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Form **8879-TE**

# IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning OCT 1, 2021, and ending SEP 30, 2022

# 2021

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer

**CS FUND**

EIN or SSN

**95-3607882**

Name and title of officer or person subject to tax

**BAILEY MALONE  
EXECUTIVE DIRECTOR**

## Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

<b>1a</b> Form 990 check here .....	<input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> _____
<b>2a</b> Form 990-EZ check here ...	<input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here ▶	<input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here ...	<input checked="" type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part V, line 5) .....	<b>4b</b> <u>18,449.</u>
<b>5a</b> Form 8868 check here .....	<input type="checkbox"/>	<b>b Balance due</b> (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here .....	<input type="checkbox"/>	<b>b Total tax</b> (Form 990-T, Part III, line 4) .....	<b>6b</b> _____
<b>7a</b> Form 4720 check here .....	<input type="checkbox"/>	<b>b Total tax</b> (Form 4720, Part III, line 1) .....	<b>7b</b> _____
<b>8a</b> Form 5227 check here .....	<input type="checkbox"/>	<b>b FMV of assets at end of tax year</b> (Form 5227, Item D) .....	<b>8b</b> _____
<b>9a</b> Form 5330 check here .....	<input type="checkbox"/>	<b>b Tax due</b> (Form 5330, Part II, line 19) .....	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here ▶	<input type="checkbox"/>	<b>b Amount of credit payment requested</b> (Form 8038-CP, Part III, line 22) .....	<b>10b</b> _____

## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

### PIN: check one box only

I authorize **MFO E-FILING SERVICES CO.** to enter my PIN **48502**  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**38234048502**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶ **05/22/23**

**ERO Must Retain This Form - See Instructions**

**Do Not Submit This Form to the IRS Unless Requested To Do So**

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

Form **8879-TE** (2021)

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions.  <b>CS FUND</b>	Taxpayer identification number (TIN)  <b>95-3607882</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>245 KENTUCKY ST., E</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PETALUMA, CA 94952-2877</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

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

**BAILEY MALONE**

- The books are in the care of ▶ **245 KENTUCKY ST., STE E - PETALUMA, CA 94952-2877**

Telephone No. ▶ **(707) 874-2942** Fax No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **AUGUST 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year \_\_\_\_\_ or
- ▶  tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**.

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

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	29,805.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	29,805.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

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

**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

**2021**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year 2021 or tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**

Name of foundation <b>CS FUND</b>		<b>A Employer identification number</b> 95-3607882
Number and street (or P.O. box number if mail is not delivered to street address) <b>245 KENTUCKY ST.</b>	Room/suite <b>E</b>	<b>B Telephone number</b> (707) 874-2942
City or town, state or province, country, and ZIP or foreign postal code <b>PETALUMA, CA 94952-2877</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>6,733,721.</b>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other (specify) <b>MODIFIED CASH</b> (Part I, column (d), must be on cash basis.)	
<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>		

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....	3,400,000.		N/A	
	<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....	3,531.	3,531.		STATEMENT 1
	<b>4</b> Dividends and interest from securities .....	148,089.	148,089.		STATEMENT 2
	<b>5a</b> Gross rents .....				
	<b>b</b> Net rental income or (loss) .....				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....	1,311,610.			
	<b>b</b> Gross sales price for all assets on line 6a <b>3,126,728.</b>				
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		1,311,610.		
	<b>8</b> Net short-term capital gain .....				
	<b>9</b> Income modifications .....				
	<b>10a</b> Gross sales less returns and allowances .....				
<b>b</b> Less: Cost of goods sold .....					
<b>c</b> Gross profit or (loss) .....					
<b>11</b> Other income .....	383,601.	0.		STATEMENT 3	
<b>12 Total.</b> Add lines 1 through 11 .....	5,246,831.	1,463,230.			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	268,509.	8,866.		256,231.
	<b>14</b> Other employee salaries and wages .....	460,678.	0.		455,960.
	<b>15</b> Pension plans, employee benefits .....	113,473.	1,142.		112,331.
	<b>16a</b> Legal fees ..... <b>STMT 4</b>	3,762.	0.		3,762.
	<b>b</b> Accounting fees ..... <b>STMT 5</b>	19,875.	0.		19,875.
	<b>c</b> Other professional fees ..... <b>STMT 6</b>	171,482.	119,328.		51,191.
	<b>17</b> Interest .....				
	<b>18</b> Taxes ..... <b>STMT 7</b>	78,870.	3,780.		50,590.
	<b>19</b> Depreciation and depletion .....				
	<b>20</b> Occupancy .....	32,193.	0.		32,174.
	<b>21</b> Travel, conferences, and meetings .....	108,391.	0.		104,455.
	<b>22</b> Printing and publications .....	1,071.	0.		924.
	<b>23</b> Other expenses ..... <b>STMT 8</b>	104,825.	2,859.		104,301.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	1,363,129.	135,975.		1,191,794.
	<b>25</b> Contributions, gifts, grants paid .....	3,621,431.			2,092,800.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	4,984,560.	135,975.		3,284,594.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements ...	262,271.				
<b>b Net investment income</b> (if negative, enter -0-) .....		1,327,255.			
<b>c Adjusted net income</b> (if negative, enter -0-) .....			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	672,482.	525,927.	525,927.
	2 Savings and temporary cash investments	141,700.	308,127.	308,127.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	350.		
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 10 3,687,031.	2,460,516.	2,460,516.
	c Investments - corporate bonds	STMT 11 660,583.	576,414.	576,414.
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 12 3,358,244.	2,859,302.	2,859,302.	
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation				
15 Other assets (describe <b>SECURITY DEPOSITS</b> )	3,435.	3,435.	3,435.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	8,523,825.	6,733,721.	6,733,721.	
Liabilities	17 Accounts payable and accrued expenses	74,144.	54,614.	
	18 Grants payable	734,500.	1,458,631.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	808,644.	1,513,245.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	7,715,181.	5,220,476.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances	7,715,181.	5,220,476.		
30 Total liabilities and net assets/fund balances	8,523,825.	6,733,721.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	7,715,181.
2 Enter amount from Part I, line 27a	2	262,271.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	7,977,452.
5 Decreases not included in line 2 (itemize) SEE STATEMENT 9	5	2,756,976.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	5,220,476.

**Part IV Capital Gains and Losses for Tax on Investment Income** SEE ATTACHED STATEMENTS

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			
<b>3,126,728.</b>		<b>1,815,118.</b>	<b>1,311,610.</b>

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			
			<b>1,311,610.</b>

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ..... }	2	<b>1,311,610.</b>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 .....		3	<b>N/A</b>

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	<b>18,449.</b>
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	2	<b>0.</b>
3 Add lines 1 and 2 .....	3	<b>18,449.</b>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	4	<b>0.</b>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....	5	<b>18,449.</b>
6 Credits/Payments:		
a 2021 estimated tax payments and 2020 overpayment credited to 2021 .....	6a	<b>29,805.</b>
b Exempt foreign organizations - tax withheld at source .....	6b	<b>0.</b>
c Tax paid with application for extension of time to file (Form 8868) .....	6c	<b>0.</b>
d Backup withholding erroneously withheld .....	6d	<b>0.</b>
7 Total credits and payments. Add lines 6a through 6d .....	7	<b>29,805.</b>
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached .....	8	<b>0.</b>
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed .....	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....	10	<b>11,356.</b>
11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> <b>11,356.</b>   Refunded <input type="checkbox"/>	11	<b>0.</b>

**Part VI-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year? .....		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
b If "Yes," has it filed a tax return on Form 990-T for this year? .....		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .....	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....	X	
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address ▶ WWW.CSFUND.ORG		
14 The books are in care of ▶ BAILEY MALONE Telephone no. ▶ (707) 874-2942 Located at ▶ 245 KENTUCKY ST., STE E, PETALUMA, CA ZIP+4 ▶ 94952-2877		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ..... and enter the amount of tax-exempt interest received or accrued during the year .....		N/A
16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		

**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....		
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(5)	X
	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021? .....	2a	X
If "Yes," list the years ▶ _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.) .....	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? .....	4b	X

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**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	X	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <b>SEE STATEMENT 16</b>	X	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <b>N/A</b>		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 15		268,509.	5,700.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MELANIE ADCOCK - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM DIRECTOR 32.00	121,498.	4,299.	0.
RAMONA ALLEN - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	FINANCE AND ADMINISTRATION 40.00	106,386.	2,660.	0.
ROSE COHEN - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	GRANT ADMINISTRATOR 32.00	87,866.	841.	0.
AMANDA SOLTER - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM OFFICER 40.00	84,694.	2,117.	0.
SAMIR DOSHI - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM DIRECTOR 40.00	76,725.	619.	0.
<b>Total</b> number of other employees paid over \$50,000				0

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
45 NORTH PARTNERS PO BOX 965, BOZEMAN, MT 59715-7761	INVESTMENT CONSULTING	115,793.

Total number of others receiving over \$50,000 for professional services ..... 0

**Part VIII-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

**Part VIII-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ..... 0.

**Part IX Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	6,326,138.
b	Average of monthly cash balances .....	1b	1,431,092.
c	Fair market value of all other assets (see instructions) .....	1c	1,026,491.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	8,783,721.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	8,783,721.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	131,756.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	8,651,965.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	432,598.

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

1	Minimum investment return from Part IX, line 6 .....	1	432,598.
2a	Tax on investment income for 2021 from Part V, line 5 .....	2a	18,449.
b	Income tax for 2021. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	18,449.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	414,149.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	414,149.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	414,149.

**Part XI Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	3,284,594.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	500,000.
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	3,784,594.

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**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
<b>1</b> Distributable amount for 2021 from Part X, line 7				414,149.
<b>2</b> Undistributed income, if any, as of the end of 2021:				
<b>a</b> Enter amount for 2020 only			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2021:				
<b>a</b> From 2016				
<b>b</b> From 2017				
<b>c</b> From 2018				
<b>d</b> From 2019				
<b>e</b> From 2020	35,030.			
<b>f</b> Total of lines 3a through e	35,030.			
<b>4</b> Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ 3,784,594.				
<b>a</b> Applied to 2020, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2021 distributable amount				414,149.
<b>e</b> Remaining amount distributed out of corpus	3,370,445.			
<b>5</b> Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,405,475.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	3,400,000.			
<b>8</b> Excess distributions carryover from 2016 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	5,475.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2017				
<b>b</b> Excess from 2018				
<b>c</b> Excess from 2019				
<b>d</b> Excess from 2020				
<b>e</b> Excess from 2021	5,475.			

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2021, (b) 2020, (c) 2019, (d) 2018, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

MARYANNE MOTT

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

BAILEY MALONE, 707-874-2942
245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877

b The form in which applications should be submitted and information and materials they should include:

SEE STATEMENT 18

c Any submission deadlines:

SEE STATEMENT 18

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE STATEMENT 18

**Part XIV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ACT BLUE 714 G STREET SE SUITE 202 WASHINGTON, DC 20003	NONE	PC	FREESTONE FUND - GRANT	1,500.
AMERICAN ECONOMIC LIBERTIES PROJECT 2001 PENNSYLVANIA AVE NW SUITE 540 WASHINGTON, DC 20006	NONE	PC	RETHINK TRADE	100,000.
CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY NEW YORK, NY 10012	NONE	PC	GENERAL SUPPORT	115,000.
CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW 1101 15TH ST NW, 11TH FLOOR WASHINGTON, DC 20005	NONE	PC	GEOENGINEERING: EQUIPPING A GLOBAL MOVEMENT TO CONFRONT A RISING GLOBAL THREAT	60,000.
CENTER FOR THE STUDY OF THE AMERICAS 2156 JEFFERSON AVE. #405 BERKELEY, CA 94703	NONE	PC	ESTABLISHING A PERMANENT OFFICE	46,350.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>2,897,300.</b>
<b>b Approved for future payment</b>				
CERES TRUST 150 SOUTH WACKER DR. STE. 2400 CHICAGO, IL 60606	NONE	PC	POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS	20,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	PROGRAM SUPPORT	45,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	GENERAL SUPPORT	30,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>1,138,600.</b>

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on investments, Dividends, Rental income, Gain from sales, and Subtotal.

