** PUBLIC DISCLOSURE COPY **

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

OMB No. 1545-0047 Open to Public

Internal Revenue Service

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

Αŀ	For the	e 2014 calendar year, or tax year beginning and e	ending	_	
B	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre				
	Name chang	Doing business as		95-3	709639
F	Initial return Final return	,	Room/suite	E Telephone numbe	er) 756–6557
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	41,160,691.
	Amend			H(a) Is this a group r	
	Application	F Name and address of principal officer: CITY TO I THAT I • WILDOW	1	for subordinates	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No
		empt status: $X = 501(c)(3)$ $501(c)($ $94(insert no.)$ $4947(a)(1) o$	or 527	If "No," attach a	list. (see instructions)
		e: ► WWW.RSFFOUNDATION.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other ►	L Year	of formation: 1981	M State of legal domicile: CA
Pa		Summary	<u> </u>	TITT ANDIIDODY	· DV
e	1	Briefly describe the organization's mission or most significant activities: ${ t PROMC}$	LB CHO	HILANTHRUPY	BI
Governance	1				
Veri	1	Check this box if the organization discontinued its operations or dispos		i	ssets.
Ĝ		Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)		<u>3</u>	30
დ თ		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			7
iţi		Total number of volunteers (estimate if necessary)			29
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
ď		Net unrelated business taxable income from Form 990-T, line 34			0.
		· · · · · · · · · · · · · · · · · · ·		Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		16,303,498.	
ž	1	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,197,847.	
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		124,955.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		18,626,300.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,507,838.	7,333,704.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		396,620.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ă		Total fundraising expenses (Part IX, column (D), line 25) 219, 92		055 040	200 254
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		257,948.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,162,406.	
<u>_ s</u>	19	Revenue less expenses. Subtract line 18 from line 12		14,463,894.	
its o		Total accepts (Doct V. Proc. 40)	Ве	ginning of Current Year 82,134,293.	End of Year 87,933,708.
Asse Bala	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		16,417,902.	
Net Assets or Fund Balances	21 22	Net assets or fund balances. Subtract line 21 from line 20		65,716,391.	
	art II	Signature Block		03//10/3310	72737271000
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			,,
Sig	n	Signature of officer		Date	
Her		CHRISTINA P. WILSON, EXEC. DIR.			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	T	Date Check Check	PTIN
Paid		ROBERT C. GELLMAN		self-employ	
	parer	Firm's name CBIZ MHM, LLC	100	Firm's EIN ▶	01-0826173
Use	Only	Firm's address 10616 SCRIPPS SUMMIT COURT, STE	100		0 705 0000
		SAN DIEGO, CA 92131		Phone no.85	8-795-2000
May	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: PROMOTES PHILANTHROPY BY: ASSISTING DONORS TO BUILD ASSETS FOR THEIR
	CHOSEN CHARITABLE PURPOSES, EXPLORING AND EVALUATING LOCAL CHARITABLE
	NEEDS, AND BUILDING ENDOWMENTS FOR CHARITABLE ORGANIZATIONS.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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 \$ 387,000 • including grants of \$ 387,000 •) (Revenue \$
	THE PATRIOTS INITIATIVE, A PROGRAM OF THE RANCHO SANTA FE FOUNDATION,
	STRIVES TO RAISE THE AWARENESS OF AND PROVIDE FUNDING FOR THE NEEDS OF
	THE MILITARY THROUGH NONPROFIT SERVICE PROVIDERS IN SAN DIEGO COUNTY.
	SAN DIEGO HAS THE LARGEST CONCENTRATION OF MILITARY IN THE WORLD AND
	ACTIVE DUTY, VETERANS AND IN 2014, THEIR DEPENDENTS BENEFITTED FROM
	GRANTS RANGING FROM \$1,000 TO \$100,000 TO 18 DIFFERENT ORGANIZATIONS
	FOR A TOTAL OF NEARLY \$387,000.
	·
4b	(Code:) (Expenses \$ 300,000 • including grants of \$ 300,000 •) (Revenue \$)
	IN THE SECOND YEAR OF A THREE-YEAR COMMITMENT, THE ADVISORY COMMITTEE
	OF AN ENDOWED FUND GRANTED \$300,000 TO THE INDIANA UNIVERSITY SCHOOL OF
	NURSING (IUSON) TO SUPPORT A COLLABORATIVE INITIATIVE WITH SCRIPPS
	HEALTH OF SAN DIEGO FOCUSED ON IMPROVING COMMUNICATION BETWEEN HEALTH
	CARE PROVIDERS, PATIENTS AND PATIENTS' FAMILIES REGARDING PALLIATIVE
	AND END-OF-LIFE CARE.
4c	(Code:) (Expenses \$ 258,000 • including grants of \$ 258,000 •) (Revenue \$)
	IN 2014, THE RANCHO SANTA FE WOMEN'S FUND MADE 10 GRANTS TOTALING
	\$258,000. GRANTS RANGED IN SIZE FROM \$15,000 - \$30,000 AND FOCUSED ON
	NONPROFITS WORKING IN THE AREAS OF EDUCATION, ECONOMIC DEVELOPMENT AND
	SOCIAL SERVICES. THE MISSION OF THE RANCHO SANTA FE WOMEN'S FUND IS TO
	EDUCATE, INSPIRE AND INCREASE THE NUMBER OF WOMEN COMMITTED TO
	PHILANTHROPY IN ORDER TO STRENGTHEN THE COMMUNITY AND IMPACT LIVES
	THROUGH INFORMED, FOCUSED COLLECTIVE GIVING.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 6,530,288 • including grants of \$ 6,388,704 •) (Revenue \$)
<u>4e</u>	Total program service expenses ► 7,475,288.

432002 11-07-14

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	L
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	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	ا ــ ا		v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	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			х
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		v
00	complete Schedule G, Part III	19		X
20a		20a		^
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(0044)

Part IV Checklist of Required Schedules (continued)

			Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	23		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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			,,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			3,7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3,7
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	l	- v	
	Part V, line 1	34	Х	-
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
0 -	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			X
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		х	
	Note. All Form 990 filers are required to complete Schedule O	38		

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
С				
	(gambling) winnings to prize winners?	. 1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	7		
	filed for the calendar year ending with or within the year covered by this return	_	₩	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_		Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			Λ
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	. 3b		
48	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		х
h	If "Yes," enter the name of the foreign country:	. 4 a		
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		
5a		5а		х
b				X
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	. 00		
-	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a		Х
b	and the second s			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h		? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			77
	sponsoring organization have excess business holdings at any time during the year?	. 8		X
9	Sponsoring organizations maintaining donor advised funds.			v
а	Did the sponsoring organization make any taxable distributions under section 4966?			X
10 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 9b		Α.
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			
''	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	. 14b		
		Forn	n 990	(2014

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

_	Check it Schedule O contains a response or note to any line in this Part VI				
Sec	tion A. Governing Body and Management				
	1 1	2 0		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	30			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b	30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ı			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		Х
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?		7a		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?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion 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?	Γ	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,				
-	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fo	Г	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	h			
12a			12a	Х	
ь ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Х	
•	in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b		Х
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?	- 1	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b		
Sec	tion 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 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s	only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website X Another's website X Upon request Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol	icy, and	finan	cial	
	statements available to the public during the tax year.	•			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	•			
	CHRISTINA P. WILSON - 858-756-6557				
	P.O BOX 811, RANCHO SANTA FE, CA 92067				

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	Ĭ		((C)			(D)	(E)	(F)
Name and Title	Average hours per	(do	not c	Pos heck	more) than is bot	one	Reportable compensation	Reportable compensation	Estimated amount of
	week					or/trus		from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation from the
	hours for related	e or d	stee			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	trust	nal tru		oyee	ompe		,		and related
	below	lividua	Institutional trustee	Officer	Key employee	ihest c ployee	Former			organizations
(1) ALYCE ASHCRAFT	line) 1 • 0 0	프	lus	#5	ş.	흜틃	휸			
DIRECTOR	1.00	х						0.	0.	0.
(2) TERRY ATKINSON	1.00									
DIRECTOR		х						0.	0.	0.
(3) RICH COLLATO	1.00									
DIRECTOR		Х						0.	0.	0.
(4) CRAIG DADO	1.00									
DIRECTOR		Х						0.	0.	0.
(5) BILL DAVIDSON	1.00									
DIRECTOR		Х						0.	0.	0.
(6) DAVID DOWN	1.00									
DIRECTOR		Х						0.	0.	0.
(7) FRANCI FREE	1.00									
DIRECTOR		Х						0.	0.	0.
(8) HUGH GREENWAY	1.00									_
DIRECTOR		Х						0.	0.	0.
(9) VICTORIA HANLON	1.00									_
DIRECTOR	1	Х						0.	0.	0.
(10) MARK HOLMLUND	1.00	l								•
DIRECTOR	1 00	Х						0.	0.	0.
(11) CANDACE HUMBER	1.00									0
DIRECTOR	1 00	Х						0.	0.	0.
(12) KIMBERLY KING	1.00	,,								0
DIRECTOR	1 00	Х						0.	0.	0.
(13) CONSTANCE LEVI	1.00	X						0.	0.	0
DIRECTOR (14) MIGUIDI LODDER	1.00	^						0.	0.	0.
(14) MICHAEL LOBATZ	1.00	Х						0.	0.	0.
DIRECTOR (15) TOWN MA TOP	1.00	^						0.	0.	0.
(15) JOHN MAJOR DIRECTOR	1.00	Х						0.	0.	0.
(16) RON MCMAHON	1.00	<u> </u>	\vdash			-			"	-
DIRECTOR	1.00	Х						0.	0.	0.
(17) GLENN ORATZ	1.00	 	\vdash			\vdash				<u></u>
DIRECTOR		x						0.	0.	0.
432007 11-07-14	•		_	_						Form 990 (2014)

