530 - Los Angeles, CA 90010 | 38-3941057 | 501(c)(3) | 408,679. | 0. | | | Donor Advised |
| Cedars-Sinai Medical Center Community Relations & Development, C/O Ms. Tiffany Barlow 8700 Beverly Blvd. | 95-1644600 | 501(c)(3) | 236,786. | 0. | | | Designated |
| Center for Biological Diversity PO Box 710 Tuscon, AZ 85702 | 27-3943866 | 501(c)(3) | 60,000. | 0. | | | Donor Advised |
| Center on Policy Initiatives 3727 Camino Del Rio S Ste 100 San Diego, CA 92108 | 33-0824881 | 501(c)(3) | 8,000. | 0. | | | Donor Advised |
| Chandler School 1005 Armada Drive Pasadena, CA 91103 | 95-1983538 | 501(c)(3) | 12,980. | 0. | | | Donor Advised |
| Chapel & York Foundation US, Inc. 1350 Avenue of the Americas Floor 2 New York, NY 10019 | 81-2161937 | 501(c)(3) | 70,750. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Child Educational Center 140 Foothill Blvd. La Canada Flintridge, CA 91011 | 95-3403258 | 501(c)(3) | 6,250. | 0. | | | Donor Advised |
| Childrens Law Center 101 Centre Plaza Dr. Monterey Park, CA 91754 | 95-4252143 | 501(c)(3) | 15,000. | 0. | | | Donor Advised |
| Christian Community Church, The 15 Margetts Rd. Chestnut Ridge, NY 10952 | | Religious Org | 15,000. | 0. | | | Donor Advised |
| Church of Our Savior San Gabriel 535 W. Roses Rd. San Gabriel, CA 91775 | 94-0843915 | 501(c)(3) | 6,200. | 0. | | | Donor Advised |
| Climate Central One Palmer Square Suite 402 Princeton, NJ 08542 | 26-1797336 | 501(c)(3) | 96,000. | 0. | | | Donor Advised |
| Club 21 Learning & Resource Center, Inc. - 539 N. Lake Avenue - Pasadena, CA 91101 | 26-2887301 | 501(c)(3) | 9,668. | 0. | | | PCF Discretionary |
| Coffee With A Cause (CWAC) 2302 E Colorado Blvd Pasadena, CA 91107 | 77-0399522 | 501(c)(3) | 63,000. | 0. | | | Scholarship |
| College Access Plan Attention: Kate Jordan 871 E Washington Blvd Suite 207 - Pasadena, CA 91104 | 20-8371402 | 501(c)(3) | 96,000. | 0. | | | PCF Discretionary |
| Community Foundation of Teton Valley - PO Box 1523 - Driggs, ID 83422 | 83-0308856 | 501(c)(3) | 6,000. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Community Partners fbo STEAM:CODERS - 1000 N. Alameda Street, Suite 240 - Los Angeles, CA 90012 | 95-4302067 | 501(c)(3) | 25,000. | 0. | | | PCF Discretionary |
| Compass School 5414 West Northwest Hwy. Dallas, TX 75201 | 88-1503437 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Convalescent Aid Society 3255 E. Foothill Blvd. Pasadena, CA 91107 | 95-1782304 | 501(c)(3) | 15,650. | 0. | | | PCF Discretionary |
| Cornerstone Classical School 20449 Highway 82 Basalt, CO 81621 | 45-5571352 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Cougar Conservancy 23564 Calabasas Rd STE 201 Calabasas, CA 91302 | 95-4116679 | 501(c)(3) | 9,990. | 0. | | | PCF Discretionary |
| Crystal Cove Conservancy #5 Crystal Cove Newport Coast, CA 92657 | 33-0878633 | 501(c)(3) | 20,000. | 0. | | | Donor Advised |
| David & Margaret Youth and Family Services - 1350 Third Street - La Verne, CA 91750 | 95-1660346 | 501(c)(3) | 102,987. | 0. | | | Designated |
| David Sheldrick Wildlife Trust USA 25283 Cabot Road Suite 101 Laguna hills, CA 92653 | 30-0224549 | 501(c)(3) | 6,000. | 0. | | | Donor Advised |