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No. and description. Row 11A describes the relationship with the Warsh-Mott Legacy Foundation regarding shared facilities, personnel, and reimbursement.

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A' in column (c).

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?
b If "Yes," complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A' in column (a).

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee: JENNIFER C. HEATWOLE, Title: EXECUTIVE DIRECTOR.

Paid Preparer Use Only: Print/Type preparer's name: JENNIFER C. HEATWOLE, Preparer's signature: JENNIFER C. HEATW, Date: 05/22/23, Check self-employed: [ ], PTIN: P01331602, Firm's name: MFO E-FILING SERVICES CO., Firm's EIN: 20-1597091, Firm's address: 111 E COURT ST #3D FLINT, MI 48502-1649, Phone no.: (810) 767-0136.



CS FUND

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 94910 SHS VANGUARD FEDERAL MONEY MARKET FUND	P	09/08/16	08/17/22
b 10960.636 SHS BLACKROCK TOTAL RETURN FUND	P	12/04/19	05/16/22
c 12534.96 SHS BLACKROCK LOW DURATION BD	P	05/16/22	07/21/22
d 2200 SHS BLACKSTONE INC	D	04/06/20	01/03/22
e 1010 SHS EXPEDIA INC	D	05/21/20	01/03/22
f 1050 SHS LOWE'S COMPANIES INC	D	01/11/19	01/03/22
g 1800 SHS NIKE INC	D	03/09/20	01/03/22
h 700 SHS NIKE INC	D	03/24/20	01/03/22
i 1350 SHS NORFOLK SOUTHERN CORP	D	04/13/20	01/03/22
j 2225 SHS QUALCOMM INC	D	01/10/20	01/03/22
k 1700 SHS WYNDHAM HOTELS & RESORTS INC	D	05/21/20	01/03/22
l 2240.143 SHS VANGUARD FTSE SOCIAL INDEX FUND	P	10/22/18	10/25/21
m 1083.206 SHS VANGUARD REIT INDEX	P	01/05/21	09/20/22
n 1533.272 SHS VANGUARD EMERGING MKTS STOCK INDEX	P	03/17/21	09/20/22
o 1231.401 SHS VANGUARD SMALL CAP INDEX	P	01/10/20	08/17/22

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 94,910.		94,910.	0.
b 115,196.		130,651.	-15,455.
c 113,943.		115,196.	-1,253.
d 280,368.		96,989.	183,379.
e 187,298.		78,896.	108,402.
f 268,055.		101,918.	166,137.
g 295,386.		152,895.	142,491.
h 114,872.		49,422.	65,450.
i 393,194.		209,070.	184,124.
j 410,157.		201,259.	208,898.
k 152,165.		79,458.	72,707.
l 100,000.		56,459.	43,541.
m 135,000.		124,657.	10,343.
n 50,000.		67,433.	-17,433.
o 120,000.		97,712.	22,288.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			0.
b			-15,455.
c			-1,253.
d			183,379.
e			108,402.
f			166,137.
g			142,491.
h			65,450.
i			184,124.
j			208,898.
k			72,707.
l			43,541.
m			10,343.
n			-17,433.
o			22,288.

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3

CS FUND

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 7784 SHS DRAPER FISHER JURVETSON GROWTH FUND LP	P	12/31/11	10/01/21
b MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P	01/01/21	12/31/21
c MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P	12/30/20	12/31/21
d MFO TOWLE FUND (JOINT VENTURE)	P	01/01/21	12/31/21
e MFO TOWLE FUND (JOINT VENTURE)	P	12/30/20	12/31/21
f MFO WESTFIELD FUND A (JOINT VENTURE)	P	01/01/21	12/31/21
g MFO WESTFIELD FUND A (JOINT VENTURE)	P	12/30/20	12/31/21
h DRAPER FISHER JURVETSON GROWTH FUND	P	01/01/21	12/31/21
i DRAPER FISHER JURVETSON GROWTH FUND	P	12/30/20	12/31/21
j CAPITAL GAINS DIVIDENDS			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 9,845.		1,394.	8,451.
b 19,424.		18,953.	471.
c 54,608.		30,848.	23,760.
d 18,529.		16,810.	1,719.
e 79,425.		41,472.	37,953.
f 15,335.		17,082.	-1,747.
g 69,333.		31,634.	37,699.
h 1.			1.
i 69.			69.
j 29,615.			29,615.
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			8,451.
b			471.
c			23,760.
d			1,719.
e			37,953.
f			-1,747.
g			37,699.
h			1.
i			69.
j			29,615.
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2	1,311,610.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3	N/A

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CERES TRUST 150 SOUTH WACKER DR. STE. 2400 CHICAGO, IL 60606	NONE	PC	POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS	20,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	PROGRAM SUPPORT	45,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	GENERAL SUPPORT	30,000.
EQUITABLE FOOD INITIATIVE 200 MASSACHUSETTS AVE NW, SUITE 700 WASHINGTON, DC 20001	NONE	PC	FARMWORKER AGTECH AND INNOVATION CENTER	50,000.
FRIENDS OF ACTION GROUP ON EROSION, TECHNOLOGY AND CONCENTRATION, INC. 441 AVON ST. OAKLAND, CA 94618	NONE	PC	GENERAL SUPPORT	150,000.
FRIENDS OF THE EARTH 2150 ALLSTON WAY, SUITE 360 BERKELEY, CA 94704	NONE	PC	EMERGING TECHNOLOGIES CAMPAIGN	60,000.
FUND FOR CONSTITUTIONAL GOVERNMENT 122 MARYLAND AVE, NE WASHINGTON, DC 20002	NONE	PC	GENERAL SUPPORT	45,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	A PARTNERSHIP TO BUILD AND STRENGTHEN TERRITORIAL MARKETS	100,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	HUMANITARIAN ASSISTANCE FOR MAASAI PASTORALISTS	30,600.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	GENERAL SUPPORT	31,500.
<b>Total from continuation sheets</b>				<b>2,574,450.</b>

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	NORTHERN COOPERATIVE DEVELOPMENT BANK	78,750.
GREATER GALLATIN UNITED WAY 945 TECHNOLOGY BOULEVARD BOZEMAN, MT 59718	NONE	PC	FREESTONE FUND - GRANT	1,500.
HUI HO'OLEIMALUO 2306 KALANI'ANA'OE STREET HILO, HI 96720	NONE	PC	FREESTONE FUND - GRANT	1,500.
INDEPENDENT ARTS & MEDIA PO BOX 420442 SAN FRANCISCO, CA 94142	NONE	PC	FREESTONE FUND - GRANT	1,000.
INSTITUTE FOR FOOD AND DEVELOPMENT POLICY, INC. 398 60TH STREET OAKLAND, CA 94618	NONE	PC	AGROECOLOGICAL CAPACITY BUILDING FOR AFRICA	49,500.
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW 1126 16TH STREET NW, SUITE 400 WASHINGTON, DC 20036	NONE	PC	PROTECTING PROTEST - US PROGRAM	50,000.
KUAMO'O FOUNDATION 66 - 1756 PUWALU STREET WAIKOLOA, HI 96738	NONE	PC	FREESTONE FUND - GRANT	1,500.
MANY MOTHERS PO BOX 23222 SANTA FE, NM 87502	NONE	PC	FREESTONE FUND - GRANT	1,500.
MARIN COMMUNITY FOUNDATION 5 HAMILTON LANDING, STE 200 NOVATO, CA 94949	NONE	DONOR ADVISED FUND	DONOR ADVISED FUND	979,500.
MCDOWELL PTA 421 S. MCDOWELL BLVD. PETALUMA, CA 94954	NONE	PC	FREESTONE FUND - GRANT	1,000.
<b>Total from continuation sheets</b> .....				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NATIVE AMERICAN FOOD SOVEREIGNTY ALLIANCE PO BOX 675 FLAGSTAFF, AZ 86002	NONE	PC	REMATRIATION OF INDIGENOUS SEEDS: BUILDING REGIONAL SEED HUBS	35,000.
NEO PHILANTHROPY 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL SUPPORT	50,000.
NEW MEXICO COMMUNITY CAPITAL 301 GOLD AVE. SW, SUITE 102 ALBUQUERQUE, NM 87102	NONE	PC	FREESTONE FUND - GRANT	1,500.
NORTH BAY ORGANIZING PROJECT P.O. BOX 503 GRATON, CA 95444	NONE	PC	FREESTONE FUND - GRANT	2,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	100,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT AND MATCHING GRANT	20,000.
PEOPLE'S PARITY PROJECT 141 4TH ST E APT 521 ST. PAUL, MN 55101	NONE	PC	GENERAL SUPPORT	45,000.
PESTICIDE ACTION NETWORK NORTH AMERICA REGIONAL CENTER 2029 UNIVERSITY AVE. STE 200 BERKELEY, CA 94704	NONE	PC	CHANGING POLICY AND PRACTICE TO PROTECT POLLINATORS	25,000.
PHYSICIANS FOR SOCIAL RESPONSIBILITY - LOS ANGELES 1413 OCEAN AVENUE SANTA MONICA, CA 90403	NONE	PC	CHALLENGING THE FALSE SOLUTION OF CARBON CAPTURE, SHIFTING THE NARRATIVE IN CALIFORNIA	50,000.
PIE RANCH PO BOX 363 PESCADERO, CA 94060	NONE	PC	GENERAL SUPPORT	30,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
POOR MAGAZINE PO BOX 5474 OAKLAND, CA 94605	NONE	PC	FREESTONE FUND - GRANT	1,000.
PRAXIS PROJECT, THE PO BOX 7259 OAKLAND, CA 94601	NONE	PC	GENERAL SUPPORT	43,600.
PROJECT ON GOVERNMENT OVERSIGHT INC. 1100 G ST NW, STE 500 WASHINGTON, DC 20005	NONE	PC	GENERAL SUPPORT	50,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	JUDICIAL INDEPENDENCE PROGRAM	30,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	GRANTEE SAFETY AND SECURITY FUND	45,000.
PUBLIC CITIZEN FOUNDATION, INC. 215 PENNSYLVANIA AVE., SE WASHINGTON, DC 20003	NONE	PC	PUBLIC CITIZEN GLOBAL TRADE WATCH	115,000.
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS RD., STE 201 CALABASAS, CA 91302	NONE	PC	CENTRAL VALLEY AGROECOLOGY	38,500.
SOLIDAIRE NETWORK 1423 BROADWAY #314 OAKLAND, CA 94612	NONE	PC	GENERAL SUPPORT	100,000.
TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129	NONE	PC	NATIONAL BAIL FUND NETWORK	40,000.
WHISTLEBLOWER AID 1250 CONNECTICUT AVE NW, #700 WASHINGTON, DC 20036	NONE	PC	GENERAL SUPPORT	25,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FUND FOR CONSTITUTIONAL GOVERNMENT 122 MARYLAND AVE, NE WASHINGTON, DC 20002	NONE	PC	GENERAL SUPPORT	45,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	GENERAL SUPPORT	31,500.
NATIVE AMERICAN FOOD SOVEREIGNTY ALLIANCE PO BOX 675 FLAGSTAFF, AZ 86002	NONE	PC	REMATRIATION OF INDIGENOUS SEEDS: BUILDING REGIONAL SEED HUBS	35,000.
NEO PHILANTHROPY 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL SUPPORT	50,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	200,000.
PEOPLE'S PARITY PROJECT 141 4TH ST E APT 521 ST. PAUL, MN 55101	NONE	PC	GENERAL SUPPORT	90,000.
PESTICIDE ACTION NETWORK NORTH AMERICA REGIONAL CENTER 2029 UNIVERSITY AVE. STE 200 BERKELEY, CA 94704	NONE	PC	CHANGING POLICY AND PRACTICE TO PROTECT POLLINATORS	25,000.
PRAXIS PROJECT, THE PO BOX 7259 OAKLAND, CA 94601	NONE	PC	GENERAL SUPPORT	43,600.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	JUDICIAL INDEPENDENCE PROGRAM	30,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	GRANTEE SAFETY AND SECURITY FUND	45,000.
<b>Total from continuation sheets</b>				<b>1,043,600.</b>

**Part XIV** Supplementary Information

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient <small>Name and address (home or business)</small>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY 1995 UNIVERSITY AVENUE BERKELEY, CA 94704	NONE	PC	AGTECH POLICY	30,000.
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS RD., STE 201 CALABASAS, CA 91302	NONE	PC	CENTRAL VALLEY AGROECOLOGY	38,500.
SOLIDAIRE NETWORK 1423 BROADWAY #314 OAKLAND, CA 94612	NONE	PC	GENERAL SUPPORT	300,000.
TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129	NONE	PC	NATIONAL BAIL FUND NETWORK	80,000.
<b>Total from continuation sheets</b> .....				