432007 11-07-14

Form **990** (2014

Part VII Section A. Officers, Directors, Trus		pioy	/ees		<u>а ні</u> С)	igne	StC			\neg		/[]	
(A)	(B) Average			Pos	•	1		(D)	(E) Reportable			(F)	اما
Name and title	hours per		not c	heck	more	than		Reportable Reportable compensation compensation				stimate nount (
	week		cer ar					from	from related	. I	اما	other	J1
	(list any	ctor						the	organizations	,	com	pensa	tion
	hours for	r director				ted		organization	(W-2/1099-MIS	C)	fı	om the	е
	related	stee o	ustee			ensa		(W-2/1099-MISC)			org	anizati	ion
	organizations	al trus	onal tr		loyee	comp						d relate	
	below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	mer				orga	anizatio	ons
(40)	1.00	프	l s	#0	Ke.	E E	훈						
(18) DANIEL PLATT	1.00	Į.,								_			0
DIRECTOR (10) PANIA POWERS	1.00	Х					-	0.		0.			0.
(19) PAULA POWERS DIRECTOR	1.00	X						0.		0.			0.
(20) BILL RUH	1.00	<u> </u>					_	0.		<u>.</u>			<u> </u>
DIRECTOR	1.00	X						0.		0.			0.
(21) RICHARD SAPP	1.00	122					\vdash	0.					
DIRECTOR	1.00	X						0.		0.			0.
(22) STEVE SIMPSON	1.00	123						•		Ŭ			••
DIRECTOR	1,00	x						0.		0.			0.
(23) GORDON SWANSON	1.00									Ť			
DIRECTOR		x						0.		0.			0.
(24) PAUL THIEL	1.00	 								Ť			
DIRECTOR		X						0.		0.			0.
(25) DONNA WALKER	1.00									\neg			
DIRECTOR		X						0.		0.			0.
(26) BETTY WILLIAMS	1.00									\neg			
DIRECTOR		Х						0.		0.			0.
1b Sub-total								0.		0.			0.
c Total from continuation sheets to Part V	II, Section A							135,000.		0.		4,2	
d Total (add lines 1b and 1c)								135,000.		0.	1	4,2	17.
2 Total number of individuals (including but i	not limited to th	nose	liste	ed al	bov	e) wl	no r	eceived more than \$100	,000 of reportable	e			
compensation from the organization													1
										ſ		Yes	No
3 Did the organization list any former officer			-	•	•	•		•					
line 1a? If "Yes," complete Schedule J for											3		X
4 For any individual listed on line 1a, is the s	•							-	•				37
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or	•				•		elat	•			_		v
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedul	e J i	or s	uch	pers	son					5		X
· · · · · · · · · · · · · · · · · · ·		-l	- II -						\$100,000 of a series		-4:		
 Complete this table for your five highest co the organization. Report compensation for 	•	•								Seris	alion	TOITI	
(A)	trie caleridar y	cai	enui	ng v	VILII	OI W	101111	(B)	year.		((٠,	
Name and business	address	N	INC	Ξ				Description of s	ervices	С		nsatio	n
				_				<u>-</u>			-		
									+				
2 Total number of independent contractors (\$100,000 of compensation from the organ		ot li	mite	d to		se li: 0	stec	d above) who received m	nore than				

SEE PART VII, SECTION A CONTINUATION SHEETS

	MILA LE								33-370	3033
Part VII Section A. Officers, Directors, To	rustees, Key E	mplo	oyee			High	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average	erage Position					1	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(27) KATE WILLIAMS DIRECTOR	1.00	X						0.	0.	0 .
(28) GIGI FENLEY	4.00	 						•		
SECRETARY		Х		х				0.	0.	0 .
(29) NEIL HOKANSON	4.00									
CHAIRMAN		Х		Х				0.	0.	0 .
(30) ROBERT VANOSKY	4.00								0	
TREASURER	40.00	Х		Х				0.	0.	0 .
(31) CHRISTINA WILSON EXECUTIVE DIRECTOR	40.00			х				135,000.	0.	14,217
	1					\vdash				
		1								
	1					\vdash				
T. I.I. D. 17/11/00 15 15 15 15	<u> </u>							135,000.		1/ 217
Total to Part VII, Section A, line 1c								133,000.		14,217

Pa			/		11 1001101	.11 1 011		75 5105	O D D Tage O
Ра	I L V	/III							
			Check if Schedule O cont	tains a response	or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
Gra		b	Membership dues	1b					
ts, (С	Fundraising events	1c					
Giff		d	Related organizations	1d					
ns,		е	Government grants (contribut	tions) 1e					
er S		f	All other contributions, gifts, gran	its, and					
텵			similar amounts not included abo	ve 1f	10,748,349.				
d d		g	Noncash contributions included in lines	s 1a-1f: \$	2,078,275.				
ğΈ		h	Total. Add lines 1a-1f			10,748,349.			
					Business Code				
ice	2	а							
er v		b							
n S		С							
gra Re		d							
Program Service Revenue		е							
۳ ا			All other program service reve						
_			Total. Add lines 2a-2f						
	3		Investment income (including			1 402 265			1 402 265
			other similar amounts)			1,483,365.			1,483,365.
	4		Income from investment of ta						
	5		Royalties						
	_	_	Our se wente	(i) Real	(ii) Personal				
	6		Gross rents		-				
			Less: rental expenses		-				
			Rental income or (loss)						
			Net rental income or (loss) Gross amount from sales of						
	′	а	assets other than inventory	(i) Securities 28,790,786.	(ii) Other				
		h	Less: cost or other basis	20,730,700.	+				
		D	and sales expenses	27,469,736.					
		_	Gain or (loss)						
			Net gain or (loss)		·	1,321,050.			1,321,050.
	8		Gross income from fundraisin						
Other Revenue	Ŭ	_	including \$						
eve			contributions reported on line						
r.			Part IV, line 18	· ·					
the l		b	Less: direct expenses						
0			Net income or (loss) from fund						
	9	а	Gross income from gaming ad	ctivities. See					
			Part IV, line 19						
		b	Less: direct expenses						
		С	Net income or (loss) from gan	ning activities					
	10	а	Gross sales of inventory, less	returns					
			and allowances	а					
		b	Less: cost of goods sold						
			Net income or (loss) from sale		>				
			Miscellaneous Revenu	ie	Business Code				
	11	а	MANAGEMENT FEE REVENUE		525920	138,191.	138,191.		
		b							
		С							
		d	All other revenue	_ _					
		_	Total, Add lines 11a-11d			138,191.			

2,804,415. Form **990** (2014)

13,690,955.

138,191.

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).

	not include amounts reported on lines 6b,	(A) Total expenses	this Part IX(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,328,604.	7,328,604.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4,000.	4,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,100.	1,100.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		40 -00		
	trustees, and key employees	137,057.	13,706.	27,411.	95,940
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.45 0.50	66.005	150 501	- 18 <i>0</i>
7	Other salaries and wages	245,052.	66,985.	172,591.	5,476
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	40.000	0 000	01 001	44 4 5
9	Other employee benefits	42,020.	8,873.	21,994.	11,153
0	Payroll taxes	28,231.	5,962.	14,776.	7,493
1	Fees for services (non-employees):				
	Management	00 524		00 524	
	Legal	29,534.	1 446	29,534.	1 010
	Accounting	38,450.	1,446.	35,186.	1,818
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	0.77.0	405	255	
	column (A) amount, list line 11g expenses on Sch O.)	870.	495.	375.	F4 FF0
12	Advertising and promotion	51,750.	C 025	4 046	51,750
13	Office expenses	15,729.	6,035.	4,846.	4,848
4	Information technology	18,783.	2,021.	16,762.	
15	Royalties	E 6 201	10 705	18,794.	10 705
16	Occupancy	56,384. 4,908.	18,795.		18,795
17	Travel	4,908.		4,908.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	38,602.	3,207.	22,722.	12,673
19	Conferences, conventions, and meetings	663.	221.	221.	221
20	Interest	003.	221.	221.	221
21	Payments to affiliates	8,505.		8,505.	
22	Depreciation, depletion, and amortization	10,497.	566.	9,219.	712
23	Other expenses, Itemize expenses not covered	10,43/•	500.	9,419.	/ 1 2
24	above. (List miscellaneous expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DUES AND SUBSCRIPTIONS	10,523.	2,278.	6,679.	1,566
b	PRINTING/REPRODUCTION	9,114.	4,892.	2,111.	2,111
c	BANK SERVICE CHARGES	8,586.	415.	8,171.	Ó
d	TELEPHONE	7,827.	2,609.	2,609.	2,609
e	All other expenses	17,649.	3,078.	11,815.	2,756
25	Total functional expenses. Add lines 1 through 24e	8,114,438.	7,475,288.	419,229.	219,921
26	Joint costs. Complete this line only if the organization				-
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2014) Part X Balance Sheet