| Descanso Gardens ATTN: Development Office 1418 Desca La Canada, CA 91011 | 95-2511202 | 501(c)(3) | 8,600. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Devil Pups Foundation 1402 E. Lomita Blvd. PO Box 1540 Wilmington, CA 90748 | 95-4173709 | 501(c)(3) | 7,000. | 0. | | | Donor Advised |
| Doctors Without Borders 40 Rector Street 16th Floor New York, NY 10006 | 13-3433452 | 501(c)(3) | 82,791. | 0. | | | Donor Advised |
| Door of Hope Attn: Carolyn Shankwiler 221 E. Walnut Street, Suite 112 - Pasadena, CA 9110 | 95-4044568 | 501(c)(3) | 49,052. | 0. | | | PCHF Grants |
| D'Veal Family & Youth Services 2750 E. Washington Blvd., Ste. 230 Pasadena, CA 91107 | 95-4573967 | 501(c)(3) | 24,280. | 0. | | | PCF Discretionary |
| Earthjustice 180 Steuart St. #194330 San Francisco, CA 94119 | 94-1730465 | 501(c)(3) | 91,000. | 0. | | | Donor Advised |
| Eaton Canyon Nature Center Associates (ECNCA) - 1750 North Altadena Dr. - Pasadena, CA 91107 | 95-6129697 | 501(c)(3) | 10,000. | 0. | | | PCF Discretionary |
| Emily Griffith Foundation 1860 Lincoln Street, Suite 605 Denver, CO 80203 | 84-1169001 | 501(c)(3) | 90,000. | 0. | | | Donor Advised |
| Families Forward Learning Center 980 N. Fair Oaks Ave. Pasadena, CA 91103 | 23-7275324 | 501(c)(3) | 87,050. | 0. | | | Donor Advised |
| Family Hope dba Elizabeth House PO Box 94077 Pasadena, CA 91109 | 95-4451243 | 501(c)(3) | 29,884. | 0. | | | PCHF Grants |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Feeding America 35 E. Wacker Dr. Ste 2000 Chicago, IL 60601 | 36-3673599 | 501(c)(3) | 120,000. | 0. | | | Donor Advised |
| First African Methodist Episcopal Church - Pasadena - 1700 N. Raymond Avenue - Pasadena, CA 91103 | 95-4802888 | Religious Org | 25,000. | 0. | | | PCF Discretionary |
| First Generation Scholarship Fund PO Box 4801 Palos Verdes Peninsula, CA 90274 | 92-1403791 | 501(c)(3) | 20,000. | 0. | | | Donor Advised |
| First Place for Youth 426 17th Street Suite 100 Oakland, CA 94612 | 94-3341034 | 501(c)(3) | 15,600. | 0. | | | PCF Discretionary |
| Five Acres - The Boys & Girls Aid Society of Los Angeles County - 760 West Mountain View Street - Altadena, CA 91001 | 95-1647810 | 501(c)(3) | 7,600. | 0. | | | Donor Advised |
| Flintridge Center 236 W. Mountain Street #106 Pasadena, CA 91103 | 26-1559274 | 501(c)(3) | 59,300. | 0. | | | Donor Advised |
| Flintridge Preparatory School 4543 Crown Ave. La Canada Flintridge, CA 91011 | 95-1643324 | 501(c)(3) | 110,800. | 0. | | | Donor Advised |
| Foothill Family Service 2500 E. Foothill Blvd. #300 Pasadena, CA 91107 | 95-1690990 | 501(c)(3) | 24,200. | 0. | | | PCHF Grants |
| Foothill Unity Center, Inc. 790 W. Chestnut Ave. Monrovia, CA 91016 | 95-4310817 | 501(c)(3) | 50,100. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Friends In Deed PO Box 41125 Pasadena, CA 91114 | 95-1644608 | Religious Org | 88,395. | 0. | | | PCF Discretionary |
| Friends of the Teton River PO Box 768 Driggs, ID 83422 | 82-0527505 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Fulcrum Arts 145 N. Raymond Avenue Pasadena, CA 91103 | 95-2540759 | 501(c)(3) | 24,000. | 0. | | | PCF Discretionary |