**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

CS FUND

Employer identification number

95-3607882

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>294,591.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>182,997.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>266,548.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>418,188.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>395,665.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>411,869.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>151,215.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>278,927.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**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
2	2200 SHS BLACKSTONE INC. _____ _____ _____	\$ <u>294,591.</u>	<u>12/29/21</u>
3	1010 SHS EXPEDIA GROUP, INC. _____ _____ _____	\$ <u>182,997.</u>	<u>12/29/21</u>
4	1050 SHS LOWE'S COMPANIES, INC. _____ _____ _____	\$ <u>266,548.</u>	<u>12/29/21</u>
5	2500 SHS NIKE, INC. _____ _____ _____	\$ <u>418,188.</u>	<u>12/29/21</u>
6	1350 SHS NORFOLK SOUTHERN CORPORATION _____ _____ _____	\$ <u>395,665.</u>	<u>12/29/21</u>
7	2225 SHS QUALCOMM INCORPORATED _____ _____ _____	\$ <u>411,869.</u>	<u>12/29/21</u>

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**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
8	1700 SHS WYNDHAM HOTELS & RESORTS, INC. _____ _____ _____	\$ 151,215.	12/29/21
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**Part III** 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 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.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

# Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-PF**

**2021**

▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name <b>CS FUND</b>	Employer identification number <b>95-3607882</b>
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**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

1 Total tax (see instructions) .....		<b>1</b>	<b>18,449.</b>
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	<b>2a</b>		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	<b>2b</b>		
c Credit for federal tax paid on fuels (see instructions) .....	<b>2c</b>		
d Total. Add lines 2a through 2c .....		<b>2d</b>	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....		<b>3</b>	<b>18,449.</b>
4 Enter the tax shown on the corporation's 2020 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....		<b>4</b>	<b>3,413.</b>
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		<b>5</b>	<b>3,413.</b>

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6  The corporation is using the adjusted seasonal installment method.
- 7  The corporation is using the annualized income installment method.
- 8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)	
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	<b>9</b>	02/15/22	03/15/22	06/15/22	09/15/22
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	<b>10</b>	853.	854.	853.	853.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	<b>11</b>	5,305.	2,500.	22,000.	
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column .....	<b>12</b>		4,452.	6,098.	27,245.
13 Add lines 11 and 12 .....	<b>13</b>		6,952.	28,098.	27,245.
14 Add amounts on lines 16 and 17 of the preceding column .....	<b>14</b>				
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	<b>15</b>	5,305.	6,952.	28,098.	27,245.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	<b>16</b>		0.	0.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	<b>17</b>				
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	<b>18</b>	4,452.	6,098.	27,245.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.)</b> See instructions .....	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2021 and before 7/1/2021 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2021 and before 10/1/2021 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2021 and before 1/1/2022 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2021 and before 4/1/2022 .....	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2022 and before 7/1/2022 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2022 and before 3/16/2023 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b> \$			0.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

Table with 5 columns: (a) First 3 months, (b) First 5 months, (c) First 8 months, (d) First 11 months. Rows include taxable income for various periods (1a-1c, 3a-3c), calculations for percentages (4-6), and final tax calculations (7-19).

**Part II** <sup>\*\*</sup> **Annualized Income Installment Method**

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20	Annualization periods (see instructions) .....				
21	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items .....	46,917.	261,551.	1,398,772.	1,411,937.
22	Annualization amounts (see instructions) .....	6.000000	4.000000	2.000000	1.333330
23a	Annualized taxable income. Multiply line 21 by line 22 ...	281,502.	1,046,204.	2,797,544.	1,882,578.
23b	b Extraordinary items (see instructions) .....				
23c	c Add lines 23a and 23b .....	281,502.	1,046,204.	2,797,544.	1,882,578.
24	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return .....	3,913.	14,542.	38,886.	26,168.
25	Enter any alternative minimum tax (trusts only) for each payment period (see instructions) .....				
26	Enter any other taxes for each payment period. See instr. ....				
27	Total tax. Add lines 24 through 26 .....	3,913.	14,542.	38,886.	26,168.
28	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions .....				
29	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0- .....	3,913.	14,542.	38,886.	26,168.
30	Applicable percentage .....	25%	50%	75%	100%
31	Multiply line 29 by line 30 .....	978.	7,271.	29,165.	26,168.

**Part III** **Required Installments**

		1st	2nd	3rd	4th
		installment	installment	installment	installment
<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column.					
32	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31 .....	978.	7,271.	29,165.	26,168.
33	Add the amounts in all preceding columns of line 38. See instructions .....		853.	1,707.	2,560.
34	<b>Adjusted seasonal or annualized income installments.</b> Subtract line 33 from line 32. If zero or less, enter -0- ...	978.	6,418.	27,458.	23,608.
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. <b>Note:</b> "Large corporations," see the instructions for line 10 for the amounts to enter .....	853.	854.	853.	853.
36	Subtract line 38 of the preceding column from line 37 of the preceding column .....				
37	Add lines 35 and 36 .....	853.	854.	853.	853.
38	<b>Required installments.</b> Enter the <b>smaller</b> of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions .....	853.	854.	853.	853.

Form 2220 (2021)

**\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION**

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BLACKROCK FED FUND INTEREST RECEIVED	3,307. 224.	3,307. 224.	
TOTAL TO PART I, LINE 3	3,531.	3,531.	

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
BLACKROCK FED FUND MFO ALTERNATE ASSET MUTUAL FUNDS MFO CORPORATE BOND MUTUAL FUNDS MFO D&D SMID CAP VALUE FUND JOINT VENTURE MFO FOREIGN EQUITY FUNDS MFO MONEY MARKET FUNDS DIVIDENDS MFO REAL ASSETS MUTUAL FUNDS MFO STOCK MUTUAL FUNDS MFO TOWLE FUND JOINT VENTURE MFO WESTFIELD FUND A JOINT VENTURE TOBIAS WHITE & CO NOMINEE	187. 67,825. 14,933. 2,619. 46,788. 360. 834. 31,318. 1,490. 1,462. 9,888.	187. 27,964. 1,249. 58. 0. 0. 0. 0. 157. 0. 0.	0. 39,861. 13,684. 2,561. 46,788. 360. 834. 31,318. 1,333. 1,462. 9,888.	0. 39,861. 13,684. 2,561. 46,788. 360. 834. 31,318. 1,333. 1,462. 9,888.	
TO PART I, LINE 4	177,704.	29,615.	148,089.	148,089.	

## FORM 990-PF

## OTHER INCOME

## STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GRANT ADMINISTRATION INCOME	383,601.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	383,601.	0.	

## FORM 990-PF

## LEGAL FEES

## STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	3,762.	0.		3,762.
TO FM 990-PF, PG 1, LN 16A	3,762.	0.		3,762.

## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	17,375.	0.		17,375.
ACCOUNTING MANAGEMENT FEE	2,500.	0.		2,500.
TO FORM 990-PF, PG 1, LN 16B	19,875.	0.		19,875.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEE	3,500.	3,500.		0.
PAYROLL SERVICES	876.	9.		867.
PENSION ADMINISTRATION	2,660.	26.		2,634.
IT SERVICES	15,953.	0.		14,990.
INVESTMENT CONSULTING	115,793.	115,793.		0.
GRANT ADMINISTRATION	32,700.	0.		32,700.
TO FORM 990-PF, PG 1, LN 16C	171,482.	119,328.		51,191.

## FORM 990-PF

## TAXES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROPERTY TAXES	122.	0.		122.
FOREIGN TAXES WITHHELD	3,393.	3,393.		0.
PAYROLL TAXES	50,847.	379.		50,468.
FEDERAL EXCISE TAX	24,500.	0.		0.
FOREIGN TAXES - MFO TOWLE FUND	2.	2.		0.
FOREIGN TAXES - MFO WESTFIELD FUND A	6.	6.		0.
TO FORM 990-PF, PG 1, LN 18	78,870.	3,780.		50,590.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRANTS ANALYSTS	40,833.	0.		40,833.
OFFICE SUPPLIES	9,451.	0.		10,819.
INSURANCE	4,319.	0.		4,319.
TELEPHONE & INTERNET	7,824.	0.		7,907.
POSTAGE & DELIVERY	451.	0.		381.
DUES & MEMBERSHIPS	37,135.	0.		38,089.
BANK & CREDIT CARD FEES	620.	0.		620.
STATE FILING FEES	190.	0.		190.
TRANSLATION SERVICES	1,143.	0.		1,143.
CROSSLINK VENTURES V LIQUIDATING FUND, L.P. K-1	74.	74.		0.
CROSSLINK VENTURES V, L.P. K-1	53.	53.		0.
DRAPER FISHER JURVETSON GROWTH 2006 L.P. K-1	38.	38.		0.
MFO D&D SMID CAP VALUE FUND JOINT VENTURE	1,051.	1,051.		0.
MFO TOWLE FUND JOINT VENTURE	1,026.	1,026.		0.
MFO WESTFIELD FUND A JOINT VENTURE	617.	617.		0.
TO FORM 990-PF, PG 1, LN 23	104,825.	2,859.		104,301.

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FORM 990-PF      OTHER DECREASES IN NET ASSETS OR FUND BALANCES      STATEMENT 9

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DESCRIPTION	AMOUNT
EXCESS OF FMV OVER DONOR'S BASIS OF SECURITIES RECEIVED	1,151,165.
INCREASE (DECREASE) IN UNREALIZED GAIN(LOSS) ON INVESTMENT	1,605,811.
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TOTAL TO FORM 990-PF, PART III, LINE 5	2,756,976.

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FORM 990-PF      CORPORATE STOCK      STATEMENT 10

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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
34547.396 VANGUARD FTSE SOCIAL INDEX FUND	1,146,283.	1,146,283.
3500 PERSHING SQUARE HOLDINGS	105,000.	105,000.
52754.229 VANGUARD DEVELOPED MARKETS INDEX	616,169.	616,169.
13827.985 VANGUARD EMERGING MARKETS	420,924.	420,924.
2000 PAYPAL HOLDINGS INC	172,140.	172,140.
	<hr/>	<hr/>
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,460,516.	2,460,516.