Ра	πх	Balance Sneet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			621,772.	1	471,716.
	2	Savings and temporary cash investments			106,020.	2	181,037.
	3	Pledges and grants receivable, net			5,953,964.	3	5,369,204.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa	ated er	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7		
⋖	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		17,008.	9	10,230.	
	10a	Land, buildings, and equipment: cost or other		400 -00			
		basis. Complete Part VI of Schedule D		122,783.			
	b	Less: accumulated depreciation		71,996.	33,553.	10c	50,787.
	11	Investments - publicly traded securities			58,996,335.	11	65,501,460.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		16 105 611	14	16 242 254	
	15	Other assets. See Part IV, line 11		16,405,641.	15	16,349,274.	
	16	Total assets. Add lines 1 through 15 (must equa			82,134,293.	16	87,933,708.
	17	Accounts payable and accrued expenses		16,361.	17	17,068.	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			1 <i>C</i> 401 E41	20	16 245 174
	21	Escrow or custodial account liability. Complete I			16,401,541.	21	16,345,174.
ies	22	Loans and other payables to current and former					
biit		key employees, highest compensated employee		· · ·			
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		Г		24	
	25	Other liabilities (including federal income tax, pa	,				
		parties, and other liabilities not included on lines Schedule D		, ,		25	
	26				16,417,902.	26	16,362,242.
_	20	Organizations that follow SFAS 117 (ASC 958		ck here X and	10,111,002.	20	10,000,040
v		complete lines 27 through 29, and lines 33 an		allu			
Š	27	Unrestricted net assets			29,465,276.	27	31,886,128.
alar	28	Temporarily restricted net assets			6,091,566.	28	6,451,415.
Ä	29	D			30,159,549.	29	33,233,923.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (A	8). check here	, , , = 35 , 5 = 3 0			
ΥF		and complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds	ľ		30		
sse	31	Paid-in or capital surplus, or land, building, or ed				31	
ř	32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances		_	65,716,391.	33	71,571,466.
	l			· ·	82,134,293.		87,933,708.
	34	Total liabilities and net assets/fund balances		· ·	82,134,293.	34	87,933,708

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	13,69 8,11 5,57 65,71 37	0,9 4,4 6,5	55. 38. 17. 91. 82.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	71,57	1,4	66.
Pa	rt XII Financial Statements and Reporting		, -		
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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	on a		Х	
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th 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 in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	edule O.	2c	Х	
	Act and OMB Circular A-133?	J	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

RANCHO SANTA FE FOUNDATION

Employer identification number 95-3709639

Pa	rt I	Reason for Public (Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.	
The	organ	ization is not a private found	ation because it is: (For lines 1 through 11, o	check only	one box.)		
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1	I)(A)(i).	
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)						
3		A hospital or a cooperative		•	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiz					-	the hospital's name.
		city, and state:	·					,
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a g	overnmental unit describ	ped in
_		section 170(b)(1)(A)(iv). (C		,		, 3		
6		A federal, state, or local gov	•	nental unit described in	section 17	70(b)(1)(A)	(v).	
	X	An organization that norma	-					public described in
•		section 170(b)(1)(A)(vi). (Co	•	artial part of its support	nom a gov	orrintoritai	anic or nom the general	pasile accombed in
8		A community trust describe		(1)(Δ)(vi) (Complete Par	+ 11 \			
9	一	An organization that norma				contribution	one membership fees a	and arose receipts from
,		activities related to its exen	•	•	-			
		income and unrelated busin	-	•				•
		See section 509(a)(2). (Cor		(less section of reax) if	OIII DUSIIIC	sses acqu	illed by the organization	arter durie 30, 1973.
10		An organization organized a	•	ively to test for public es	afaty Saa	saction 50	10(a)(A)	
11	一	An organization organized a	•	•	•			nurnoses of one or
••		more publicly supported or	•	•	-		· · · · · · · · · · · · · · · · · · ·	
		lines 11a through 11d that	~					DIECK THE DOX III
_		Type I. A supporting orga				•		, aivina
а		the supported organization	•	•				
		organization. You must o			a majomy	or tine direc	ciois of trustees of the s	supporting
h		¬ ~	•		tion with it	o cupport	ad arganization(s) by he	wing
b	L		•					•
		control or management o			arrie perso	אווס נוומנ טכ	ontrol of manage the sup	pported
_		organization(s). You mus			in connoc	tion with	and functionally integrat	ad with
C							• •	ea with,
		its supported organization						
d			= ::					
		that is not functionally int	-		•			iveriess
_		requirement (see instruct	•	- ·				
е		☐ Check this box if the orga					ттурет, туреті, туретіі	
	Enta	functionally integrated, or						
١ ~		er the number of supported of vide the following information						
9		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of
		organization		(described on lines 1-9	listed i	n your	support (see	other support (see
				above or IRC section	Yes	No	Instructions)	Instructions)
				(see instructions))	1.00	-110		
					1			
Tota								

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Form 990 or 990-EZ. 432021 09-17-14

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

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

Sec	ction A. Public Support			·				
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
	Gifts, grants, contributions, and	, ,	, ,	, ,	, ,	` '	.,	
	membership fees received. (Do not							
	include any "unusual grants.")	4,049,899.	15,740,971.	14,694,654.	16,053,498.	10,748,349.	61,287,371.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	4,049,899.	15,740,971.	14,694,654.	16,053,498.	10,748,349.	61,287,371.	
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)						36,699,544.	
	Public support. Subtract line 5 from line 4.						24,587,827.	
	ction B. Total Support	1				1		
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
	Amounts from line 4	4,049,899.	15,740,971.	14,694,654.	16,053,498.	10,748,349.	61,287,371.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties	313,431.	354,414.	843,586.	1 170 100	1 402 265	4 164 004	
_	and income from similar sources	313,431.	334,414.	043,300.	1,170,108.	1,483,365.	4,164,904.	
9	Net income from unrelated business							
	activities, whether or not the							
40	business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital							
	assets (Explain in Part VI.)	80,990.	93 690.	113 867	124 955.	138,191.	551,693.	
11	Total support. Add lines 7 through 10	00/3301	3370301	113/00/1	121/3331	130/1311	66,003,968.	
12		etc (see instruction	ons)			12		
	First five years. If the Form 990 is for	•	,					
	organization, check this box and stor				•			
Sec	ction C. Computation of Publ						·············	
14	Public support percentage for 2014 (line 6, column (f) d	ivided by line 11, c	olumn (f))		14	37.25 %	
	Public support percentage from 2013					15	32.64 %	
	33 1/3% support test - 2014. If the					nore, check this bo	x and	
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X	
b	33 1/3% support test - 2013. If the o	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box	
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□	
17a	10% -facts-and-circumstances tes	•					•	
	and if the organization meets the "fac							
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□	
b	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the							
	organization meets the "facts-and-circ						>	
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2014

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

(Complete only if you checked the box on line 9 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.)

Se	ction A. Public Support	siow, picase com	proto r ure m.				
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and		, ,	. ,	, ,	, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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						
•	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support				,	i	
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
"	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
10	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
40	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	504()(0)	<u></u>
14	First five years. If the Form 990 is for	· ·			•	. , . ,	
<u> </u>	check this box and stop here ction C. Computation of Publ						P
	Public support percentage for 2014 (I			acluma (fl)		15	
	Public support percentage from 2013					16	<u>%</u> %
	ction D. Computation of Inves					1 10 1	70
17						17	%
	Investment income percentage from 2					18	
	a 33 1/3% support tests - 2014. If the						
.50	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2013. If the						
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization			•		•	

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <code>part VI</code>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	30		
	4a		
	4b		
	4-		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10-		
	10a		
	10b		

Par	art IV Supporting Organizations (continued)			
	,		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1				
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2				
	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,			
800	supervised, or controlled the supporting organization.	2		<u> </u>
Sec	ction C. Type II Supporting Organizations		Yes	No
4	Ware a majority of the arganization's directors or trustees during the tay year also a majority of the directors		res	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. Type III Supporting Organizations	<u>'</u>		
			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, (1) a written notice describing the type and amount of support provided during the price	or tax		
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	? <u>1</u>		
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	v		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3				
	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			
800	supported organizations played in this regard.	3		
1	ction E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see			
' a		instructions):		
b				
c		entity (see instructions	;).	
2		, (Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Vos." describe in a contraction over the role played by the organization in this regard.	on 3b		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All					
	other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Cont	ion A - Adjusted Net Income		(A) Prior Voor	(B) Current Year		
Seci	ion A - Adjusted Net Income		(A) Prior Year	(optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
_5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
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				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionall	y-integra	ated Type III supporting org	ganization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2014

Par	TV │ Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations _(continued)	
Secti	ion D - Distributions		<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	Э	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sacti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
Jecu	on E - Distribution Anocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
_	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>а</u>				
b				
<u> </u>	5 (0010			
	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

RANCHO SANTA FE FOUNDATION

95-3709639

Organization type (check one):						
Filers of:		Section:				
Form 990	or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990)-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. On General	ly a section 501(c)(Rule For an organization property) from any	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. In filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
X	For an organization sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	year, contributions is checked, enter h purpose. Do not co	a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \ \bigsim \frac{\bigsim}{\bigsim} \frac\				
but it mu	st answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization Employer identification number

RANCHO SANTA FE FOUNDATION

95-3709639

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 2,998,418.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 1,458,021.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, audiess, and Zir + 4	\$ 1,144,850.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 865,122.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

RANCHO SANTA FE FOUNDATION

95-3709639

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 253,824.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

RANCHO SANTA FE FOUNDATION

95-3709639

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	SERVICENOW COMMON		
		\$1,144,850.	01/09/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	PACWEST BANCORP COMMON		
		\$\$	_12/10/14_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	KINDER MORGAN ENERGY PARTNERS COMMON		
		\$\$	09/08/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
4004E0 11 0		Schedule B (Form C	000 000-F7 or 000-PF) (2014)

Employer identification number

Name of organization

95-3709639 RANCHO SANTA FE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (<u>a)</u> No. `fŕom Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization RANCHO SANTA FE FOUNDATION **Employer identification number** 95-3709639