| Glenbrook Underground Inc c/o Garret Sutton 2248 Meridian Blvd Minden, NV 89423 | 86-1791497 | 501(c)(3) | 20,000. | 0. | | | Donor Advised |
| Guide Dogs for the Blind PO Box 3950 San Rafael, CA 94912 | 94-1196195 | 501(c)(3) | 7,707. | 0. | | | Donor Advised |
| Harambee Christian Family Center 1609 Navarro Ave Pasadena, CA 91103 | 95-3947727 | 501(c)(3) | 12,000. | 0. | | | PCF Discretionary |
| Harmony Project 4411 Tamarack Blvd Columbus, OH 43229 | 27-1819074 | 501(c)(3) | 7,707. | 0. | | | Donor Advised |
| Harvard-Westlake School 3700 Coldwater Canyon Avenue, P.O. Studio City, CA 91604 | 95-1644019 | 501(c)(3) | 8,000. | 0. | | | Donor Advised |
| HEAR Center 301 E. Del Mar Blvd. Pasadena, CA 91101 | 95-2017214 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Hill-Harbison House 2275 Huntington Drive, PMB 807 San Marino, CA 91108 | 83-0351855 | 501(c)(3) | 10,000. | 0. | | | Agency |
| Hillsides 940 Avenue 64 Pasadena, CA 91105 | 95-1644002 | 501(c)(3) | 26,250. | 0. | | | Donor Advised |
| Holy Family Church 1527 Fremont Avenue South Pasadena, CA 91030 | 95-1809567 | Religious Org | 10,000. | 0. | | | Donor Advised |
| Homeboy Industries 130 W. Bruno Street Los Angeles, CA 90012 | 95-4800735 | 501(c)(3) | 23,750. | 0. | | | Donor Advised |
| Hotchkiss School 11 Interlaken Road Lakeville, CT 06039 | 06-0647018 | 501(c)(3) | 15,000. | 0. | | | Donor Advised |
| Huntington Health Office of Philanthropy 100 W. California Blvd. - Pasadena, CA 91105 | 95-1644036 | 501(c)(3) | 101,850. | 0. | | | Donor Advised |
| Huntington Library, Art Museum & Botanical Gardens, The - 1151 Oxford Road - San Marino, CA 91108 | 95-1644589 | 501(c)(3) | 95,775. | 0. | | | Donor Advised |
| Huntington Medical Research Institutes (HMRI) - 686 S. Fair Oaks Avenue - Pasadena, CA 91105 | 95-1757119 | 501(c)(3) | 7,000. | 0. | | | Donor Advised |
| International Rescue Committee 122 E. 42nd St. New York, NY 10168 | 13-5660870 | 501(c)(3) | 10,500. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Jericho Road Pasadena 75 South Grand Ave. Pasadena, CA 91105 | 46-3703303 | 501(c)(3) | 5,500. | 0. | | | Donor Advised |
| Journey House 1232 N. Los Robles Avenue Pasadena, CA 91104 | 95-3838636 | 501(c)(3) | 150,250. | 0. | | | Agency |
| Joy of Sharing Foundation fbo Soul Force Project - 338 1/2 Ventura Street - Altadena, CA 91001 | 37-1697719 | 501(c)(3) | 10,000. | 0. | | | PCF Discretionary |
| KCET/PBS SoCal/Link TV 3080 Bristol St. Suite 100 Costa Mesa, CA 92626 | 95-2211661 | 501(c)(3) | 13,000. | 0. | | | Donor Advised |
| Keck Medicine of USC PO Box 80354 Los Angeles, CA 90074 | 95-1642394 | 501(c)(3) | 84,000. | 0. | | | Donor Advised |
| Kiwanis Foundation of South Pasadena - 1107 Fair Oaks Avenue #74 - South Pasadena, CA 91030 | 95-6111841 | 501(c)(3) | 7,667. | 0. | | | Agency |
| La Canada Presbyterian Church 626 Foothill Blvd. La Canada, CA 91011 | 95-1765156 | Religious Org | 10,000. | 0. | | | Donor Advised |
| La Salle College Preparatory 3880 E. Sierra Madre Blvd. Pasadena, CA 91107 | 95-4480979 | 501(c)(3) | 30,750. | 0. | | | Donor Advised |
| LAist (formerly KPCC) 474 S. Raymond Avenue Pasadena, CA 91105 | 95-4765734 | 501(c)(3) | 161,045. | 0. | | | PCF Discretionary |