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FORM 990-PF      CORPORATE BONDS      STATEMENT 11

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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
10914.060 BLACKROCK TOTAL RETURN FUND	106,630.	106,630.
20453.649 VANGUARD HIGH-YIELD CORP	101,859.	101,859.
5450.087 VANGUARD S-T INVESTMENT GRADE FUND	53,629.	53,629.
13380 ISHARES ESG AWARE	314,296.	314,296.
	<hr/>	<hr/>
TOTAL TO FORM 990-PF, PART II, LINE 10C	576,414.	576,414.

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## FORM 990-PF

## OTHER INVESTMENTS

## STATEMENT 12

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
220 CROWN CASTLE REIT INC	FMV	31,801.	31,801.
1902.844 VANGUARD REIT INDEX FUND	FMV	216,201.	216,201.
91819.966 MFO D&D SMID CAP VALUE	FMV	160,776.	160,776.
21258.733 MFO TOWLE FUND	FMV	185,668.	185,668.
1240.119 MFO WESTFIELD FUND A	FMV	176,420.	176,420.
10050.368 VANGUARD SMALL CAP INDEX	FMV	823,025.	823,025.
85000 CROSSLINK VENTURES V	FMV		
LIQUIDATING FUND LLC		8,541.	8,541.
72216 DRAPER FISHER JURVETSON	FMV		
GROWTH FUND		116,166.	116,166.
27633.84 INVENOMIC FUND	FMV	627,012.	627,012.
2900 NEXTERA ENERGY PARTNERS LP	FMV	209,699.	209,699.
23134.913 OTTER CREEK LONG/SHORT	FMV		
OPPORTUNITY FUND		303,993.	303,993.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,859,302.	2,859,302.

## FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12  
QUALIFYING DISTRIBUTION STATEMENT

## STATEMENT 13

## EXPLANATION

THE FOUNDATION HAS INCLUDED \$564,500 IN ITS QUALIFIED EXPENDITURES FROM CONTRIBUTIONS TO THE MARIN COMMUNITY FOUNDATION (MARIN). MARIN WAS ESTABLISHED FOR THE PURPOSE OF ENGAGING IN NONPROFIT, CHARITABLE, AND PHILANTHROPIC ACTIVITIES IN MARIN COUNTY, CALIFORNIA. THESE GOALS ARE CONSISTENT WITH THE CHARITABLE PURPOSES DESCRIBED IN SECTION 170(C)(2)(B) FOR WHICH THE REPORTING FOUNDATION WAS ESTABLISHED. UNDER THE TERMS OF THE CONTRACT WITH MARIN, THE RECOMMENDATIONS OF THE REPORTING FOUNDATION ARE ADVISORY ONLY AND NOT BINDING ON THE TRUSTEES OF MARIN.

## FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12  
SECTION 170(C)(2)(B) STATEMENT

## STATEMENT 14

## EXPLANATION

SEE INFORMATION PROVIDED ABOVE.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 15

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARYANNE MOTT 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TRUSTEE 4.00	0.	0.	0.
MICHAEL WARSH 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	SECRETARY/TRUSTEE 4.00	4,130.	0.	0.
CORINNE MEADOWS-EFRAM 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	VICE-PRESIDENT/TRUSTEE 6.00	12,000.	0.	0.
MARISE MEYNET STEWART 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	PRESIDENT/TRUSTEE 6.00	12,000.	0.	0.
TERESA ROBINSON 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	SECRETARY/TRUSTEE 4.00	4,130.	0.	0.
KAU'I KELIPIO 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TREASURER/TRUSTEE 4.00	4,130.	0.	0.
BAILEY MALONE 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	EXECUTIVE DIRECTOR 20.00	227,989.	5,700.	0.
SANDRA SMITHEY 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TRUSTEE 4.00	4,130.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		268,509.	5,700.	0.



FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VI-B, LINE 5D

STATEMENT 16

GRANTEE'S NAME

CERES TRUST

GRANTEE'S ADDRESS150 SOUTH WACKER DR, STE 2400  
CHICAGO, IL 60606

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
40,000.	10/15/21	20,000.

PURPOSE OF GRANT

POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS

DATES OF REPORTS BY GRANTEE

11/14/2022, 11/14/2023

ANY DIVERSION BY GRANTEE

GRANTOR KNOWS OF NO FUNDS THAT HAVE BEEN DIVERTED TO ANY OTHER ACTIVITY.

RESULTS OF VERIFICATION

CS FUND WILL REVIEW THE REPORTS, WHICH ARE DUE ON NOVEMBER 14, 2022 AND NOVEMBER 14, 2023. THE FOUNDATION DID NOT UNDERTAKE ANY ADDITIONAL VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY.

REQUIRED STATEMENTS FOR SET-ASIDE AMOUNTS UNDER INCOME TAX REGULATIONS  
53.4942(A)-3(B)(7)(II):

THE AMOUNTS SET-ASIDE RELATING TO GRANTS MADE DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2022 TOTALED 500,000. THE INCLUSION OF THESE SET-ASIDE AMOUNTS IN THE CALCULATION OF QUALIFYING DISTRIBUTIONS IS BASED UPON AN IRS RULING ISSUED FOR CS FUND ON DECEMBER 10, 1984 AND MODIFIED MARCH 7, 1985 (#OP:E:EO:R2).

THE AMOUNTS BEING SET-ASIDE ARE ONLY FOR PREVIOUSLY APPROVED GRANTS WHICH WERE NOT PAID AS OF SEPTEMBER 30, 2022. THE PURPOSE OF THE SET-ASIDE AMOUNTS IS TO ALLOW FOR THE PROJECTED SUBSEQUENT PAYMENTS OF PREVIOUSLY APPROVED GRANTS. THE SUBSEQUENT PAYMENTS TO GRANTEEES ARE MADE ONLY AFTER THEY SUBMIT EVIDENCE THAT THE FUNDS ARE BEING EXPENDED FOR THE PURPOSES UPON WHICH THE GRANT WAS ORIGINALLY AWARDED. THESE SET-ASIDE AMOUNTS WILL BE PAID TO THE QUALIFYING GRANTEEES WITHIN 60 MONTHS AFTER THE DATE OF THE SET-ASIDE.

THIS PROCEDURE ENHANCES THE EFFICIENCY OF THE GRANT-MAKING PROGRAM. IT ALSO GIVES CS FUND GREATER CONTROL IN ASSURING THE FURTHERANCE OF ITS EXEMPT PURPOSE.

A COMPLETE SCHEDULE OF THE SET-ASIDES FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2022 IS INCLUDED AS PART OF THE DETAIL ON PART XIV, LINE 3B.

DISTRIBUTABLE AMOUNTS DETERMINED UNDER IRC SECTION 4942(D) FOR THE FISCAL YEARS ENDED:

10-31-13	141,263
10-31-14	114,040
10-31-15	92,705
10-31-16	109,394
10-31-17	167,992
09-30-18	252,854
09-30-19	306,960
09-30-20	1,091,418
09-30-21	408,914
09-30-22	414,149

QUALIFYING DISTRIBUTIONS DETERMINED UNDER IRC SECTION 170(B)(1)(E)(II) FOR THE FISCAL YEARS ENDED:

10-31-13	2,663,675
10-31-14	2,380,921
10-31-15	499,437
10-31-16	42,090
10-31-17	133,419
09-30-18	367,694
09-30-19	1,823,906
09-30-20	3,006,476
09-30-21	2,429,068
09-30-22	3,784,594

## GENERAL EXPLANATION

STATEMENT 18

## FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART XIV, LINES 2A THROUGH 2D - GRANT APPLICATION SUBMISSION INFORMATION

## EXPLANATION:

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED:

BAILEY MALONE  
 245 KENTUCKY ST., STE E  
 PETALUMA, CA 94952-2877  
 TELEPHONE NUMBER  
 707-874-2942

## FORM AND CONTENT OF APPLICATIONS

REQUESTS FOR SUPPORT SHOULD BE MADE BY LETTER OF INQUIRY (LOI). LOIS SHOULD BE ADDRESSED TO INQUIRIES@CSFUND.ORG OR 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877. THEY WILL BE ACKNOWLEDGED AS SOON AS POSSIBLE. LOIS SHOULD BE NO MORE THAN THREE PAGES IN LENGTH AND CONTAIN THE FOLLOWING INFORMATION:

A CONTACT PERSON'S NAME, TITLE, MAILING ADDRESS, TELEPHONE, AND E-MAIL ADDRESS

BASIC INFORMATION ABOUT THE ORGANIZATION, INCLUDING A BRIEF MISSION STATEMENT AND AN OVERVIEW OF CURRENT ACTIVITIES

A DESCRIPTION OF THE ORGANIZATION'S APPROACH TO THE SPECIFIC PROBLEM BEING ADDRESSED AND PLANNED ACTIVITIES FOR THE FOLLOWING YEAR

A LINE ITEM BUDGET OF PROJECTED EXPENSES FOR THE ORGANIZATION AND PROJECT, IF APPLICABLE

A LIST OF SECURED AND POTENTIAL FUNDING SOURCES (GRANTS RECEIVED, PROPOSALS PENDING, PLANNED SUBMISSIONS, EARNED INCOME, ETC.)

PLEASE DO NOT INCLUDE BROCHURES, REPORTS, NEWS CLIPPINGS, CDS, DVDS, OR OTHER MATERIALS WITH LOIS. PLASTIC FOLDERS, BINDERS OR OTHER PRESENTATION MATERIALS ARE NOT NECESSARY. DUE TO THE HIGH NUMBER OF REQUESTS RECEIVED, WE ARE NOT ABLE TO TRANSLATE AND REVIEW LOIS SUBMITTED IN LANGUAGES OTHER THAN ENGLISH AND SPANISH.

KINDLY REFRAIN FROM SENDING A FULL PROPOSAL UNLESS INVITED TO DO SO. IF YOUR ORGANIZATION OR PROJECT IS FOUND TO FALL WITHIN THE FOUNDATION'S FUNDING PRIORITIES, A FULL PROPOSAL WILL BE INVITED. THE FOUNDATION PROVIDES GENERAL SUPPORT AND PROJECT SPECIFIC GRANTS. APPLICANT ORGANIZATIONS MUST BE CLASSIFIED AS A 501(C)(3) BY THE US INTERNAL REVENUE SERVICE. FOREIGN APPLICANTS SHOULD NOTE THAT THE FOUNDATION MAKES A VERY LIMITED NUMBER OF DIRECT GRANTS ABROAD (I.E., WITHOUT FISCAL SPONSORSHIP BY A US-BASED ORGANIZATION). THE FOUNDATION DOES NOT PROVIDE SUPPORT TO INDIVIDUALS, ENDOWMENTS, BOOKS, FILMS, OR DIRECT LOBBYING ACTIVITIES.

ANY SUBMISSION DEADLINES

THERE ARE NO DEADLINES FOR LETTERS OF INQUIRY AS THEY ARE ACCEPTED THROUGHOUT THE YEAR. PROPOSALS MUST BE RECEIVED BY THE FIRST MONDAY IN JANUARY FOR CONSIDERATION DURING THE SPRING GRANTMAKING CYCLE OR THE FIRST MONDAY IN AUGUST FOR CONSIDERATION DURING THE FALL GRANTMAKING CYCLE. FUNDING DECISIONS ARE MADE DURING BOARD MEETINGS GENERALLY HELD IN APRIL AND DECEMBER, RESPECTIVELY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

CS FUND IS CURRENTLY GRANTING IN THREE CATEGORIES, EACH ONE WITH A SPECIFIC EMPHASIS:  
FOOD SOVEREIGNTY  
RIGHTS AND GOVERNANCE  
EMERGING TECHNOLOGIES

BOARD INITIATED GRANTS: OCCASIONALLY THE FOUNDATION MAY INITIATE SUPPORT FOR PROJECTS THAT FALL OUTSIDE OF THE ESTABLISHED GUIDELINES.