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accou	ints.Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6.		
		(a) Donor advised funds	(b) Fun	ds and other accounts
1	Total number at end of year	104		
2	Aggregate value of contributions to (during year)	7,320,958.		
3	Aggregate value of grants from (during year)	5,885,192.		
4	Aggregate value at end of year	31,068,918.		
5	Did the organization inform all donors and donor advisors in		d funds	
_	are the organization's property, subject to the organization's	-		X Yes No
6	Did the organization inform all grantees, donors, and donor a			
•	for charitable purposes and not for the benefit of the donor			
				X Yes
Par				
1	Purpose(s) of conservation easements held by the organizat	-	,	
•	Preservation of land for public use (e.g., recreation or		cally impor	tant land area
	X Protection of natural habitat	Preservation of a certific		
	X Preservation of open space	i reservation of a certific	od mistorio i	Structure
2		ified concernation contribution in the form of	a concon	ation accoment on the last
_	Complete lines 2a through 2d if the organization held a quali	med conservation contribution in the form of	a conserva	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
•	Total number of conservation easements		2a	2:
b			····	30.00
0	Number of conservation easements on a certified historic st	ructure included in (a)		0
٥	Number of conservation easements included in (c) acquired			
u			2d	0
2	listed in the National Register			
3	0	eleased, extilliguished, or terminated by the o	rgariizatioi	rudning the tax
4	year V	accompant in located • 1		
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the per			Yes X No
6	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting			
7	Amount of expenses incurred in monitoring, inspecting, and			—
8	Does each conservation easement reported on line 2(d) about and costion 170(b)(4)(D)(ii)2			Yes X No
0	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservationally describe the text of the footbatte to the exercise			
	include, if applicable, the text of the footnote to the organiza	ation's imancial statements that describes the	e organizai	tion's accounting for
Par	conservation easements. t III Organizations Maintaining Collections of	of Art Historical Treasures or Oth	er Simil	ar Assets
	Complete if the organization answered "Yes" to Form			a. 7.000101
12	If the organization elected, as permitted under SFAS 116 (A)		nt and hala	ance sheet works of art
	historical treasures, or other similar assets held for public ex			
	the text of the footnote to its financial statements that descri		c or public	service, provide, irr art xiii,
h	If the organization elected, as permitted under SFAS 116 (A)		nd halance	s sheet works of art, historical
Б	treasures, or other similar assets held for public exhibition, e			
		education, or research in furtherance of public	c service, p	brovide the following amounts
	relating to these items:			¢
	(i) Revenue included in Form 990, Part VIII, line 1			Ψ
•		and the state of t		·
2	If the organization received or held works of art, historical tre	,	jain, provid	e
_	the following amounts required to be reported under SFAS 1			φ
a	Revenue included in Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X		🟲 🤄	

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): a	Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or O	ther Sin	nilar Asse	ts (continue	ed)				
a Public arbiblion b Scholarly research c □ Chter Preservation for future generations Public arbiblion of the organizations of the Conter Chter	3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are	a significa	int use of its	collection it	tems				
b Scholarly research c		(check all that apply):											
b Scholarly research c	а	Public exhibition	d	Loan or exc	hange programs								
c Perservation 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? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part NI, line 9, or reported an amount on Form 990, Part X, line 21. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XP Ves X No 1 If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1d	b	Scholarly research	е	Other									
4 Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to 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? 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIII and complete the following lable: 1c	С	Preservation for future generations											
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 pair of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an angent, fursitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? In It is the organization and program in It is a standard to the arrangement in Part XIII and complete the following table: Text	4	_	ollections and explain	n how they further t	he organization's e	exempt pu	ırpose in Par	t XIII.					
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1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ▼es ▼es ▼es ▼es ▼es ▼es ▼es ▼es No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1c d d d Amount 1c d <th>Pai</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>ine 9, or</th> <th></th>	Pai							ine 9, or					
on Form 990, Part X? □ Ves		reported an amount on Form 990, Pa	t X, line 21.					•					
C Beginning balance Beginning of year balance Beginning of year balance Beginning of year balance C Beginning of year balance C Beginning of year balance Beginning of year balance C Beginning of year balance D Beginning of year beg	1a	Is the organization an agent, trustee, custod	an or other intermed	iary for contribution	s or other assets i	not includ	ed	_					
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance Id Id Id Id Id Id Id I		on Form 990, Part X?						Yes	X No				
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Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	f	Ending balance				<u>1</u>		_					
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) For year (d) Three years back (d) Three years back (e) For year (d) Three years back (e) Ford years back (d) Three years back (e) Ford years years (e) Fo	2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or co	ustodial account lia	ability?	<u>X</u>	Yes					
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						62,	773.						
e Other 9,223. 5,422.					4,645.								
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				X, column (B), line 1	Oc.)		▶	50	,787.				

Schedule D (Form 990) 2014 RANCHO SANTA	A FE FOUNDAT	ION	95-	3709639 Page
Part VII Investments - Other Securities.				. age
Complete if the organization answered "Yes" t	to Form 990 Part IV line	e 11b. See Form 990. P	art X line 12	
(a) Description of security or category (including name of security)	(b) Book value		luation: Cost or end-	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
•				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" t	to Form 990, Part IV, line	e 11c. See Form 990, P	art X, line 13.	
(a) Description of investment	(b) Book value		luation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets.				
Complete if the organization answered "Yes" t	to Form 990, Part IV, line	e 11d. See Form 990, P	art X, line 15.	
	Description			(b) Book value
(1) INVESTMENTS HELD FOR OTHER	RS			16,345,174
(2) OTHER ASSETS				4,100
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	15)			16,349,274
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	: 15.)			10,349,274
Complete if the organization answered "Yes" to	to Form 990, Part IV, line		990, Part X, line 25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
\ /	1			

4c

8,114,438.

Sche	dule D (Form 990) 2014 RANCHO SANTA FE FOUNDATION			95-	3709639 Page
	t XI Reconciliation of Revenue per Audited Financial Stateme	nts W			
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	13,969,514
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	373,682.		
b	Donated services and use of facilities	$\overline{}$			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		-95,124.		
е	Add lines 2a through 2d			2e	278,558
3	Subtract line 2e from line 1			3	13,690,956
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-1.		
С	Add lines 4a and 4b			4c	-1
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	13,690,955
Pai	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	8,114,438
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	8,114,438

Part XIII Supplemental Information.

Other (Describe in Part XIII.) c Add lines 4a and 4b

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

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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.

4a

PART II, LINE 9:

THE FOUNDATION HOLDS TITLE TO A 22-ACRE PARCEL OF UNDEVELOPED LAND AS WELL AS TWO OTHER PARCELS CONSISTING OF 4.30 ACRES AND 3.70 ACRES IN RANCHO SANTA FE WHICH ARE TO BE HELD BY THE FOUNDATION IN PERPETUITY AS OPEN SPACE. THE VALUE OF THESE PARCELS HAS NOT BEEN INCLUDED WITHIN THE ACCOMPANYING FINANCIAL STATEMENTS AS THE LAND HAS NO RECOGNIZABLE VALUE DUE TO THE NATURE OF THE RESTRICTIVE CIRCUMSTANCES UNDER WHICH IT IS HELD.

PART IV, LINE 2B:

THE FOUNDATION RECEIVES CONTRIBUTIONS ON BEHALF OF UNAFFILIATED NOT-FOR-PROFIT AGENCIES, WHICH ARE NOT REFLECTED IN THE FOUNDATION'S

STATEMENT OF ACTIVITES AS THEY DO NOT REPRESENT CONTRIBUTIONS TO THE

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

➤ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014

Open to Public Inspection

Name of the organization RANCHO SA	NTA FE FO	OUNDATION					Employer identification number 95-3709639
Part I General Information on Grants a							
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's pro-	stance? ocedures for mon	itoring the use of gran	t funds in the Unite	d States.			X Yes No
Part II Grants and Other Assistance to	_				anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than S 1 (a) Name and address of organization or government	65,000. Part II cai	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHWAB CHARITABLE FUND 1958 SUMMIT PARK DRIVE, #200 ORLANDO, FL 32810	31-1640316	501(C)(3)	2,490,278.	0.			PHILANTHROPY
INDIANA UNIVERSITY 980 INDIANA AVE, RM2232 INDIANAPOLIS, IN 46202	35-6001673	501(C)(3)	300,000.	0.			COLLEGE/UNIVERSITY
SANFORD BURNHAM INSTITUTE FOR MEDICAL RESEARCH - 10901 N. TORREY PINES RD LA JOLLA, CA 92037	51-0197108	501(C)(3)	252,500.	0.			RESEARCH
VILLAGE COMMUNITY PRESBYTERIAN CHURCH - P.O. BOX 704 - RANCHO SANTA FE, CA 92067	95-6006164	501(C)(3)	251,009.	0.			WORSHIP
INTEGRA CENTER P.O. BOX 22498 SAN DIEGO, CA 92192	45-3837670	501(C)(3)	231,000.	0.			INCLUSION
SCRIPPS HEALTH FOUNDATION P.O. BOX 2669 LA JOLLA, CA 92038 2 Enter total number of section 501(c)(3) a	95-1684089	501(C)(3)	167,100.	0.			HOSPITALS 132

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

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

Schedule I (Form 990) (2014)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ST. JOHN SCHOOL								
1003 ENCINITAS BLVD.								
ENCINITAS, CA 92024	95-1644613	501(C)(3)	150,000.	0.			K-12	
ALL HALLOWS CATHOLIC CHURCH								
6602 LA JOLLA SCENIC DR. S								
LA JOLLA, CA 92037	27-3861154	501(C)(3)	135,000.	0.			TRAINING/STUDY	
MAINLY MOZART								
444 W. BEECH STREET, #220								
SAN DIEGO, CA 92101	33-0320305	501(C)(3)	125,500.	0.			MUSIC	
,								
CAMBRIDGE SCHOOL								
P.O. BOX 720508								
SAN DIEGO, CA 92172	20-4594308	501(C)(3)	125,000.	0.			K-12	
·			,					
KRAEMER ENDOWMENT FOUNDATION								
2119 EAST MADISON AVENUE								
EL CAJON, CA 92019	33-0573935	501(C)(3)	125,000.	0.			ECONOMIC DEVELOPMENT	
·								
MIRAGLO FOUNDATION								
P.O. BOX 1270								
LA JOLLA, CA 92038	45-2499438	501(C)(3)	120,000.	0.			RESEARCH	
RADY CHILDREN'S HOSPITAL & HEALTH								
CENTER - 3020 CHILDREN'S WAY - SAN								
DIEGO, CA 92123	95-3545901	501(C)(3)	110,320.	0.			HOSPITALS	
UNIVERSITY OF VIRGINIA LAW SCHOOL								
FOUNDATION - 580 MASSIE ROAD -								
CHARLOTTESVILLE, VA 22903	54-0838566	501(C)(3)	100,000.	0.			COLLEGE/UNIVERSITY	
CAN DIECO DOMANIC CARDEN								
SAN DIEGO BOTANIC GARDEN								
P. O. BOX 230005	05 6100501	E01/G)/3\	72 425	_			DOMANIA GADDENA	
ENCINITAS, CA 92023	95-6120581	501(C)(3)	73,135.	0.			BOTANIC GARDENS	