Schedule I (Form 990)

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Las Madrinas P.O Box 80378 City of Industry, CA 91716 | 95-1959907 | 501(c)(3) | 8,800. | 0. | | | Donor Advised |
| Leadership Pasadena Inc 75 S. Grand Avenue Pasadena, CA 91105 | 20-0140261 | 501(c)(3) | 5,500. | 0. | | | PCF Discretionary |
| Library Foundation of Los Angeles 630 W. Fifth Street Los Angeles, CA 90071 | 95-4368250 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Light Bringer Project ATTN: Tom Coston 99 S. Raymond Ave., Ste. 408 - Pasadena, CA 91105 | 95-4287043 | 501(c)(3) | 25,000. | 0. | | | PCF Discretionary |
| Los Angeles City College Foundation (LACC) - 855 North Vermont Avenue - Los Angeles, CA 90029 | 95-6207819 | 501(c)(3) | 80,000. | 0. | | | Scholarship |
| Los Angeles Philharmonic Development Dept. 151 S. Grand Avenue Los Angeles, CA 90012 | 95-1696734 | 501(c)(3) | 8,000. | 0. | | | Donor Advised |
| Los Angeles Regional Food Bank (Los Angeles Food Bank) - 1734 East 41st Street - Los Angeles, CA 90058 | 95-3135649 | 501(c)(3) | 91,500. | 0. | | | Donor Advised |
| Lower Cape Communications, Inc. (WOMR) - ATTN: John Braden, Executive Director, WOMR PO Box 975 Provincetown - Provincetown, | 04-2664623 | 501(c)(3) | 8,000. | 0. | | | Donor Advised |
| Manhattan Beach Education Foundation - PO Box 1110 - Manhattan Beach, CA 90267 | 95-3881166 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| MARINE MAMMAL CARE CENTER LOS ANGELES - 1536 W. 25th Street #272 - San Pedro, CA 90732 | 47-5249182 | 501(c)(3) | 50,000. | 0. | | | Donor Advised |
| Mayfield Junior School 405 S. Euclid Ave. Pasadena, CA 91101 | 95-2559423 | 501(c)(3) | 7,500. | 0. | | | Donor Advised |
| Mentoring & Partnership for Youth Development (MPYD) - 1905 Lincoln Ave., Room G-222 - Pasadena, CA 91103 | 20-3812526 | 501(c)(3) | 8,000. | 0. | | | PCF Discretionary |
| Mount San Antonio College Foundation - Mt. San Antonio College Foundation 1100 N. Grand Ave. - Walnut, CA 91789 | 95-6196020 | 501(c)(3) | 60,000. | 0. | | | Scholarship |
| Mount St. Mary's University ATTN: Stephanie Cubba, VP of Institutional Advancement 10 Chester Place - Lo | 95-1641455 | 501(c)(3) | 23,000. | 0. | | | Donor Advised |
| MUSE/IQUE 1030 S Arroyo Parkway, Ste 216 Pasadena, CA 91105 | 20-0725891 | 501(c)(3) | 130,000. | 0. | | | Donor Advised |
| Music Academy of the West 1070 Fairview Rd. Santa Barbara, CA 93108 | 95-1525814 | 501(c)(3) | 13,000. | 0. | | | Donor Advised |
| Nancy Evans Dance Theatre 1485 North El Molino Avenue Pasadena, CA 91104 | 81-4664098 | 501(c)(3) | 12,500. | 0. | | | PCF Discretionary |
| National Day Laborer Organizing Network (NDLON) - 1030 S. Arroyo Pkwy., Ste. 106 - Pasadena, CA 91105 | 20-8802586 | 501(c)(3) | 15,000. | 0. | | | PCF Discretionary |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--------------------------------------|
| Occidental College 1600 Campus Road M-36 Los Angeles, CA 90041 | 95-1667177 | 501(c)(3) | 20,750. | 0. | | | Donor Advised |
| Old Pasadena Management District 23 East Colorado Blvd, Suite 200 Pasadena, CA 91105 | 95-4548760 | For-Profit Org | 7,500. | 0. | | | PCF Pass-Thru; City Government grant |
| One Arroyo Foundation P.O. Box 156 Pasadena, CA 91102 | 83-3487035 | 501(c)(3) | 11,000. | 0. | | | Donor Advised |
| Orange Coast College Foundation 2701 Fairview Rd. Costa Mesa, CA 92626 | 33-0071349 | 501(c)(3) | 6,000. | 0. | | | Donor Advised |
| Oregon Episcopal School 6300 SW Nicol Road Portland, OR 97223 | 93-0386915 | 501(c)(3) | 6,000. | 0. | | | Donor Advised |
| Our Lady of Grace Catholic Church 5071 Eden Ave. Edina, MN 55436 | 41-0705765 | 501(c)(3) | 228,955. | 0. | | | Donor Advised |
| Oxfam America 77 North Washington St. Suite 500 Boston, MA 02114 | 23-7069110 | 501(c)(3) | 5,600. | 0. | | | Donor Advised |