GENERAL EXPLANATION

STATEMENT 19

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990PF, PAGE 9, PART XII, LINE 7 - ELECTION TO TREAT DISTRIBUTIONS AS

EXPLANATION:

CS FUND HEREBY ELECTS, PURSUANT TO TREASURY REGULATION SEC. 1.170A-9(H) AND SEC. 53.4942(A)-3(C)(2), TO TREAT DISTRIBUTIONS OF \$3,400,000 (WHICH EQUALS THE VALUE OF ALL CONTRIBUTIONS RECEIVED IN THE YEAR ENDED SEPTEMBER 30, 2022) AS DISTRIBUTIONS OUT OF CORPUS. ACCORDINGLY, THE FOUNDATION MEETS THE PASS THROUGH REQUIREMENTS OF THE INTERNAL REVENUE CODE SEC. 170(B)(1)(F) AND SEC. 4942(G)(3).

(SIGNATURE ON FILE) BAILEY MALONE 08/15/2023

SIGNATURE OF OFFICER DATE

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

STATE COPY

# California Exempt Organization Annual Information Return

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **10/01/2021**, and ending (mm/dd/yyyy) **09/30/2022**

Corporation/Organization name **CS FUND** California corporation number **1017528**

Additional information. See instructions. FEIN **95-3607882**

Street address (suite or room) **245 KENTUCKY ST., NO. E** PMB no.

City **PETALUMA** State **CA** ZIP code **94952-2877**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	3,661,949	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received <b>STMT 1</b>	3	3,400,000	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>STMT 2</b>			
	4	<b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	7,061,949	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6	1,815,118	00
	7	Total costs. Add line 5 and line 6	7	1,815,118	00
8	Total gross income. Subtract line 7 from line 4	8	5,246,831	00	
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	4,984,560	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	262,271	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Title <b>EXECUTIVE DIRE</b>	Date	Telephone <b>707-874-2942</b>	
<b>Paid Preparer's Use Only</b>	Preparer's signature	<b>JENNIFER C. HEATWOLE</b>	Date <b>05/22/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P01331602</b>
	Firm's name (or yours, if self-employed) and address	<b>MFO E-FILING SERVICES CO. 111 E COURT ST #3D FLINT, MI 48502-1649</b>			Firm's FEIN <b>20-1597091</b>
	May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Telephone <b>(810) 767-0136</b>

**Part II** Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

128951 01-19-22

**SEE PART II SUBSTITUTE ATTACHMENT**

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2		00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4		00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8		00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees	•	11		0 00	
	12	Other salaries and wages	•	12		00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13		00
		14	Taxes	•	14		00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16		00
		17	Other expenses and disbursements	•	17		00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18		00

<b>Schedule L Balance Sheet</b>	<b>Beginning of taxable year</b>			<b>End of taxable year</b>
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash				•
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments				•
10 a Depreciable assets				
b Less accumulated depreciation	( )		( )	
11 Land				•
12 Other assets				•
13 <b>Total assets</b>				
<b>Liabilities and net worth</b>				
14 Accounts payable				•
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities				
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund				•
22 <b>Total liabilities and net worth</b>				

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	•	7 Income recorded on books this year not included in this return. Attach schedule	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5			

CA 199

CASH CONTRIBUTIONS  
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	10/26/21	1,000,000.
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	12/29/21	278,927.
TOTAL INCLUDED ON LINE 3			1,278,927.

CA 199

NONCASH CONTRIBUTIONS  
INCLUDED ON PART I, LINE 3

STATEMENT 2

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	FMV OF GIFT	TOTAL AMOUNT
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877			
PROPERTY DESCRIPTION				
2200 SHS BLACKSTONE INC.		12/29/21	294,591.	294,591.

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	FMV OF GIFT	TOTAL AMOUNT
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877			
PROPERTY DESCRIPTION				
1010 SHS EXPEDIA GROUP, INC.		12/29/21	182,997.	182,997.

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	FMV OF GIFT	TOTAL AMOUNT
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877			
PROPERTY DESCRIPTION				
1050 SHS LOWE'S COMPANIES, INC.		12/29/21	266,548.	266,548.



<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
2500 SHS NIKE, INC.	12/29/21	418,188.	418,188.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
1350 SHS NORFOLK SOUTHERN CORPORATION	12/29/21	395,665.	395,665.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
2225 SHS QUALCOMM INCORPORATED	12/29/21	411,869.	411,869.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
1700 SHS WYNDHAM HOTELS & RESORTS, INC.	12/29/21	151,215.	151,215.

TOTAL INCLUDED ON LINE 3		<u>2,121,073.</u>	<u>2,121,073.</u>
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TAXABLE YEAR

2021

California e-file Return Authorization for Exempt Organizations

FORM

8453-EO

Table with 2 columns: Exempt Organization name, Identifying number. Row 1: CS FUND, 95-3607882

Part I Electronic Return Information (whole dollars only)

Table with 3 rows: 1 Total gross receipts (Form 199, line 4) 7,061,949; 2 Total gross income (Form 199, line 8) 5,246,831; 3 Total expenses and disbursements (Form 199, line 9) 4,984,560

Part II Settle Your Account Electronically for Taxable Year 2021

Table with 2 columns: 4 Electronic funds withdrawal, 4a Amount, 4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

Table with 2 columns: 5 Routing number, 6 Account number, 7 Type of account: Checking, Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2021 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.

Sign Here Signature of officer Date EXECUTIVE DIRECTOR Title

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2021 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Table with 4 columns: ERO's signature, Date, Check if also paid preparer (checked), Check if self-employed, ERO's PTIN, Firm's name (or yours if self-employed) and address, Firm's FEIN, ZIP code. Row 1: MFO E-FILING SERVICES CO., 111 E COURT ST #3D, FLINT, MI, 20-1597091, 48502-1649

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Table with 4 columns: Paid preparer's signature, Date, Check if self-employed, Paid preparer's PTIN, Firm's name (or yours if self-employed) and address, Firm's FEIN, ZIP code

**ANNUAL REGISTRATION RENEWAL FEE REPORT  
TO ATTORNEY GENERAL OF CALIFORNIA**

**Sections 12586 and 12587, California Government Code  
11 Cal. Code Regs. sections 301-306, 309, 311, and 312**

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

MAIL TO:  
Registry of Charitable Trusts  
P.O. Box 903447  
Sacramento, CA 94203-4470  
STREET ADDRESS:  
1300 I Street  
Sacramento, CA 95814  
(916) 210-6400  
WEBSITE ADDRESS:  
[www.oag.ca.gov/charities](http://www.oag.ca.gov/charities)

**CS FUND**

Name of Organization

List all DBAs and names the organization uses or has used

**245 KENTUCKY ST., NO. E**

Address (Number and Street)

**PETALUMA, CA 94952-2877**

City or Town, State, and ZIP Code

**(707) 874-2942**

Telephone Number

**INQUIRIES@CSFUND.ORG**

E-mail Address

Check if:

- Change of address  
 Amended report

State Charity Registration Number **CT44168**

Corporation or Organization No. **1017528**

Federal Employer ID No. **95-3607882**

**ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)  
Make Check Payable to Department of Justice**

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

**PART A - ACTIVITIES**

For your most recent full accounting period (beginning 10/01/2021 ending 09/30/2022) list:

Total Revenue (including noncash contributions) \$ 5,246,831 Noncash Contributions \$ 0 Total Assets \$ 6,733,721  
Program Expenses \$ 3,284,594 Total Expenses \$ 4,984,560

**PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT**

**Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.**

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		X
5. During this reporting period, did the organization receive any governmental funding?		X
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	X	
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

**I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.**

**BAILEY MALONE**

Signature of Authorized Agent

Printed Name

**EXECUTIVE DIRECTOR**

Title

Date

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>CS FUND</b>	Taxpayer identification number (TIN) <b>95-3607882</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>245 KENTUCKY ST., E</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PETALUMA, CA 94952-2877</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

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

**BAILEY MALONE**

- The books are in the care of ▶ **245 KENTUCKY ST., STE E - PETALUMA, CA 94952-2877**

Telephone No. ▶ **(707) 874-2942** Fax No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **AUGUST 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year \_\_\_\_\_ or
- ▶  tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**.

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

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	29,805.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	29,805.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

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

**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

**2021**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year 2021 or tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**

Name of foundation  
**CS FUND**

Number and street (or P.O. box number if mail is not delivered to street address)  
**245 KENTUCKY ST.**

City or town, state or province, country, and ZIP or foreign postal code  
**PETALUMA, CA 94952-2877**

**A** Employer identification number  
**95-3607882**

**B** Telephone number  
**(707) 874-2942**

**C** If exemption application is pending, check here

**D** 1. Foreign organizations, check here   
2. Foreign organizations meeting the 85% test, check here and attach computation

**E** If private foundation status was terminated under section 507(b)(1)(A), check here

**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

**G** Check all that apply:  Initial return  Initial return of a former public charity  
 Final return  Amended return  
 Address change  Name change

**H** Check type of organization:  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, col. (c), line 16)  
\$ **6,733,721.**

**J** Accounting method:  Cash  Accrual  
 Other (specify) **MODIFIED CASH**  
(Part I, column (d), must be on cash basis.)

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received	3,400,000.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	3,531.	3,531.		STATEMENT 1
	4 Dividends and interest from securities	148,089.	148,089.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,311,610.			
	b Gross sales price for all assets on line 6a	3,126,728.			
	7 Capital gain net income (from Part IV, line 2)		1,311,610.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	383,601.	0.		STATEMENT 3	
12 <b>Total.</b> Add lines 1 through 11	5,246,831.	1,463,230.			
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	268,509.	8,866.		256,231.
	14 Other employee salaries and wages	460,678.	0.		455,960.
	15 Pension plans, employee benefits	113,473.	1,142.		112,331.
	16a Legal fees	3,762.	0.		3,762.
	b Accounting fees	19,875.	0.		19,875.
	c Other professional fees	171,482.	119,328.		51,191.
	17 Interest				
	18 Taxes	78,870.	3,780.		50,590.
	19 Depreciation and depletion				
	20 Occupancy	32,193.	0.		32,174.
	21 Travel, conferences, and meetings	108,391.	0.		104,455.
	22 Printing and publications	1,071.	0.		924.
	23 Other expenses	104,825.	2,859.		104,301.
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	1,363,129.	135,975.		1,191,794.
	25 Contributions, gifts, grants paid	3,621,431.			2,092,800.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	4,984,560.	135,975.		3,284,594.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	262,271.				
b <b>Net investment income</b> (if negative, enter -0-)		1,327,255.			
c <b>Adjusted net income</b> (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	672,482.	525,927.	525,927.
	2 Savings and temporary cash investments	141,700.	308,127.	308,127.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	350.		
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 10 3,687,031.	2,460,516.	2,460,516.
	c Investments - corporate bonds	STMT 11 660,583.	576,414.	576,414.
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 12 3,358,244.	2,859,302.	2,859,302.	
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation				
15 Other assets (describe <b>SECURITY DEPOSITS</b> )	3,435.	3,435.	3,435.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	8,523,825.	6,733,721.	6,733,721.	
Liabilities	17 Accounts payable and accrued expenses	74,144.	54,614.	
	18 Grants payable	734,500.	1,458,631.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	808,644.	1,513,245.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	7,715,181.	5,220,476.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances	7,715,181.	5,220,476.		
30 Total liabilities and net assets/fund balances	8,523,825.	6,733,721.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	7,715,181.
2 Enter amount from Part I, line 27a	2	262,271.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	7,977,452.
5 Decreases not included in line 2 (itemize) SEE STATEMENT 9	5	2,756,976.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	5,220,476.

Part IV Capital Gains and Losses for Tax on Investment Income SEE ATTACHED STATEMENTS

Table with 4 columns: (a) List and describe the kind(s) of property sold, (b) How acquired, (c) Date acquired, (d) Date sold. Rows 1a through 1e.