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF THE NATIVITY							
P. O. BOX 8770							
RANCHO SANTA FE, CA 92067	27-3944748	501(C)(3)	70,100.	0.			WORSHIP
EMILIO NARES FOUNDATION							
PO BOX 86165							
SAN DIEGO, CA 92138	13-4229276	501(C)(3)	70,000.	0.			MEDICAL CARE
MINGEI INTERNATIONAL MUSEUM							
1439 EL PRADO							
SAN DIEGO, CA 92101	23-7433357	501(C)(3)	60,750.	0.			MUSEUM
DREAMS FOR CHANGE							
P.O. BOX 16327							
SAN DIEGO, CA 92176	27-0447059	501(C)(3)	58,438.	0.			BASIC NEEDS
211. 21200, 01. 321.0	1, 011,005		30,100.				
MERCY HOSPITAL FOUNDATION							
4077 5TH AVENUE							
SAN DIEGO, CA 92103	94-2958094	501(C)(3)	52,000.	0.			HOSPITALS
YMCA OF SAN DIEGO COUNTY							
3708 RUFFIN ROAD							
SAN DIEGO, CA 92123	95-2039198	501(C)(3)	51,250.	0.			YOUTH DEVELOPMENT
,	1		, = , = , = ,				
ARMY HISTORICAL FOUNDATION							
2425 WILSON BOULEVARD							
ARLINGTON, VA 22201	52-1367225	501(C)(3)	50,000.	0.			HISTORIC SOCIETIES
FINAL SALUTE, INC.							
P.O. BOX 156							
HAYMARKET, VA 20168	80-0660380	501(C)(3)	50,000.	0.			HOUSING/SHELTER
INSTITUTE FOR ADVANCED CATHOLIC							
STUDIES - 835 WEST 34TH STREET,	25 1042470	E01/G)/3)	F0 000	2			DEL TOTOLIG CEUDING
URC102 - LOS ANGELES, CA 90089	25-1843470	DOT(C)(3)	50,000.	0.			RELIGIOUS STUDIES

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHEELS IN MOTION FOUNDATION							
14950 JOMAX ROAD							
SURPRISE, AZ 85387	26-4501619	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT
WEST LAKE HILLS PRESBYTERIAN			·				
CHURCH FOUNDATION - 7127 BEE CAVE ROAD - AUSTIN, TX 78746	20-0031358	501(C)(3)	45,000.	0.			WORSHIP
1001111, 111 /0/110	20 0001000	,,,,,,	43,000.	0.			
INTERFAITH COMMUNITY SERVICES 550 W. WASHINGTON AVE. STE B							
ESCONDIDO, CA 92025	95-3837714	501(C)(3)	44,410.	0.			BASIC NEEDS
IOWA STATE UNIVERSITY FOUNDATION 2505 UNIVERSITY BOULEVARD AMES, IA 50010	42-1143702	501(C)(3)	42,680.	0.			COLLEGE/UNIVERSITY
•			, -	-			
MIRA COSTA COLLEGE FOUNDATION ONE BARNARD DRIVE							
OCEANSIDE, CA 92056	95-6151938	501(C)(3)	42,250.	0.			COMMUNITY COLLEGE
PACIFIC RIDGE SCHOOL 5269 EL FUERTE							
CARLSBAD, CA 92009	86-1061606	501(C)(3)	38,500.	0.			K-12
OUTREACH FOUNDATION OF THE PRESBYTERIAN CHURCH - 381 RIVERSIDE DRIVE, #110 - FRANKLIN,							
FN 37064	58-1375506	501(C)(3)	37,000.	0.			EDUCATION
NEW HAVEN YOUTH & FAMILY SERVICES P. O. BOX 1199							
VISTA, CA 92085	95-3161628	501(C)(3)	36,000.	0.			YOUTH DEVELOPMENT
NORTH COUNTY LIFELINE 200 MICHIGAN AVENUE							
/ISTA, CA 92084	95-2794253	501(C)(3)	35,000.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SAN DIEGO SECOND CHANCE PROGRAM									
6145 IMPERIAL AVENUE									
SAN DIEGO, CA 92114	33-0539640	501(C)(3)	35,000.	0.			ECONOMIC DEVELOPMENT		
REALITY CHANGERS									
3910 UNIVERSITY AVENUE									
SAN DIEGO, CA 92105	26-3757305	501(C)(3)	33,000.	0.			YOUTH DEVELOPMENT		
-			, .						
LA COSTA YOUTH ORGANIZATION									
7668 EL CAMINO REAL, #104-610									
CARLSBAD, CA 92009	33-0214056	501(C)(3)	31,000.	0.			YOUTH DEVELOPMENT		
GAN DIEGO GRANDWANERG									
SAN DIEGO GRANTMAKERS									
5060 SHOREHAM PLACE, SUITE 350 SAN DIEGO, CA 92122	33-0868261	501(C)(3)	30,500.	0.			COMMUNITY DEVELOPMENT		
BAN DIEGO, CA 72122	33 0000201	501(0)(5)	30,300.				COMMONITY DEVELOTMENT		
BIG BROTHERS BIG SISTERS OF SAN									
DIEGO COUNTY - 4305 UNIVERSITY									
AVENUE, #300 - SAN DIEGO, CA 92105	95-2151526	501(C)(3)	30,000.	0.			AFTER SCHOOL PROGRAMS		
BOYS AND GIRLS CLUBS OF AUSTIN &									
TRAVIS COUNTIES - 5407 NORTH									
INTERSTATE 35, SUITE 400 - AUSTIN,									
TX 78723	74-6087356	501(C)(3)	30,000.	0.			YOUTH DEVELOPMENT		
CARLEAL AREA BOOD DANK OF MEYAG									
CAPITAL AREA FOOD BANK OF TEXAS, INC 8201 S. CONGRESS AVE									
AUSTIN, TX 78745	74-2217350	501(C)(3)	30,000.	0.			FOOD		
1001IN, 1X 70745	74 2217330	501(0)(3)	30,000.	•••			1 002		
CECILY'S CLOSET									
270-F N. EL CAMINO REAL #457									
ENCINITAS, CA 92024	27-2245113	501(C)(3)	30,000.	0.			INCLUSION		
OUTDOOR OUTREACH									
5275 MARKET STREET, #21	22 22 24 2	504 (5) (2)	20.555				L		
SAN DIEGO, CA 92114	33-0860449	b01(C)(3)	30,000.	0.			YOUTH DEVELOPMENT		

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RANCHO SANTA FE ASSOCIATION P.O. BOX A RANCHO SANTA FE, CA 92067	95-1132930	501(C)(4)	29,662.	0.			PHILANTHROPY
RANCHO SANTA FE SENIORS, INC. P.O. BOX 223 RANCHO SANTA FE, CA 92067	95-6113493	501(C)(3)	27,604.	0.			AGING SERVICES
UNITED WAY OF SAN DIEGO 4699 MURPHY CANYON RD. SAN DIEGO, CA 92123	95-2213995	501(C)(3)	27,213.	0.			COMMUNITY DEVELOPMENT
SALVATION ARMY - SIERRA DEL MAR REGION - 2320 FIFTH AVENUE - SAN DIEGO, CA 92101	94-1156347	501(C)(3)	26,770.	0.			BASIC NEEDS
HORIZON CHRISTIAN FELLOWSHIP P. O. BOX 9070 RANCHO SANTA FE, CA 92067	33-0736434	501(C)(3)	25,500.	0.			TRAINING/STUDY
MAMA'S KITCHEN 3960 HOME AVENUE SAN DIEGO, CA 92105	33-0434246	501(C)(3)	25,430.	0.			FOOD
BOYS & GIRLS CLUB OF GREATER SAN DIEGO - P.O. BOX 178569 - SAN DIEGO, CA 92177	95-1865988	501(C)(3)	25,000.	0.			YOUTH DEVELOPMENT
KIDS CAN FREE THE CHILDREN 282 SAN ANTONIO ROAD MOUNTAIN VIEW, CA 94040	16-1533544	501(C)(3)	25,000.	0.			ECONOMIC DEVELOPMENT
MONARCH SCHOOL PROJECT 1625 NEWTON AVENUE SAN DIEGO, CA 92113	33-0871354	501(C)(3)	25,000.	0.			K-12