| Pacific Clinics 800 S. Santa Anita Avenue Arcadia, CA , CA 91006 | 94-2295953 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Parson's Nose Theater 95 N. Marengo Ave., Ste. 110 Pasadena, CA 91101 | 95-4789893 | 501(c)(3) | 25,000. | 0. | | | PCF Discretionary |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Partnership for Success! 1030 E. California Blvd. Pasadena, CA 91106 | 82-3396946 | 501(c)(3) | 58,000. | 0. | | | Donor Advised |
| Pasadena Altadena Coalition of Transformative Leaders - 236 W. Mountain Street, Suite #201 - Pasadena, CA 91103 | 27-5264908 | 501(c)(3) | 35,000. | 0. | | | PCF Discretionary |
| Pasadena Altadena Community Endowment Fund (PACEF) - PO Box 90605 - Pasadena, CA 91109 | 91-2043293 | 501(c)(3) | 7,500. | 0. | | | Scholarship |
| Pasadena Art Alliance ATTN: President/Treasurer 1028 N. Lake Avenue, Suite 104 - Pasadena, CA 9110 | 23-7429349 | 501(c)(3) | 42,601. | 0. | | | Agency |
| Pasadena City College Foundation 1324 E. Green Street, CDC 204 Pasadena, CA 91106 | 95-3434226 | 501(c)(3) | 320,300. | 0. | | | PCF Discretionary |
| Pasadena Conservatory of Music 100 N. Hill Ave. Pasadena, CA 91106 | 95-3900207 | 501(c)(3) | 41,600. | 0. | | | PCF Discretionary |
| Pasadena Delta Foundation PO Box 93552 Pasadena, CA 91109 | 95-4502691 | 501(c)(3) | 15,165. | 0. | | | Agency |
| Pasadena Education Network 3579 E. Foothill Blvd, #481 Pasadena, CA 91107 | 86-1118821 | 501(c)(3) | 10,000. | 0. | | | PCF Discretionary |
| Pasadena Educational Foundation 351 S. Hudson Avenue, Room 153 Pasadena, CA 91101 | 23-7149451 | 501(c)(3) | 69,200. | 0. | | | PCF Discretionary |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Pasadena Educational Foundation fbo African American Parent Council - 351 South Hudson Ave, RM 153 - Pasadena, CA 91101 | 23-7149451 | 501(c)(3) | 20,000. | 0. | | | PCF Discretionary |
| Pasadena Guild of Children's Hospital, LA - PO Box 51101 - Pasadena, CA 91115 | 95-6121932 | 501(c)(3) | 7,700. | 0. | | | Donor Advised |
| Pasadena Heritage 160 N. Oakland Avenue Pasadena, CA 91101 | 95-3122313 | 501(c)(3) | 17,600. | 0. | | | Donor Advised |
| Pasadena Humane 361 S. Raymond Avenue Pasadena, CA 91105 | 95-1643344 | 501(c)(3) | 35,350. | 0. | | | PCF Discretionary |
| Pasadena La Casita Foundation c/o Shannon Quinn, Treasurer 1165 N Pasadena, CA 91103 | 95-4073654 | 501(c)(3) | 20,550. | 0. | | | Agency |
| Pasadena Master Chorale 1443 E Washington Blvd, Ste. 209 Pasadena, CA 91104 | 26-4205734 | 501(c)(3) | 8,650. | 0. | | | PCF Discretionary |
| Pasadena Meals on Wheels, Inc. 500 E. Colorado Blvd. Pasadena, CA 91101 | 95-6111667 | 501(c)(3) | 14,000. | 0. | | | PCF Discretionary |
| Pasadena Museum of History 470 W. Walnut St. Pasadena, CA 91103 | 95-6133954 | 501(c)(3) | 11,125. | 0. | | | Donor Advised |
| Pasadena Playhouse 39 S. El Molino Avenue Ste. 300 Pasadena, CA 91101 | 95-3473192 | 501(c)(3) | 68,600. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Pasadena Pro Musica 301 N. Orange Grove Blvd. Pasadena, CA 91103 | 95-3658348 | 501(c)(3) | 7,500. | 0. | | | PCF Discretionary |
| Pasadena Public Health Department Pasadena Public Health Department 1845 N. Fair Oaks Ave - Pasadena, CA 91103 | 95-6000759 | Government | 14,000. | 0. | | | PCHF Grants |
| Pasadena Senior Center 85 E. Holly Street Pasadena, CA 91103 | 95-2085393 | 501(c)(3) | 52,150. | 0. | | | Designated |
| Pasadena Symphony Association 150 S. Los Robles Avenue, Ste. 460 Pasadena, CA 91101 | 95-6002375 | 501(c)(3) | 31,500. | 0. | | | PCF Discretionary |
| Pasadena Village 236 W. Mountain Street, Ste. 104 Pasadena, CA 91103 | 45-3773041 | 501(c)(3) | 20,000. | 0. | | | PCF Discretionary |
| Paso Pacifico PO box 1244 Ventura, CA 93002 | 20-3396421 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Peninsula Committee Children's Hospital (PCCH) - PO Box 801 - Palos Verdes Estates, CA 90274 | 23-7091175 | 501(c)(3) | 7,600. | 0. | | | Designated |
| Planned Parenthood Federation of America, Inc. - 123 William St. - New York, NY 10038 | 13-1644147 | 501(c)(3) | 10,300. | 0. | | | Donor Advised |