Table with 4 columns: (e) Gross sales price, (f) Depreciation allowed, (g) Cost or other basis plus expense of sale, (h) Gain or (loss). Rows a through e.

Table with 4 columns: (i) FMV as of 12/31/69, (j) Adjusted basis as of 12/31/69, (k) Excess of col. (i) over col. (j), (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)). Rows a through e.

2 Capital gain net income or (net capital loss) 2 1,311,610.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): N/A

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

Table for Part V Excise Tax. Rows 1a through 11. Includes sub-rows 6a through 6d. Total tax due is 11,356.

**Part VI-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year? .....		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
b If "Yes," has it filed a tax return on Form 990-T for this year? .....		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>CA</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .....	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....	X	
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address ▶ <u>WWW.CSFUND.ORG</u>		
14 The books are in care of ▶ <u>BAILEY MALONE</u> Telephone no. ▶ <u>(707) 874-2942</u> Located at ▶ <u>245 KENTUCKY ST., STE E, PETALUMA, CA</u> ZIP+4 ▶ <u>94952-2877</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ..... and enter the amount of tax-exempt interest received or accrued during the year .....		N/A
16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		



**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....		
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(5)	X
	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021? .....	2a	X
If "Yes," list the years ▶ _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.) .....	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? .....	4b	X

**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	X	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <b>SEE STATEMENT 16</b>	X	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <b>N/A</b>		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 15		268,509.	5,700.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MELANIE ADCOCK - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM DIRECTOR 32.00	121,498.	4,299.	0.
RAMONA ALLEN - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	FINANCE AND ADMINISTRATION 40.00	106,386.	2,660.	0.
ROSE COHEN - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	GRANT ADMINISTRATOR 32.00	87,866.	841.	0.
AMANDA SOLTER - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM OFFICER 40.00	84,694.	2,117.	0.
SAMIR DOSHI - 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877	PROGRAM DIRECTOR 40.00	76,725.	619.	0.
<b>Total</b> number of other employees paid over \$50,000				0

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
45 NORTH PARTNERS PO BOX 965, BOZEMAN, MT 59715-7761	INVESTMENT CONSULTING	115,793.

Total number of others receiving over \$50,000 for professional services ..... 0

**Part VIII-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

**Part VIII-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ..... 0.

**Part IX Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	6,326,138.
b	Average of monthly cash balances .....	1b	1,431,092.
c	Fair market value of all other assets (see instructions) .....	1c	1,026,491.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	8,783,721.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	8,783,721.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	131,756.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	8,651,965.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	432,598.

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

1	Minimum investment return from Part IX, line 6 .....	1	432,598.
2a	Tax on investment income for 2021 from Part V, line 5 .....	2a	18,449.
b	Income tax for 2021. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	18,449.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	414,149.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	414,149.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	414,149.

**Part XI Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	3,284,594.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	500,000.
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	3,784,594.

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**Part XII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				414,149.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016				
b From 2017				
c From 2018				
d From 2019				
e From 2020	35,030.			
f Total of lines 3a through e	35,030.			
4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ 3,784,594.				
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2021 distributable amount				414,149.
e Remaining amount distributed out of corpus	3,370,445.			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	3,405,475.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	3,400,000.			
8 Excess distributions carryover from 2016 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	5,475.			
10 Analysis of line 9:				
a Excess from 2017				
b Excess from 2018				
c Excess from 2019				
d Excess from 2020				
e Excess from 2021	5,475.			

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2021	(b) 2020	(c) 2019	(d) 2018	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**MARYANNE MOTT**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

**BAILEY MALONE, 707-874-2942  
245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877**

b The form in which applications should be submitted and information and materials they should include:

**SEE STATEMENT 18**

c Any submission deadlines:

**SEE STATEMENT 18**

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**SEE STATEMENT 18**

**Part XIV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ACT BLUE 714 G STREET SE SUITE 202 WASHINGTON, DC 20003	NONE	PC	FREESTONE FUND - GRANT	1,500.
AMERICAN ECONOMIC LIBERTIES PROJECT 2001 PENNSYLVANIA AVE NW SUITE 540 WASHINGTON, DC 20006	NONE	PC	RETHINK TRADE	100,000.
CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY NEW YORK, NY 10012	NONE	PC	GENERAL SUPPORT	115,000.
CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW 1101 15TH ST NW, 11TH FLOOR WASHINGTON, DC 20005	NONE	PC	GEOENGINEERING: EQUIPPING A GLOBAL MOVEMENT TO CONFRONT A RISING GLOBAL THREAT	60,000.
CENTER FOR THE STUDY OF THE AMERICAS 2156 JEFFERSON AVE. #405 BERKELEY, CA 94703	NONE	PC	ESTABLISHING A PERMANENT OFFICE	46,350.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>2,897,300.</b>
<b>b Approved for future payment</b>				
CERES TRUST 150 SOUTH WACKER DR. STE. 2400 CHICAGO, IL 60606	NONE	PC	POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS	20,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	PROGRAM SUPPORT	45,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	GENERAL SUPPORT	30,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>1,138,600.</b>

Part XV-A Analysis of Income-Producing Activities

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on investments, Dividends, Net rental income, and Total. Total amount is 1,846,831.

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes. Line 11A describes grant administration income.



**Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

	Yes	No
<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash		X
(2) Other assets		X
<b>b</b> Other transactions:		
(1) Sales of assets to a noncharitable exempt organization		X
(2) Purchases of assets from a noncharitable exempt organization		X
(3) Rental of facilities, equipment, or other assets		X
(4) Reimbursement arrangements		X
(5) Loans or loan guarantees		X
(6) Performance of services or membership or fundraising solicitations		X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

	Date		Date	Title	EXECUTIVE DIRECTOR	May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Signature of officer or trustee		Date		Title		

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>JENNIFER C. HEATWOLE</b>	Preparer's signature <b>JENNIFER C. HEATW</b>	Date <b>05/22/23</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01331602</b>
	Firm's name ▶ <b>MFO E-FILING SERVICES CO.</b>			Firm's EIN ▶ <b>20-1597091</b>	
	Firm's address ▶ <b>111 E COURT ST #3D FLINT, MI 48502-1649</b>			Phone no. <b>(810) 767-0136</b>	

CS FUND

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 94910 SHS VANGUARD FEDERAL MONEY MARKET FUND	P	09/08/16	08/17/22
b 10960.636 SHS BLACKROCK TOTAL RETURN FUND	P	12/04/19	05/16/22
c 12534.96 SHS BLACKROCK LOW DURATION BD	P	05/16/22	07/21/22
d 2200 SHS BLACKSTONE INC	D	04/06/20	01/03/22
e 1010 SHS EXPEDIA INC	D	05/21/20	01/03/22
f 1050 SHS LOWE'S COMPANIES INC	D	01/11/19	01/03/22
g 1800 SHS NIKE INC	D	03/09/20	01/03/22
h 700 SHS NIKE INC	D	03/24/20	01/03/22
i 1350 SHS NORFOLK SOUTHERN CORP	D	04/13/20	01/03/22
j 2225 SHS QUALCOMM INC	D	01/10/20	01/03/22
k 1700 SHS WYNDHAM HOTELS & RESORTS INC	D	05/21/20	01/03/22
l 2240.143 SHS VANGUARD FTSE SOCIAL INDEX FUND	P	10/22/18	10/25/21
m 1083.206 SHS VANGUARD REIT INDEX	P	01/05/21	09/20/22
n 1533.272 SHS VANGUARD EMERGING MKTS STOCK INDEX	P	03/17/21	09/20/22
o 1231.401 SHS VANGUARD SMALL CAP INDEX	P	01/10/20	08/17/22

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 94,910.		94,910.	0.
b 115,196.		130,651.	-15,455.
c 113,943.		115,196.	-1,253.
d 280,368.		96,989.	183,379.
e 187,298.		78,896.	108,402.
f 268,055.		101,918.	166,137.
g 295,386.		152,895.	142,491.
h 114,872.		49,422.	65,450.
i 393,194.		209,070.	184,124.
j 410,157.		201,259.	208,898.
k 152,165.		79,458.	72,707.
l 100,000.		56,459.	43,541.
m 135,000.		124,657.	10,343.
n 50,000.		67,433.	-17,433.
o 120,000.		97,712.	22,288.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			0.
b			-15,455.
c			-1,253.
d			183,379.
e			108,402.
f			166,137.
g			142,491.
h			65,450.
i			184,124.
j			208,898.
k			72,707.
l			43,541.
m			10,343.
n			-17,433.
o			22,288.

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3

CS FUND

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 7784 SHS DRAPER FISHER JURVETSON GROWTH FUND LP	P	12/31/11	10/01/21
b MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P	01/01/21	12/31/21
c MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P	12/30/20	12/31/21
d MFO TOWLE FUND (JOINT VENTURE)	P	01/01/21	12/31/21
e MFO TOWLE FUND (JOINT VENTURE)	P	12/30/20	12/31/21
f MFO WESTFIELD FUND A (JOINT VENTURE)	P	01/01/21	12/31/21
g MFO WESTFIELD FUND A (JOINT VENTURE)	P	12/30/20	12/31/21
h DRAPER FISHER JURVETSON GROWTH FUND	P	01/01/21	12/31/21
i DRAPER FISHER JURVETSON GROWTH FUND	P	12/30/20	12/31/21
j CAPITAL GAINS DIVIDENDS			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 9,845.		1,394.	8,451.
b 19,424.		18,953.	471.
c 54,608.		30,848.	23,760.
d 18,529.		16,810.	1,719.
e 79,425.		41,472.	37,953.
f 15,335.		17,082.	-1,747.
g 69,333.		31,634.	37,699.
h 1.			1.
i 69.			69.
j 29,615.			29,615.
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			8,451.
b			471.
c			23,760.
d			1,719.
e			37,953.
f			-1,747.
g			37,699.
h			1.
i			69.
j			29,615.
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2	1,311,610.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3	N/A

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CERES TRUST 150 SOUTH WACKER DR. STE. 2400 CHICAGO, IL 60606	NONE	PC	POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS	20,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	PROGRAM SUPPORT	45,000.
ECOLOGY ACTION OF THE MID-PENINSULA 5798 RIDGEWOOD RD WILLITS, CA 95490	NONE	PC	GENERAL SUPPORT	30,000.
EQUITABLE FOOD INITIATIVE 200 MASSACHUSETTS AVE NW, SUITE 700 WASHINGTON, DC 20001	NONE	PC	FARMWORKER AGTECH AND INNOVATION CENTER	50,000.
FRIENDS OF ACTION GROUP ON EROSION, TECHNOLOGY AND CONCENTRATION, INC. 441 AVON ST. OAKLAND, CA 94618	NONE	PC	GENERAL SUPPORT	150,000.
FRIENDS OF THE EARTH 2150 ALLSTON WAY, SUITE 360 BERKELEY, CA 94704	NONE	PC	EMERGING TECHNOLOGIES CAMPAIGN	60,000.
FUND FOR CONSTITUTIONAL GOVERNMENT 122 MARYLAND AVE, NE WASHINGTON, DC 20002	NONE	PC	GENERAL SUPPORT	45,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	A PARTNERSHIP TO BUILD AND STRENGTHEN TERRITORIAL MARKETS	100,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	HUMANITARIAN ASSISTANCE FOR MAASAI PASTORALISTS	30,600.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	GENERAL SUPPORT	31,500.
<b>Total from continuation sheets</b>				<b>2,574,450.</b>