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MT. SOLEDAD VETERAN'S MEMORIAL ASSOCIATION - 6437 CAMINITO BLYTHEFIELD - LA JOLLA, CA 92037	95-2373533	501(C)(3)	25,000.	0.			MILITARY			
NORTHERN ARIZONA UNIVERSITY FOUNDATION - P.O. BOX 4094 - FLAGSTAFF, AZ 86011	86-0193726	501(C)(3)	25,000.	0.			COLLEGE/UNIVERSITY			
SAN DIEGO SOCIAL VENTURE PARTNERS 6960 FLANDERS DRIVE SAN DIEGO, CA 92121	26-4671099	501(C)(3)	25,000.	0.			ECONOMIC DEVELOPMENT			
FELLOWSHIP OF CHRISTIAN ATHLETES P.O. BOX 8366 HUNTINGTON BEACH, CA 92615	44-0610626	501(C)(3)	23,000.	0.			YOUTH DEVELOPMENT			
GLAD TIDINGS INDIA 53 HARRISTOWN ROAD PARADISE, PA 17562	55-0865401	501(C)(3)	22,900.	0.			RELIGIOUS STUDIES			
BOYS & GIRLS CLUBS OF SAN DIEGUITO FOUNDATION - P. O. BOX 871 - SOLANA BEACH, CA 92075	95-3201906	501(C)(3)	20,900.	0.			AFTER SCHOOL PROGRAMS			
ME TO WE FOUNDATION 6500 MAIN STREET, SUITE #5 WILLIAMSVILLE, NY 14221	27-3338929	501(C)(3)	20,000.	0.			YOUTH DEVELOPMENT			
MONTGOMERY UNITED METHODIST CHURCH P.O. BOX 1330 MONTGOMERY, TX 77356	74-1809502	501(C)(3)	20,000.	0.			WORSHIP			
PLEASANTS COUNTY LIBRARY 101 LAFAYETTE STREET ST. MARYS, WV 26170	55-0596254	501(C)(3)	18,443.	0.			LIBRARIES			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JOHN F. KENNEDY CENTER FOR THE PERFORMING ARTS - 2700 F STREET, NW - WASHINGTON, DC 20566	53-0245017	501(C)(3)	17,024.	0.			THEATRE			
RANCHO SANTA FE LIBRARY GUILD P.O. BOX 348 RANCHO SANTA FE, CA 92067	95-6091588	501(C)(3)	16,880.	0.			LIBRARIES			
HARVARD UNIVERSITY 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	16,000.	0.			COLLEGE/UNIVERSITY			
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET SAN DIEGO, CA 92121	33-0739596	501(C)(3)	15,320.	0.			INCLUSION			
CASA DE AMISTAD 120 STEVENS AVENUE SOLANA BEACH, CA 92075	26-0016331	501(C)(3)	15,000.	0.			YOUTH DEVELOPMENT			
FOOD FORWARD 7412 FULTON AVENUE #3 NORTH HOLLYWOOD, CA 91605	90-0678872	501(C)(3)	15,000.	0.			FOOD			
LA JOLLA ROTARY FOUNDATION 7755 FAY AVENUE, SUITE D LA JOLLA, CA 92037	95-6111636	501(C)(3)	15,000.	0.			PHILANTHROPY			
SAN DIEGO CALVARY KOREAN CHURCH 6970 LINDA VISTA ROAD SAN DIEGO, CA 92111	33-0333698	501(C)(3)	15,000.	0.			WORSHIP			
SEGERSTROM CENTER FOR THE ARTS 600 TOWN CENTER DRIVE COSTA MESA, CA 92626	23-7287150	501(C)(3)	15,000.	0.			THEATRE			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SUMMERBRIDGE SAN DIEGO, INC.										
9974 SCRIPPS RANCH BLVD.										
SAN DIEGO, CA 92131	33-0695093	501(C)(3)	15,000.	0.			AFTER SCHOOL PROGRAMS			
·			,							
UNIVERSITY OF FLORIDA FOUNDATION										
P.O. BOX 14425										
GAINESVILLE, FL 32604	59-0974739	501(C)(3)	15,000.	0.			COLLEGE/UNIVERSITY			
UNIVERSITY OF MASSACHUSETTS										
MEMORIAL FOUNDATION - 333 SOUTH										
STREET, 4TH FLOOR - SHREWSBURY, MA										
01545	04-3108190	501(C)(3)	15,000.	0.			COLLEGE/UNIVERSITY			
NUMBERANG AGGOGIAMION OF NORMA										
VETERANS ASSOCIATION OF NORTH										
COUNTY - P. O. BOX 3046 -	20-5862344	E01/Q\/3\	15 000	0.			EGONOMIC DEVELOPMENT			
OCEANSIDE, CA 92051	20-3862344	501(C)(3)	15,000.	0.			ECONOMIC DEVELOPMENT			
VONS										
262 N. EL CAMINO REAL										
ENCINITAS, CA 92024			14,268.	0.			DISASTER RELIEF			
,			,							
CALIFORNIA STATE UNIVERSITY - SAN										
MARCOS - 333 S. TWIN OAKS VALLEY										
ROAD - SAN MARCOS, CA 92096	80-0390564	501(C)(3)	13,882.	0.			COLLEGE/UNIVERSITY			
VOICES FOR CHILDREN										
2851 MEADOW LARK DRIVE										
SAN DIEGO, CA 92123	95-3786047	501(C)(3)	13,500.	0.			LEGAL			
IIIV ADM INCMIME										
LUX ART INSTITUTE										
1550 SOUTH EL CAMINO REAL	33-0802336	501(C)(3)	13 000	0.			VISUAL ARTS			
ENCINITAS, CA 92024	33-0002336	501(C)(3)	13,000.	0.			AISOUR WKIS			
TERI, INC.										
251 AIRPORT ROAD										
OCEANSIDE, CA 92058	95-3532129	501(C)(3)	13,000.	0.			INCLUSION			

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDS' TURN SAN DIEGO 4909 MURPHY CANYON ROAD SAN DIEGO, CA 92127	33-0724932	501(C)(3)	12,500.	0.			YOUTH DEVELOPMENT
OMO CHILD FOUNDATION P.O. BOX 231697 ENCINITAS, CA 92023	27-5098874	501(C)(3)	12,000.	0.			BASIC NEEDS
CAMP PENDLETON ARMED SERVICES YMCA BOX 555028, BLDG. 16144 CAMP PENDLETON, CA 92055	36-3274346	501(C)(3)	11,500.	0.			YOUTH DEVELOPMENT
VETERANS VILLAGE OF SAN DIEGO 4141 PACIFIC HIGHWAY SAN DIEGO, CA 92110	95-3649525	501(C)(3)	11,450.	0.			HOUSING/SHELTER
FRIENDS OF THE CARDIFF-BY-THE-SEA LIBRARY - P.O. BOX 657 - CARDIFF BY THE SEA, CA 92007	33-0311593	501(C)(3)	11,447.	0.			LIBRARIES
CAMPANILE FOUNDATION 5500 CAMPANILE DRIVE SAN DIEGO, CA 92182	33-0868418	501(C)(3)	11,000.	0.			COLLEGE/UNIVERSITY
SAN DIEGO FOOD BANK 9850 DISTRIBUTION AVENUE SAN DIEGO, CA 92121	20-4374795	501(C)(3)	11,000.	0.			FOOD
URBAN LIFE MINISTRIES, INC. 5202 ORANGE AVENUE SAN DIEGO, CA 92115	27-2778158	501(C)(3)	11,000.	0.			YOUTH DEVELOPMENT
WORLD VISION P. O. BOX 9716, DEPT W FEDERAL WAY, WA 98063	95-1922279	501(C)(3)	11,000.	0.			BASIC NEEDS

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RANCHO SANTA FE HISTORICAL SOCIETY										
P.O. BOX 1										
RANCHO SANTA FE, CA 92067	33-0088236	501(C)(3)	10,785.	0.			HISTORIC PROJECTS			
INTERNATIONAL BIPOLAR FOUNDATION 8895 TOWNE CENTRE DRIVE										
SAN DIEGO, CA 92122	26-3889828	501(C)(3)	10,500.	0.			MENTAL HEALTH			
UNIVERSITY OF SAN DIEGO-SCHOOL OF LEADERSHIP & EDUCATION SCIENCES - 5998 ALCALA PARK STE 205 - SAN										
DIEGO, CA 92110	95-2544535	501(C)(3)	10,455.	0.			COLLEGE/UNIVERSITY			
BOY SCOUTS OF AMERICA, SAN DIEGO - IMPERIAL COUNCIL - 1207 UPAS STREET - SAN DIEGO, CA 92103	95-1643983	501(C)(3)	10,000.	0.			YOUTH DEVELOPMENT			
COMMUNITY RESOURCE CENTER 169 SAXONY ROAD, #104										
ENCINITAS, CA 92024	95-3497926	501(C)(3)	10,000.	0.			HOUSING/SHELTER			
DREAM WEAVERS 14325 HIGH PINE STREET POWAY, CA 92064	20-0296751	501(C)(3)	10,000.	0.			YOUTH DEVELOPMENT			
EDIFY 10590 W. OCEAN AIR DR., SUITE 300	27-0892545	501(C)(3)	10,000	0.			ECONOMIC DEVELOPMENT			
SAN DIEGO, CA 92130	27-0092345	501(0)(3)	10,000.	0.			ECONOMIC DEAFFORMENT.			
FRIENDS OF THE POOR 7660 FAY AVE., STE. H #362 LA JOLLA, CA 92037	95-3847842	501(C)(3)	10,000.	0.			HOUSING/SHELTER			
GLOBAL JOURNAL PROJECT 2270 CAMINO VIDA ROBLE, SUITE K CARLSBAD, CA 92011	46-0551793	501(C)(3)	10,000.	0.			EDUCATION			