| Planned Parenthood of Pasadena & SGV - Attn: Development 620 North Lake Avenue - Pasadena, CA 91101 | 95-1916050 | 501(c)(3) | 73,850. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--------------------------------------|
| Playhouse Village Association 678 E Walnut St Unit 110B Pasadena, CA 91101 | 95-4589175 | For-Profit Org | 12,500. | 0. | | | PCF Pass-Thru; City Government grant |
| Polytechnic School Attn: Advancement Office 1030 E. California Blvd. - Pasadena, CA 91106 | 95-1641456 | 501(c)(3) | 130,950. | 0. | | | Donor Advised |
| Project Angel Food 922 Vine Street Los Angeles, CA 90038 | 95-4115863 | 501(c)(3) | 90,000. | 0. | | | Donor Advised |
| Public Truth Media Foundation (Full Disclosure Media) - PO Box 36128 - Los Angeles, CA 90036 | 27-5445288 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |
| Public Works dba Learning Works 90 N. Daisy Avenue Pasadena, CA 91107 | 95-4686873 | 501(c)(3) | 80,500. | 0. | | | Scholarship |
| Rainforest Alliance Attn: Fundraising Operations, 298 Fifth Avenue, 7th Floor - New York, NY 10 | 13-3377893 | 501(c)(3) | 60,000. | 0. | | | Donor Advised |
| Reading is Fundamental 7250 Bandini Boulevard, Suite 209 Los Angeles, CA 90040 | 23-7425712 | 501(c)(3) | 10,100. | 0. | | | Donor Advised |
| Reading Partners 5410 Wilshire Blvd. Suite 400 Los Angeles, CA 90036 | 77-0568469 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |
| Richstone Family Center 13634 Cordary Ave. Hawthorne, CA 90250 | 23-7373745 | 501(c)(3) | 23,852. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Rose Bowl Aquatics Center (RBAC) 360 N. Arroyo Blvd. Pasadena, CA 91103 | 95-3994788 | 501(c)(3) | 43,438. | 0. | | | PCHF Grants |
| Rose Bowl Legacy Foundation 1001 Rose Bowl Drive Pasadena, CA 91103 | 01-0972999 | 501(c)(3) | 56,000. | 0. | | | Donor Advised |
| San Francisco Opera Association War Memorial Opera House 301 Van Ness Ave. - San Francisco, CA 94102 | 94-0836240 | 501(c)(3) | 5,500. | 0. | | | Donor Advised |
| San Gabriel Valley Foundation For Economic Growth - 248 E Foothill Blvd Ste 100 - Monrovia, CA 91016 | 95-4643569 | 501(c)(3) | 6,000. | 0. | | | Donor Advised |
| San Marino Community Church 1750 Virginia Road San Marino, CA 91108 | 95-1691779 | Religious Org | 12,300. | 0. | | | Donor Advised |
| San Marino League PO Box 80244 San Marino, CA 91118 | 95-3280287 | 501(c)(3) | 10,350. | 0. | | | Donor Advised |
| Saturday Conservatory of Music sponsored by Community Partners - PO Box 202 - Temple City, CA 91780 | 95-4302067 | 501(c)(3) | 9,258. | 0. | | | Agency |
| Save Our Wild Salmon 811 First Ave West Suite 305 Seattle, WA 98119 | 91-1673170 | 501(c)(3) | 7,000. | 0. | | | Donor Advised |
| Sequoyah School 535 S. Pasadena Ave. Pasadena, CA 91105 | 95-2022023 | 501(c)(3) | 27,500. | 0. | | | Donor Advised |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| ShelterBox USA PO Box 5055 Santa Barbara, CA 93150 | 20-0471604 | 501(c)(3) | 27,500. | 0. | | | Donor Advised |
| Shepherd's Door Domestic Violence Resource Center - 1021 E. Walnut Street, 2nd Floor Suite 202-203 - Pasadena, CA 91106 | 91-2077919 | 501(c)(3) | 25,000. | 0. | | | PCF Discretionary |
| Side Street Projects PO Box 90432 Pasadena, CA 91109 | 95-4395168 | 501(c)(3) | 65,500. | 0. | | | Donor Advised |
| Sierra Club Foundation 2101 Webster St. Ste 1250 Oakland, CA 94612 | 94-6069890 | 501(c)(3) | 90,500. | 0. | | | Donor Advised |
| Sierra Madre Playhouse 87 W. Sierra Madre Blvd. Sierra Madre, CA 91024 | 95-6058309 | 501(c)(3) | 25,000. | 0. | | | PCF Discretionary |
| Smile Train 633 Third Avenue, 9th Floor New York, NY 10017 | 13-3661416 | 501(c)(3) | 5,100. | 0. | | | Donor Advised |
| SoCal Beep Baseball Association 305 E. California Blvd. Apt. 19 Pasadena, CA 91106 | 87-1527414 | 501(c)(3) | 8,600. | 0. | | | PCF Discretionary |
| South Pasadena High School - ASB 1401 Fremont Ave. South Pasadena, CA 91030 | 95-4199658 | Government | 13,500. | 0. | | | Donor Advised |