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	NORTHERN COOPERATIVE DEVELOPMENT BANK	78,750.
GREATER GALLATIN UNITED WAY 945 TECHNOLOGY BOULEVARD BOZEMAN, MT 59718	NONE	PC	FREESTONE FUND - GRANT	1,500.
HUI HO'OLEIMALUO 2306 KALANI'ANA'OE STREET HILO, HI 96720	NONE	PC	FREESTONE FUND - GRANT	1,500.
INDEPENDENT ARTS & MEDIA PO BOX 420442 SAN FRANCISCO, CA 94142	NONE	PC	FREESTONE FUND - GRANT	1,000.
INSTITUTE FOR FOOD AND DEVELOPMENT POLICY, INC. 398 60TH STREET OAKLAND, CA 94618	NONE	PC	AGROECOLOGICAL CAPACITY BUILDING FOR AFRICA	49,500.
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW 1126 16TH STREET NW, SUITE 400 WASHINGTON, DC 20036	NONE	PC	PROTECTING PROTEST - US PROGRAM	50,000.
KUAMO'O FOUNDATION 66 - 1756 PUWALU STREET WAIKOLOA, HI 96738	NONE	PC	FREESTONE FUND - GRANT	1,500.
MANY MOTHERS PO BOX 23222 SANTA FE, NM 87502	NONE	PC	FREESTONE FUND - GRANT	1,500.
MARIN COMMUNITY FOUNDATION 5 HAMILTON LANDING, STE 200 NOVATO, CA 94949	NONE	DONOR ADVISED FUND	DONOR ADVISED FUND	979,500.
MCDOWELL PTA 421 S. MCDOWELL BLVD. PETALUMA, CA 94954	NONE	PC	FREESTONE FUND - GRANT	1,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NATIVE AMERICAN FOOD SOVEREIGNTY ALLIANCE PO BOX 675 FLAGSTAFF, AZ 86002	NONE	PC	REMATRIATION OF INDIGENOUS SEEDS: BUILDING REGIONAL SEED HUBS	35,000.
NEO PHILANTHROPY 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL SUPPORT	50,000.
NEW MEXICO COMMUNITY CAPITAL 301 GOLD AVE. SW, SUITE 102 ALBUQUERQUE, NM 87102	NONE	PC	FREESTONE FUND - GRANT	1,500.
NORTH BAY ORGANIZING PROJECT P.O. BOX 503 GRATON, CA 95444	NONE	PC	FREESTONE FUND - GRANT	2,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	100,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT AND MATCHING GRANT	20,000.
PEOPLE'S PARITY PROJECT 141 4TH ST E APT 521 ST. PAUL, MN 55101	NONE	PC	GENERAL SUPPORT	45,000.
PESTICIDE ACTION NETWORK NORTH AMERICA REGIONAL CENTER 2029 UNIVERSITY AVE. STE 200 BERKELEY, CA 94704	NONE	PC	CHANGING POLICY AND PRACTICE TO PROTECT POLLINATORS	25,000.
PHYSICIANS FOR SOCIAL RESPONSIBILITY - LOS ANGELES 1413 OCEAN AVENUE SANTA MONICA, CA 90403	NONE	PC	CHALLENGING THE FALSE SOLUTION OF CARBON CAPTURE, SHIFTING THE NARRATIVE IN CALIFORNIA	50,000.
PIE RANCH PO BOX 363 PESCADERO, CA 94060	NONE	PC	GENERAL SUPPORT	30,000.
<b>Total from continuation sheets</b>				

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
POOR MAGAZINE PO BOX 5474 OAKLAND, CA 94605	NONE	PC	FREESTONE FUND - GRANT	1,000.
PRAXIS PROJECT, THE PO BOX 7259 OAKLAND, CA 94601	NONE	PC	GENERAL SUPPORT	43,600.
PROJECT ON GOVERNMENT OVERSIGHT INC. 1100 G ST NW, STE 500 WASHINGTON, DC 20005	NONE	PC	GENERAL SUPPORT	50,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	JUDICIAL INDEPENDENCE PROGRAM	30,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	GRANTEE SAFETY AND SECURITY FUND	45,000.
PUBLIC CITIZEN FOUNDATION, INC. 215 PENNSYLVANIA AVE., SE WASHINGTON, DC 20003	NONE	PC	PUBLIC CITIZEN GLOBAL TRADE WATCH	115,000.
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS RD., STE 201 CALABASAS, CA 91302	NONE	PC	CENTRAL VALLEY AGROECOLOGY	38,500.
SOLIDAIRE NETWORK 1423 BROADWAY #314 OAKLAND, CA 94612	NONE	PC	GENERAL SUPPORT	100,000.
TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129	NONE	PC	NATIONAL BAIL FUND NETWORK	40,000.
WHISTLEBLOWER AID 1250 CONNECTICUT AVE NW, #700 WASHINGTON, DC 20036	NONE	PC	GENERAL SUPPORT	25,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FUND FOR CONSTITUTIONAL GOVERNMENT 122 MARYLAND AVE, NE WASHINGTON, DC 20002	NONE	PC	GENERAL SUPPORT	45,000.
GLOBAL GREENGRANTS FUND 2840 WILDERNESS PLACE, SUITE A BOULDER, CO 80301	NONE	PC	GENERAL SUPPORT	31,500.
NATIVE AMERICAN FOOD SOVEREIGNTY ALLIANCE PO BOX 675 FLAGSTAFF, AZ 86002	NONE	PC	REMATRIATION OF INDIGENOUS SEEDS: BUILDING REGIONAL SEED HUBS	35,000.
NEO PHILANTHROPY 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	NONE	PC	GENERAL SUPPORT	50,000.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	200,000.
PEOPLE'S PARITY PROJECT 141 4TH ST E APT 521 ST. PAUL, MN 55101	NONE	PC	GENERAL SUPPORT	90,000.
PESTICIDE ACTION NETWORK NORTH AMERICA REGIONAL CENTER 2029 UNIVERSITY AVE. STE 200 BERKELEY, CA 94704	NONE	PC	CHANGING POLICY AND PRACTICE TO PROTECT POLLINATORS	25,000.
PRAXIS PROJECT, THE PO BOX 7259 OAKLAND, CA 94601	NONE	PC	GENERAL SUPPORT	43,600.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	JUDICIAL INDEPENDENCE PROGRAM	30,000.
PROTEUS FUND, INC. 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	NONE	PC	GRANTEE SAFETY AND SECURITY FUND	45,000.
<b>Total from continuation sheets</b>				<b>1,043,600.</b>



**Part XIV** Supplementary Information

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY 1995 UNIVERSITY AVENUE BERKELEY, CA 94704	NONE	PC	AGTECH POLICY	30,000.
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS RD., STE 201 CALABASAS, CA 91302	NONE	PC	CENTRAL VALLEY AGROECOLOGY	38,500.
SOLIDAIRE NETWORK 1423 BROADWAY #314 OAKLAND, CA 94612	NONE	PC	GENERAL SUPPORT	300,000.
TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129	NONE	PC	NATIONAL BAIL FUND NETWORK	80,000.
<b>Total from continuation sheets</b> .....				

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

CS FUND

Employer identification number

95-3607882

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>294,591.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>182,997.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>266,548.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>418,188.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>395,665.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>411,869.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>151,215.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	<u>MARYANNE MOTT</u>  <u>245 KENTUCKY ST., STE E</u>  <u>PETALUMA, CA 94952-2877</u>	\$ <u>278,927.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**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
2	2200 SHS BLACKSTONE INC. _____ _____ _____	\$ <u>294,591.</u>	<u>12/29/21</u>
3	1010 SHS EXPEDIA GROUP, INC. _____ _____ _____	\$ <u>182,997.</u>	<u>12/29/21</u>
4	1050 SHS LOWE'S COMPANIES, INC. _____ _____ _____	\$ <u>266,548.</u>	<u>12/29/21</u>
5	2500 SHS NIKE, INC. _____ _____ _____	\$ <u>418,188.</u>	<u>12/29/21</u>
6	1350 SHS NORFOLK SOUTHERN CORPORATION _____ _____ _____	\$ <u>395,665.</u>	<u>12/29/21</u>
7	2225 SHS QUALCOMM INCORPORATED _____ _____ _____	\$ <u>411,869.</u>	<u>12/29/21</u>

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
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**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
8	1700 SHS WYNDHAM HOTELS & RESORTS, INC. _____ _____ _____	\$ 151,215.	12/29/21
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>CS FUND</b>	Employer identification number  <b>95-3607882</b>
--	---

**Part III** 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 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.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BLACKROCK FED FUND INTEREST RECEIVED	3,307. 224.	3,307. 224.	
TOTAL TO PART I, LINE 3	3,531.	3,531.	

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
BLACKROCK FED FUND MFO ALTERNATE ASSET MUTUAL FUNDS MFO CORPORATE BOND MUTUAL FUNDS MFO D&D SMID CAP VALUE FUND JOINT VENTURE MFO FOREIGN EQUITY FUNDS MFO MONEY MARKET FUNDS DIVIDENDS MFO REAL ASSETS MUTUAL FUNDS MFO STOCK MUTUAL FUNDS MFO TOWLE FUND JOINT VENTURE MFO WESTFIELD FUND A JOINT VENTURE TOBIAS WHITE & CO NOMINEE	187. 67,825. 14,933. 2,619. 46,788. 360. 834. 31,318. 1,490. 1,462. 9,888.	187. 27,964. 1,249. 58. 0. 0. 0. 0. 157. 0. 0.	0. 39,861. 13,684. 2,561. 46,788. 360. 834. 31,318. 1,333. 1,462. 9,888.	0. 39,861. 13,684. 2,561. 46,788. 360. 834. 31,318. 1,333. 1,462. 9,888.	
TO PART I, LINE 4	177,704.	29,615.	148,089.	148,089.	



## FORM 990-PF

## OTHER INCOME

## STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GRANT ADMINISTRATION INCOME	383,601.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	383,601.	0.	

## FORM 990-PF

## LEGAL FEES

## STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	3,762.	0.		3,762.
TO FM 990-PF, PG 1, LN 16A	3,762.	0.		3,762.

## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	17,375.	0.		17,375.
ACCOUNTING MANAGEMENT FEE	2,500.	0.		2,500.
TO FORM 990-PF, PG 1, LN 16B	19,875.	0.		19,875.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEE	3,500.	3,500.		0.
PAYROLL SERVICES	876.	9.		867.
PENSION ADMINISTRATION	2,660.	26.		2,634.
IT SERVICES	15,953.	0.		14,990.
INVESTMENT CONSULTING	115,793.	115,793.		0.
GRANT ADMINISTRATION	32,700.	0.		32,700.
TO FORM 990-PF, PG 1, LN 16C	171,482.	119,328.		51,191.

## FORM 990-PF

## TAXES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROPERTY TAXES	122.	0.		122.
FOREIGN TAXES WITHHELD	3,393.	3,393.		0.
PAYROLL TAXES	50,847.	379.		50,468.
FEDERAL EXCISE TAX	24,500.	0.		0.
FOREIGN TAXES - MFO TOWLE FUND	2.	2.		0.
FOREIGN TAXES - MFO WESTFIELD FUND A	6.	6.		0.
TO FORM 990-PF, PG 1, LN 18	78,870.	3,780.		50,590.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRANTS ANALYSTS	40,833.	0.		40,833.
OFFICE SUPPLIES	9,451.	0.		10,819.
INSURANCE	4,319.	0.		4,319.
TELEPHONE & INTERNET	7,824.	0.		7,907.
POSTAGE & DELIVERY	451.	0.		381.
DUES & MEMBERSHIPS	37,135.	0.		38,089.
BANK & CREDIT CARD FEES	620.	0.		620.
STATE FILING FEES	190.	0.		190.
TRANSLATION SERVICES	1,143.	0.		1,143.
CROSSLINK VENTURES V LIQUIDATING FUND, L.P. K-1	74.	74.		0.
CROSSLINK VENTURES V, L.P. K-1	53.	53.		0.
DRAPER FISHER JURVETSON GROWTH 2006 L.P. K-1	38.	38.		0.
MFO D&D SMID CAP VALUE FUND JOINT VENTURE	1,051.	1,051.		0.
MFO TOWLE FUND JOINT VENTURE	1,026.	1,026.		0.
MFO WESTFIELD FUND A JOINT VENTURE	617.	617.		0.
TO FORM 990-PF, PG 1, LN 23	104,825.	2,859.		104,301.