Part II Continuation of Grants and Other	r Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MADISON FOUNDATION							
P.O. BOX 446							
MADISON, CT 06443	06-1450717	501(C)(3)	10,000.	0.			EDUCATION
NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVENUE							
BOSTON, MA 02115	04-1679980	501(C)(3)	10,000.	0.			COLLEGE/UNIVERSITY
PACIFIC INSTITUTE FOR COMMUNITY ORGANIZATIONS - 171 SANTA ROSA AVENUE - OAKLAND, CA 94610	94-2206497	501(C)(3)	10,000.	0.			COMMUNITY DEVELOPMENT
			, -				
OLD GLOBE THEATRE							
P. O. BOX 122171							
SAN DIEGO, CA 92112	95-1543396	501(C)(3)	9,250.	0.			THEATRE
JUST IN TIME FOR FOSTER YOUTH P. O. BOX 81292							
SAN DIEGO, CA 92138	20-5448416	501(C)(3)	8,500.	0.			YOUTH DEVELOPMENT
ELEMENTARY INSTITUTE OF SCIENCE 608 51ST STREET SAN DIEGO, CA 92114	94-1669545	501(C)(3)	8,000.	0.			SCIENCE/TECH/ENGINEERING/
FACE FOUNDATION 10455 SORRENTO VALLEY RD. #208							
SAN DIEGO, CA 92121	20-5333261	501(C)(3)	8,000.	0.			ANIMAL HEALTH
HELEN WOODWARD ANIMAL CENTER P.O. BOX 64 RANCHO SANTA FE, CA 92067	23-7228287	501(C)(3)	8,000.	0.			ANIMAL HEALTH
			1,230.				
KPBS 5200 CAMPANILE DRIVE SAN DIEGO, CA 92182	95-6042721	501(C)(3)	7 500.	0.			COLLEGE/UNIVERSITY
SAN DIEGO, CA 92182	95-6042721	501(C)(3)	7,500.	0.			COLLEGE/UNIVERSITY

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
LIBERTY INSTITUTE 2001 W. PLANO PARKWAY, #1600 PLANO, TX 75075	75-1403169	501(C)(3)	7,500.	0.			RELIGIOUS FREEDOM				
WREATHS ACROSS AMERICA P.O. BOX 249 COLUMBIA FALLS, ME 04623	20-8362270	501(C)(3)	7,419.	0.			MILITARY				
FIRST CHURCH OF CHRIST, SCIENTIST P.O. BOX 422 RANCHO SANTA FE, CA 92067	95-2322997	501(C)(3)	7,304.	0.			RELIGIOUS STUDIES				
UNIVERSITY OF CALIFORNIA @ BERKELEY - 201 SPROUL HALL, #1960 - BERKELEY, CA 94720	94-6002123	501(C)(3)	7,300.	0.			COLLEGE/UNIVERSITY				
AMERICAN ACADEMY OF PEDIATRICS CALIFORNIA CHAPTER 3 - P.O. BOX 22212 - SAN DIEGO, CA 92192	33-0782521	501(C)(3)	7,000.	0.			MEDICAL CARE				
YOUNG LIFE - INNER CITY SAN DIEGO 4193 UNIVERSITY AVENUE, #5906 SAN DIEGO, CA 92105	84-0385934	501(C)(3)	7,000.	0.			AFTER SCHOOL PROGRAMS				
RESPONSIBILITY P.O. BOX 433199 SAN YSIDRO, CA 92143	33-0437290	501(C)(3)	6,400.	0.			ECONOMIC DEVELOPMENT				
MUSCULAR DYSTROPHY ASSOCIATION 4800 SW MACADAM AVE. #205 PORTLAND, OR 97239	13-1665552	501(C)(3)	6,180.	0.			RESEARCH				
MIRACLE BABIES 8745 AERO DRIVE, SUITE 111 SAN DIEGO, CA 92123	71-1001702	501(C)(3)	6,000.	0.			MEDICAL CARE				

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	urt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESBYTERIAN CHURCH OF THE BIG							
WOOD - P. O. BOX 660 - KETCHUM, ID							
83340	82-0374595	501(C)(3)	6,000.	0.			WORSHIP
SAN DIEGO FIRE RESCUE FOUNDATION							
P.O. BOX 235837	20 2461105	E01/G)/3)	6 000	0			
ENCINITAS, CA 92023	20-3461105	501(C)(3)	6,000.	0.			DISASTER RELIEF
ASIAN ACCESS							
P.O. BOX 3307							
CERRITOS, CA 90703	95-6120630	501(C)(3)	5,645.	0.			TRAINING/STUDY
			,				
ABILITIES UNITED							
525 E. CHARLESTON RD.							
PALO ALTO, CA 94306	94-1546643	501(C)(3)	5,000.	0.			INCLUSION
BOYS & GIRLS CLUBS OF SAN DIEGUITO							
533 LOMAS SANTA FE DRIVE							
SOLANA BEACH, CA 92075	95-2470435	501(C)(3)	5,000.	0.			AFTER SCHOOL PROGRAMS
CHOC CHILDRENS FOUNDATION							
1201 WEST LA VETA AVENUE							
ORANGE, CA 92868	95-6097416	501(C)(3)	5,000.	0.			HOSPITALS
			-,				
COASTAL COMMUNITY FOUNDATION							
P.O. BOX 230415							
ENCINITAS, CA 92023	33-0216692	501(C)(3)	5,000.	0.			PHILANTHROPY
FRATERNITY HOUSE, INC.							
20702 ELFIN FOREST ROAD							
ESCONDIDO, CA 92029	33-0306861	501(C)(3)	5,000.	0.			HOUSING/SHELTER
HORSES OF TIR NA NOG							
P.O. BOX 19131	00 262462:	501/61/21		_			
SAN DIEGO, CA 92159	20-3681634	501(C)(3)	5,000.	0.			ANIMAL HEALTH

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERFAITH SHELTER NETWORK OF SAN DIEGO COUNTY - 3530 CAMINO DEL RIO N. #301 - SAN DIEGO, CA 92108	95-2630300	501(C)(3)	5,000.	0.			HOUSING/SHELTER
KAPLAN COLLEGE - SAN DIEGO 9055 BALBOA AVENUE SAN DIEGO, CA 92123			5,000.	0.			COMMUNITY COLLEGE
LOYOLA MARYMOUNT UNIVERSITY 1 LMU DRIVE, SUITE 1880 LOS ANGELES, CA 90045	95-1643334	501(C)(3)	5,000.	0.			COLLEGE/UNIVERSITY
NAVY SEAL FOUNDATION 1619 D STREET, BLDG. 5326 VIRGINIA BEACH, VA 23459	31-1728910	501(C)(3)	5,000.	0.			MILITARY
NEW YORK FOUNDATION FOR THE ARTS 20 JAY STREET, 7TH FLOOR BROOKLYN, NY 11201	23-7129564	501(C)(3)	5,000.	0.			VISUAL ARTS
NORTH COAST PRESBYTERIAN CHURCH 1831 S. EL CAMINO REAL ENCINITAS, CA 92024	58-1638487	501(C)(3)	5,000.	0.			WORSHIP
R4 ALLIANCE P.O. BOX 836 VIENNA, VA 22183	46-1777306	501(C)(3)	5,000.	0.			INCLUSION
RANCHO COASTAL HUMANE SOCIETY 389 REQUEZA STREET ENCINITAS, CA 92024	95-2151583	501(C)(3)	5,000.	0.			ANIMAL HEALTH
TIJUANA CHRISTIAN MISSION P.O. BOX 437930 SAN YSIDRO, CA 92143	51-0191579	501(C)(3)	5,000.	0.			BASIC NEEDS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NIVERSITY OF CALIFORNIA @ IRVINE 02 ALDRICH HALL										
RVINE, CA 92697	95-2226406	501(C)(3)	5,000.	0.			COLLEGE/UNIVERSITY			
UNIVERSITY OF CALIFORNIA @ SAN DIEGO - 9500 GILMAN DRIVE, DEPT D026 - LA JOLLA, CA 92093	95-6006144	501/C)/3)	5,000.	0.			COLLEGE/UNIVERSITY			
020 - LA OULLA, CA 92093	95-0000144	501(C)(3)	3,000.	0.			COLLEGE/ UNIVERSITY			
VOICE OF SAN DIEGO		E01/G)/2	5 222	_						
SAN DIEGO, CA 92106	20-1585919	501(C)(3)	5,000.	0.			PUBLIC POLICY			

Part III can be duplicated if additional space is needed.	(la) Niconala au ad	(a) Amount of	(al) A many and a financial	(-) Made and of colorations	(6) Description of the control of th						
(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 non-cash assistance						
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2, Part III, column	(b), and any other a	dditional information.							
PART I, LINE 2:											
ALL GRANTS ISSUED ARE ACCOMPANIED	WITH A L	ETTER THAT	GRANTEES	ARE ASKED TO							
SIGN AND RETURN, ACKNOWLEDGING (AM	ONG OTHE	R THINGS)	THAT THEY	WILL NOT USE							
THE FUNDS FOR ANY PURPOSE OTHER TH	AN THE S	PECIFIC PU	JRPOSE(S) D	ESCRIBED IN							
THE LETTER. ALL GRANTS ISSUED FROM THE ORGANIZATION'S DISCRETIONARY FUNDS											
HAVE A FURTHER REQUIREMENT FOR THE	GRANTEE	TO PROVID	E A WRITTE	N REPORT BACK							
TO THE ORGANIZATION DESCRIBING HOW	THE AWA	RDED FUNDS	WERE USED	AND THE							
IMPACT THEY HAD ON THE GRANTEES FU	NDED PRO	JECT(S).									