| South Pasadena High School Alumni Association - PO Box 1219 - South Pasadena, CA 91030 | 95-3706458 | 501(c)(3) | 7,000. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Special Needs Network 4401 Crenshaw Blvd. Suite #215 Los Angeles, CA 90043 | 05-0617904 | 501(c)(3) | 7,000. | 0. | | | Donor Advised |
| Spirit Awakening Foundation ATTN: Akuyoe Graham PO Box 11643 Marina Del Rey, CA 90295 | 95-4585425 | 501(c)(3) | 9,909. | 0. | | | PCF Pass-Thru |
| Spur Community Foundation PO Box 6184 Ketchum, ID 83340 | 81-2375057 | 501(c)(3) | 50,000. | 0. | | | Donor Advised |
| St. Gregory the Illuminator Armenian Apostolic Church - 2215 E. Colorado Blvd. - Pasadena, CA 91107 | | Religious Org | 17,253. | 0. | | | Designated |
| Stanford University PO Box 20466 Stanford, CA 94309 | 94-1156365 | 501(c)(3) | 11,750. | 0. | | | Donor Advised |
| Stars 500 E. Villa Street Pasadena, CA 91101 | 95-4847950 | 501(c)(3) | 25,200. | 0. | | | Donor Advised |
| Sun Valley Music Festival PO Box 1914 Sun Valley, ID 83353 | 82-0397940 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |
| Sun Valley Writers Conference PO Box 957 Ketchum, ID 83340 | 82-0496196 | 501(c)(3) | 12,000. | 0. | | | Donor Advised |
| Sunsar Maya Inc. 2021 Filmore St. # 2131 San Francisco, CA 94115 | 45-2601154 | 501(c)(3) | 15,000. | 0. | | | Donor Advised |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| Swim with Mike Foundation Post Office Box 51000 Pasadena, CA 91115 | 85-4007132 | 501(c)(3) | 175,745. | 0. | | | Designated |
| Sycamores 840 N. Avenue 66 Los Angeles, CA 90042 | 95-1691005 | 501(c)(3) | 22,500. | 0. | | | Donor Advised |
| Synchromy 1390 North Arroyo Blvd. Pasadena, CA 91103 | 45-5591264 | 501(c)(3) | 10,000. | 0. | | | PCF Discretionary |
| Texas Christian University Attn: Kenton Watts TCU Box 297044 Fort Worth, TX 76129 | 75-0827465 | 501(c)(3) | 20,000. | 0. | | | Donor Advised |
| The Living Desert 47900 Portola Avenue Palm Desert, CA 92260 | 95-3385354 | 501(c)(3) | 35,000. | 0. | | | Donor Advised |
| The Shabby Dog Rescue 20 N. Baldwin Ave. Sierra Madre, CA 91204 | 81-1822693 | 501(c)(3) | 60,000. | 0. | | | Donor Advised |
| The UCLA Foundation- Luskin School of Public Affairs - Attn: Patrick Bruno PO Box 7145 - Pasadena, CA 91109 | 95-2250801 | 501(c)(3) | 20,000. | 0. | | | Donor Advised |
| Union Station Homeless Services 825 E. Orange Grove Blvd. Pasadena, CA 91104 | 95-3958741 | 501(c)(3) | 93,950. | 0. | | | PCHF Grants |
| USC Leonard Davis School 3715 McClintock Ave. Suite 110 Los Angeles, CA 90089 | 95-1642394 | 501(c)(3) | 10,000. | 0. | | | Donor Advised |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| USC MS Research Expansion Fund USC Advancement Gift Services 1150 South Olive Street, 25th Floor - Los Ange | 95-1642394 | 501(c)(3) | 25,000. | 0. | | | Donor Advised |
| USC Norris Comprehensive Cancer Center - Attn: Minhaal Nathani 1441 Eastlake Ave. Suite 8302L. MC 9181 - Los Angeles, CA 90089 | 95-1642394 | 501(c)(3) | 50,100. | 0. | | | Donor Advised |
| Villa Esperanza Services 2116 E. Villa Street Pasadena, CA 91107 | 95-2148860 | 501(c)(3) | 89,250. | 0. | | | Donor Advised |
| Walden School 74 S. San Gabriel Blvd. Pasadena, CA 91107 | 95-2663177 | 501(c)(3) | 14,374. | 0. | | | Designated |
| Wayfinder Family Services 5300 Angeles Vista Blvd. Los Angeles, CA 90043 | 95-1977659 | 501(c)(3) | 10,200. | 0. | | | PCF Discretionary |
| Western Justice Center Foundation 55 S. Grand Avenue Pasadena, CA 91105 | 95-4176583 | 501(c)(3) | 25,750. | 0. | | | PCF Discretionary |
| Westminster Presbyterian Church ATTN: Kathy Stokes 1757 N. Lake Ave Pasadena, CA 91104 | 95-1641974 | Religious Org | 137,789. | 0. | | | Designated |
| Westridge School 324 Madeline Dr. Pasadena, CA 91105 | 95-1644047 | 501(c)(3) | 14,500. | 0. | | | Donor Advised |
| Young & Healthy 136 W. Peoria Street Pasadena, CA 91103 | 95-4527969 | 501(c)(3) | 132,600. | 0. | | | PCHF Grants |