Part IV Supplemental Information
WHILE GRANTS FROM DONOR ADVISED FUNDS ARE ISSUED TO ANY 501(C)(3)
CHARITABLE ORGANIZATION IN THE UNITED STATES, GRANTS FROM THE FOUNDATION'S
DISCRETIONARY FUNDS ARE LIMITED TO ORGANIZATIONS LOCATED IN SAN DIEGO
COUNTY, CA.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection Employer identification number

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

Name of the organization

RANCHO SANTA FE FOUNDATION

95-3709639

Pai	T I Types of Property								
		(a)	(b)	(c)		(d)			
		Check if	Number of contributions or	Noncash confi amounts repo		Method of de		_	
		applicable	items contributed			noncash contribi	ution a	mount	S
1	Art - Works of art				····, ····- · g				
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	30	2,078	275.	FMV			
	Securities - Closely held stock		- 30	27070	72734	- 11 V			
10	Securities - Closely field stock Securities - Partnership, LLC, or								
11									
40	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	zation durin	g the tax year for c	contributions					
	for which the organization completed Form 828	83, Part IV,	Donee Acknowled	gement	29				
								Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	ported in Part I, liı	nes 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	d which is not req	uired to be	used for			
	exempt purposes for the entire holding period?	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any non-stand	lard contrib	utions?	31	Х	
32a	Does the organization hire or use third parties								
	contributions?						32a	X	
b	If "Yes," describe in Part II.								
33	If the organization did not report an amount in	column (c) t	for a type of prope	rty for which colu	ımn (a) is ch	ecked,			
	describe in Part II.	. ,		-	• •	•			
ΙНΔ	For Panerwork Reduction Act Notice see	the Instruc	tions for Form 00	n		Schedule M	(Eorm	990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32B:
THE FOUNDATION USES THE SERVICES OF UBS FINANCIAL SERVICES, INC. TO
ACCEPT GIFTS OF PUBLIC SECURITIES ON OUR BEHALF, TO SELL THOSE
SECURITIES AND FORWARD THE PROCEEDS FROM SUCH SALES TO OUR CHECKING
ACCOUNT AT UNION BANK.

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

► Attach to Form 990 or 990-EZ.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

RANCHO SANTA FE FOUNDATION

Employer identification number 95-3709639

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE RANCHO SANTA FE FOUNDATION SUPPORTS A WIDE VARIETY OF CAUSES EVERY YEAR THROUGH GRANTS MADE FROM ITS DONOR ADVISED FUNDS AND UNRESTRICTED ENDOWMENT FUNDS. GRANTS THAT ARE FUNDED FROM DONOR ADVISED FUNDS ARE BASED ON DONOR-ADVISOR RECOMMENDATIONS AND THOSE FROM UNRESTRICTED ENDOWMENT FUNDS ARE AT THE DISCRETION OF THE ORGANIZATION'S GRANTS AND PROJECTS COMMITTEE.. EXPENSES \$ 6,530,288. INCLUDING GRANTS OF \$ 6,388,704. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11:

ALL BOARD MEMBERS ARE PROVIDED WITH A COPY OF THE 990 VIA EMAIL AND MUST CONFIRM THAT THEY HAVE RECEIVED AND REVIEWED IT PRIOR TO IT'S FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT-OF-INTEREST AGREEMENT ON AN ANNUAL BASIS.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS SET BY THE EXECUTIVE COMMITTEE, BASED UPON THE ADVICE OF AND THE ANNUAL PERFORMANCE REVIEW CONDUCTED BY THE BOARD CHAIRMAN.

FORM 990, PART VI, SECTION C, LINE 19:

FINANCIAL STATEMENTS AND TAX RETURNS ARE POSTED ON THE ORGANIZATION'S

WEBSITE AS WELL AS THE GUIDESTAR WEBSITE. HARD COPIES OF THESE DOCUMENTS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization RANCHO SANTA FE FOUNDATION	Employer identification number 95-3709639
AS WELL AS MEETING MINUTES AND OTHER GOVERNING DOCUMENTS	ARE AVAILABLE TO
THE PUBLIC UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN ACTUARIAL VALUE OF SPLIT INTEREST AGREEMENTS	-95,124.
FORM 990, PART XII, LINE 2C:	
THERE HAS BEEN NO CHANGE TO THE WAY THAT THE AUDIT COMMIT	TEE OR BOARD
OF DIRECTORS OVERSEES THE AUDIT OF ITS FINANCIAL STATEMEN	ITS AND
SELECTION OF AN INDEPENDENT AUDITOR.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

►Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

(c)

Legal domicile (state or

foreign country)

(d)

Total income

(e)

End-of-year assets

OMB No. 1545-0047 **2014**

Open to Public Inspection

Name of the organization

(a)

Name, address, and EIN (if applicable)

of disregarded entity

Department of the Treasury Internal Revenue Service

RANCHO SANTA FE FOUNDATION

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

(b)

Primary activity

Employer identification number 95-3709639

(f)

Direct controlling

entity

	_						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations Complete if the organization	answered "Yes" on Form 990	, Part IV, line 34 b	ecause it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
RSFF CHARITABLE REAL ESTATE FUND -				501(c)(3))		Yes	No
32-0194805, P.O. BOX 811, RANCHO SANTA FE,	_						
CA 92067	REAL ESTATE	CALIFORNIA	501(C)(3)	509(A)(3)	N/A		Х
	_						

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.

Signification district as a partition in during the tax year.																			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)								
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under	nt income share of total income income			ortionate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managir partner	Percentage ownership					
		country)		sections 512-514)		455515	Yes	No	K-1 (Form 1065)	Yes N	٥								
	1																		
	1																		
	1																		
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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	(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	Sec 512(l conti ent	ction b)(13) rolled tity?
		country)		,				Yes	No
									<u> </u>
									
									<u> </u>

Page 3

Yes No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	y			1a		<u>X</u>			
b Gift, grant, or capital contribution to related organization(s)										
С	c Gift, grant, or capital contribution from related organization(s)									
	d Loans or loan guarantees to or for related organization(s)									
e Loans or loan guarantees by related organization(s)										
f	Dividends from related organization(s)				1f		X			
	Sale of assets to related organization(s)				1g		X			
	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			
- 1	Performance of services or membership or fundraising solicitations for related orga	anization(s)			11		X			
m	Performance of services or membership or fundraising solicitations by related orga	nization(s)			1m		X			
	Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	X				
0	Sharing of paid employees with related organization(s)				10	X				
р	Reimbursement paid to related organization(s) for expenses				1p		X			
q	Reimbursement paid by related organization(s) for expenses				1q	Х				
r	Other transfer of cash or property to related organization(s)				1r		X			
	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 w	vho must complete t	his line, including covered rel	ationships and transaction thresholds.						
	(a)	(b)	(c)	(d)						
	Name of related organization	Transaction	Amount involved	Method of determining amount inv	olved					
		type (a-s)								
(1)										
(2)										
(3)										
(4)										
<i>(</i> =;										
(5)										
(C)										
(6)		<u> 56</u>		0-1-4-1-) /F	- 000	0014			
13216	3 08-14-14	50		Schedule F	(Forr	n 990)	2∪14			

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

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

(a)	(b)	(c)	(d)	(e) Are a)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are a partners	ali S sec.	Share of	Share of	Disp	ropor-	Code V-UBI	General	Percentag
of entity		(state or foreign	related, unrelated, lexcluded from tax under	501(c) orgs)(3) .?	total	end-of-year	alloca	nate ations?	amount in box 20 Lof Schedule K-1	partner	ownershi
		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes	No	income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes N	5
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Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			$\mathbf{x} \rightarrow \mathbf{x}$		
	re filing for an Additional (Not Automatic) 3-Month Ex							
•	mplete Part II unless you have already been granted	-						
	c filing (e-file) . You can electronically file Form 8868 if y					corporation		
	o file Form 990-T), or an additional (not automatic) 3-mo							
•	file any of the forms listed in Part I or Part II with the ex-		•		=			
	Benefit Contracts, which must be sent to the IRS in page	•	,					
			(see instructions). For more details	on the elec	troffic filling of t	riis ioriii,		
Part I	irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3 Month Extension of Time		submit original (no conice no	odod)				
	Automatic 3-Month Extension of Time		<u> </u>					
•	tion required to file Form 990-T and requesting an autor			complete		. \Box		
Part I only						▶ ∟		
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques					
	I				er's identifying			
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	identification n	umber (EIN) or		
orint								
File by the	RANCHO SANTA FE FOUNDATION				95-3709	0639		
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SSN)		
iling your eturn. See	P.O. BOX 811							
nstructions.	City, town or post office, state, and ZIP code. For a fo	oreign add	lress, see instructions.					
	RANCHO SANTA FE, CA 92067							
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1		
			7					
Applicati	on	Return	Application			Return		
s For		Code	Is For			Code		
	or Form 990-EZ	01	Form 990-T (corporation)			07		
		02	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			08		
Form 990			Form 1041-A					
	0 (individual)	03	Form 4720 (other than individual)			09		
Form 990		04	Form 5227			10		
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990	-T (trust other than above)	06	Form 8870			12		
	CHRISTINA P. W.			CIT				
	ooks are in the care of P.O BOX 811 - I	RANCHO	O SANTA FE, CA 920	6 /				
-	one No. ► 858-756-6557		Fax No. 🕨					
If the c	organization does not have an office or place of busines	s in the Ur	nited States, check this box			▶ ∟		
If this is	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole grou	ıp, check this		
oox 🕨 [. If it is for part of the group, check this box 🕨 🗀	and atta	ch a list with the names and EINs o	f all memb	ers the extension	on is for.		
1 I re	quest an automatic 3-month (6 months for a corporation	required 1	to file Form 990-T) extension of time	until				
	AUGUST 17, 2015, to file the exemp	t organiza	tion return for the organization nam	ed above.	The extension			
is fo	or the organization's return for:							
▶[X calendar year 2014 or							
 	tax year beginning	. an	d endina					
			3		_			
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	n			
- "	Change in accounting period	ricon reas	on milianetum	i iliai ictai				
32 If +b	9.	or 6060	enter the tentative tax less on:					
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
nonrefundable credits. See instructions. 3a \$								
	is application is for Forms 990-PF, 990-T, 4720, or 6069				•	0		
	mated tax payments made. Include any prior year overp			3b	\$	0.		
	ance due. Subtract line 3b from line 3a. Include your pa					0		
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.		
Caution.	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 8879-E	O for payment		
notruotia	20							

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 423841

Form 8868 (Rev. 1-2014)