[illegible]

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 |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
| | | | | | |
| | | | | | |
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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:**

The Pasadena Community Foundation monitors the use of grant monies as follows: All agencies are verified to be a 501c3 public charity and/or grant eligible before grants are awarded. A grant award fund agreement and/or grant letter and report worksheet are sent to the grantees. The grant award fund agreement and/or grant letter explicitly states the purpose of the grant award or restrictions of the grant and specifies expectations for compliance including use of funds, timing, policy on any unspent funds and reporting requirements. The report worksheet requests receipts for capital purchases and/or key accomplishments for program grants. This report is reviewed by PCF staff and if any discrepancies are found PCF asks the agency for reimbursement of funds inappropriately used. These reports are tracked throughout the year and agencies are disqualified for future grants if reports have not been completed. In the case of unrestricted donations to charitable organizations through donor advised funds, grant reports are not required.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

Pasadena Community Foundation

Employer identification number

20-0253310

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) Jennifer DeVoll President & CEO | (i) | 249,723. | 35,000. | 0. | 63,240. | 6,642. | 354,605. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) Mariver Copeland CFO | (i) | 226,551. | 20,000. | 2,500. | 57,214. | 466. | 306,731. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) Jeanine Bogaard Director of Programs | (i) | 114,141. | 20,000. | 0. | 20,133. | 7,344. | 161,618. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) Elizabeth Alergimissen Director of Development | (i) | 141,116. | 0. | 104. | 11,810. | 3,188. | 156,218. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (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:

End of the year bonuses are tied to performance, service to the community and cost of living. This particular year, every employee worked extremely hard to support the community and continue the mission of the foundation.

Schedule J, Line 4b:

The following employees received 457(b) contributions:

Jennifer DeVoll - \$23,000

Mariver Copeland - \$23,000

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

Pasadena Community Foundation

Employer identification number

20-0253310

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|-------------------------------|---|--|--|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 58 | 6,365,506.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 during the tax year for contributions
for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

| | Yes | No |
|-----|-----|----|
| 30a | | X |
| 31 | | X |
| 32a | | X |
| 33 | | |

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

Schedule M (Form 990) 2024

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

Schedule M, Part I, Column (b):

The quantity of items reported is determined by the number of donors.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

Pasadena Community Foundation

Employer identification number

20-0253310

Form 990, Part I, Line 1, Description of Organization Mission:

Pasadena area through: the establishment and management of charitable funds with an emphasis on permanently endowed funds that benefit the local community, providing grants and services to non-profits, working with donors and engaging in community partnerships.

Form 990, Part III, Line 1, Description of Organization Mission:

partnerships. These grants include PCF, Donor Advised and Field of Interest Grants.

Form 990, Part V, Line 13, List of States with Qualified Health Plans:

CA

Form 990, Part VI, Section B, line 11b:

Governing Body Review of Form 990 Process: Audit Committee meets with outside auditor to go over the Form 990. Upon review, Audit Committee Chair presents any findings and leads discussions if any, and whole board approves Form 990 to be filed.

Form 990, Part VI, Section B, Line 12c:

PCF has board members update their conflict of interest paperwork yearly.

Form 990, Part VI, Section B, Line 15:

Determining Compensation of CEO and other key employees Process: The Council on Foundation does an annual survey of salaries for non-profits throughout the nation. PCF participates in the survey. The results are compiled by the Council and distributed to all participants. A separate salary survey is conducted by the League of California Foundations. PCF also participates in this survey. Once the results have been distributed, PCF staff compiles data and presents to the Finance Committee along with overall budgets and salary recommendations for the fiscal year. PCF has joined Insperity PEO Services. Part of their human resources services is a compensation department that provides salary survey data for PCF. The data focuses on non-profit salaries within PCF's geographic area. The Finance Committee also reviews this data comparison point. The Executive Committee reviews the salary for staff in Executive session of the Board meeting.

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

PCF provides its governing documents, conflict of interest policy, financial statements and Form 990 available to the public upon request.

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

[illegible]

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|--|-------------------------|---|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|--|----|
| | | | | | | | | Yes | No |
| | | | | | | | | | |
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

| | Yes | No |
|---|-----------|----|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a | X |
| b Gift, grant, or capital contribution to related organization(s) | 1b | X |
| c Gift, grant, or capital contribution from related organization(s) | 1c | X |
| d Loans or loan guarantees to or for related organization(s) | 1d | X |
| e Loans or loan guarantees by related organization(s) | 1e | X |
| f Dividends from related organization(s) | 1f | X |
| g Sale of assets to related organization(s) | 1g | X |
| h Purchase of assets from related organization(s) | 1h | X |
| i Exchange of assets with related organization(s) | 1i | X |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | X |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | X |
| l Performance of services or membership or fundraising solicitations for related organization(s) | 1l | X |
| m Performance of services or membership or fundraising solicitations by related organization(s) | 1m | X |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | X |
| o Sharing of paid employees with related organization(s) | 1o | X |
| p Reimbursement paid to related organization(s) for expenses | 1p | X |
| q Reimbursement paid by related organization(s) for expenses | 1q | X |
| r Other transfer of cash or property to related organization(s) | 1r | X |
| s Other transfer of cash or property from related organization(s) | 1s | X |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. | | |

| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|--|----------------------------------|------------------------|--|
| PCF Gifting and Liquidation Charitable (1) Foundation | C | 5,580,000. | Cost |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

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.

[illegible]

Part VII

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