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FORM 990-PF      OTHER DECREASES IN NET ASSETS OR FUND BALANCES      STATEMENT 9

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DESCRIPTION	AMOUNT
EXCESS OF FMV OVER DONOR'S BASIS OF SECURITIES RECEIVED	1,151,165.
INCREASE (DECREASE) IN UNREALIZED GAIN(LOSS) ON INVESTMENT	1,605,811.
TOTAL TO FORM 990-PF, PART III, LINE 5	<u>2,756,976.</u>

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FORM 990-PF      CORPORATE STOCK      STATEMENT 10

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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
34547.396 VANGUARD FTSE SOCIAL INDEX FUND	1,146,283.	1,146,283.
3500 PERSHING SQUARE HOLDINGS	105,000.	105,000.
52754.229 VANGUARD DEVELOPED MARKETS INDEX	616,169.	616,169.
13827.985 VANGUARD EMERGING MARKETS	420,924.	420,924.
2000 PAYPAL HOLDINGS INC	172,140.	172,140.
TOTAL TO FORM 990-PF, PART II, LINE 10B	<u>2,460,516.</u>	<u>2,460,516.</u>

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FORM 990-PF      CORPORATE BONDS      STATEMENT 11

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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
10914.060 BLACKROCK TOTAL RETURN FUND	106,630.	106,630.
20453.649 VANGUARD HIGH-YIELD CORP	101,859.	101,859.
5450.087 VANGUARD S-T INVESTMENT GRADE FUND	53,629.	53,629.
13380 ISHARES ESG AWARE	314,296.	314,296.
TOTAL TO FORM 990-PF, PART II, LINE 10C	<u>576,414.</u>	<u>576,414.</u>

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 12

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
220 CROWN CASTLE REIT INC	FMV	31,801.	31,801.
1902.844 VANGUARD REIT INDEX FUND	FMV	216,201.	216,201.
91819.966 MFO D&D SMID CAP VALUE	FMV	160,776.	160,776.
21258.733 MFO TOWLE FUND	FMV	185,668.	185,668.
1240.119 MFO WESTFIELD FUND A	FMV	176,420.	176,420.
10050.368 VANGUARD SMALL CAP INDEX	FMV	823,025.	823,025.
85000 CROSSLINK VENTURES V	FMV		
LIQUIDATING FUND LLC		8,541.	8,541.
72216 DRAPER FISHER JURVETSON	FMV		
GROWTH FUND		116,166.	116,166.
27633.84 INVENOMIC FUND	FMV	627,012.	627,012.
2900 NEXTERA ENERGY PARTNERS LP	FMV	209,699.	209,699.
23134.913 OTTER CREEK LONG/SHORT	FMV		
OPPORTUNITY FUND		303,993.	303,993.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,859,302.	2,859,302.

FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12  
QUALIFYING DISTRIBUTION STATEMENT

STATEMENT 13

## EXPLANATION

THE FOUNDATION HAS INCLUDED \$564,500 IN ITS QUALIFIED EXPENDITURES FROM CONTRIBUTIONS TO THE MARIN COMMUNITY FOUNDATION (MARIN). MARIN WAS ESTABLISHED FOR THE PURPOSE OF ENGAGING IN NONPROFIT, CHARITABLE, AND PHILANTHROPIC ACTIVITIES IN MARIN COUNTY, CALIFORNIA. THESE GOALS ARE CONSISTENT WITH THE CHARITABLE PURPOSES DESCRIBED IN SECTION 170(C)(2)(B) FOR WHICH THE REPORTING FOUNDATION WAS ESTABLISHED. UNDER THE TERMS OF THE CONTRACT WITH MARIN, THE RECOMMENDATIONS OF THE REPORTING FOUNDATION ARE ADVISORY ONLY AND NOT BINDING ON THE TRUSTEES OF MARIN.

FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12  
SECTION 170(C)(2)(B) STATEMENT

STATEMENT 14

## EXPLANATION

SEE INFORMATION PROVIDED ABOVE.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 15

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARYANNE MOTT 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TRUSTEE 4.00	0.	0.	0.
MICHAEL WARSH 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	SECRETARY/TRUSTEE 4.00	4,130.	0.	0.
CORINNE MEADOWS-EFRAM 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	VICE-PRESIDENT/TRUSTEE 6.00	12,000.	0.	0.
MARISE MEYNET STEWART 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	PRESIDENT/TRUSTEE 6.00	12,000.	0.	0.
TERESA ROBINSON 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	SECRETARY/TRUSTEE 4.00	4,130.	0.	0.
KAU'I KELIPIO 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TREASURER/TRUSTEE 4.00	4,130.	0.	0.
BAILEY MALONE 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	EXECUTIVE DIRECTOR 20.00	227,989.	5,700.	0.
SANDRA SMITHEY 245 KENTUCKY ST., STE E PETALUMA, CA 94952-2877	TRUSTEE 4.00	4,130.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		268,509.	5,700.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VI-B, LINE 5D

STATEMENT 16

GRANTEE'S NAME

CERES TRUST

GRANTEE'S ADDRESS150 SOUTH WACKER DR, STE 2400  
CHICAGO, IL 60606

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
40,000.	10/15/21	20,000.

PURPOSE OF GRANT

POLLINATOR PROTECTION NETWORK: STRATEGIC PLANNING PROCESS

DATES OF REPORTS BY GRANTEE

11/14/2022, 11/14/2023

ANY DIVERSION BY GRANTEE

GRANTOR KNOWS OF NO FUNDS THAT HAVE BEEN DIVERTED TO ANY OTHER ACTIVITY.

RESULTS OF VERIFICATION

CS FUND WILL REVIEW THE REPORTS, WHICH ARE DUE ON NOVEMBER 14, 2022 AND NOVEMBER 14, 2023. THE FOUNDATION DID NOT UNDERTAKE ANY ADDITIONAL VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY.

FORM 990-PF

EXPLANATION OF CASH SET-ASIDE  
PART XI, LINE 3B

STATEMENT 17

REQUIRED STATEMENTS FOR SET-ASIDE AMOUNTS UNDER INCOME TAX REGULATIONS  
53.4942(A)-3(B)(7)(II):

THE AMOUNTS SET-ASIDE RELATING TO GRANTS MADE DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2022 TOTALED 500,000. THE INCLUSION OF THESE SET-ASIDE AMOUNTS IN THE CALCULATION OF QUALIFYING DISTRIBUTIONS IS BASED UPON AN IRS RULING ISSUED FOR CS FUND ON DECEMBER 10, 1984 AND MODIFIED MARCH 7, 1985 (#OP:E:EO:R2).

THE AMOUNTS BEING SET-ASIDE ARE ONLY FOR PREVIOUSLY APPROVED GRANTS WHICH WERE NOT PAID AS OF SEPTEMBER 30, 2022. THE PURPOSE OF THE SET-ASIDE AMOUNTS IS TO ALLOW FOR THE PROJECTED SUBSEQUENT PAYMENTS OF PREVIOUSLY APPROVED GRANTS. THE SUBSEQUENT PAYMENTS TO GRANTEEES ARE MADE ONLY AFTER THEY SUBMIT EVIDENCE THAT THE FUNDS ARE BEING EXPENDED FOR THE PURPOSES UPON WHICH THE GRANT WAS ORIGINALLY AWARDED. THESE SET-ASIDE AMOUNTS WILL BE PAID TO THE QUALIFYING GRANTEEES WITHIN 60 MONTHS AFTER THE DATE OF THE SET-ASIDE.

THIS PROCEDURE ENHANCES THE EFFICIENCY OF THE GRANT-MAKING PROGRAM. IT ALSO GIVES CS FUND GREATER CONTROL IN ASSURING THE FURTHERANCE OF ITS EXEMPT PURPOSE.

A COMPLETE SCHEDULE OF THE SET-ASIDES FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2022 IS INCLUDED AS PART OF THE DETAIL ON PART XIV, LINE 3B.

## DISTRIBUTABLE AMOUNTS DETERMINED UNDER IRC SECTION 4942(D) FOR THE FISCAL YEARS ENDED:

10-31-13	141,263
10-31-14	114,040
10-31-15	92,705
10-31-16	109,394
10-31-17	167,992
09-30-18	252,854
09-30-19	306,960
09-30-20	1,091,418
09-30-21	408,914
09-30-22	414,149

## QUALIFYING DISTRIBUTIONS DETERMINED UNDER IRC SECTION 170(B)(1)(E)(II) FOR THE FISCAL YEARS ENDED:

10-31-13	2,663,675
10-31-14	2,380,921
10-31-15	499,437
10-31-16	42,090
10-31-17	133,419
09-30-18	367,694
09-30-19	1,823,906
09-30-20	3,006,476
09-30-21	2,429,068
09-30-22	3,784,594

## GENERAL EXPLANATION

STATEMENT 18

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FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

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PART XIV, LINES 2A THROUGH 2D - GRANT APPLICATION SUBMISSION INFORMATION

## EXPLANATION:

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED:

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BAILEY MALONE  
245 KENTUCKY ST., STE E  
PETALUMA, CA 94952-2877  
TELEPHONE NUMBER  
707-874-2942

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FORM AND CONTENT OF APPLICATIONS

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REQUESTS FOR SUPPORT SHOULD BE MADE BY LETTER OF INQUIRY (LOI). LOIS SHOULD BE ADDRESSED TO INQUIRIES@CSFUND.ORG OR 245 KENTUCKY ST., STE E, PETALUMA, CA 94952-2877. THEY WILL BE ACKNOWLEDGED AS SOON AS POSSIBLE. LOIS SHOULD BE NO MORE THAN THREE PAGES IN LENGTH AND CONTAIN THE FOLLOWING INFORMATION:

A CONTACT PERSON'S NAME, TITLE, MAILING ADDRESS, TELEPHONE, AND E-MAIL ADDRESS

BASIC INFORMATION ABOUT THE ORGANIZATION, INCLUDING A BRIEF MISSION STATEMENT AND AN OVERVIEW OF CURRENT ACTIVITIES

A DESCRIPTION OF THE ORGANIZATION'S APPROACH TO THE SPECIFIC PROBLEM BEING ADDRESSED AND PLANNED ACTIVITIES FOR THE FOLLOWING YEAR

A LINE ITEM BUDGET OF PROJECTED EXPENSES FOR THE ORGANIZATION AND PROJECT, IF APPLICABLE

A LIST OF SECURED AND POTENTIAL FUNDING SOURCES (GRANTS RECEIVED, PROPOSALS PENDING, PLANNED SUBMISSIONS, EARNED INCOME, ETC.)

PLEASE DO NOT INCLUDE BROCHURES, REPORTS, NEWS CLIPPINGS, CDS, DVDS, OR OTHER MATERIALS WITH LOIS. PLASTIC FOLDERS, BINDERS OR OTHER PRESENTATION MATERIALS ARE NOT NECESSARY. DUE TO THE HIGH NUMBER OF REQUESTS RECEIVED, WE ARE NOT ABLE TO TRANSLATE AND REVIEW LOIS SUBMITTED IN LANGUAGES OTHER THAN ENGLISH AND SPANISH.

KINDLY REFRAIN FROM SENDING A FULL PROPOSAL UNLESS INVITED TO DO SO. IF YOUR ORGANIZATION OR PROJECT IS FOUND TO FALL WITHIN THE FOUNDATION'S FUNDING PRIORITIES, A FULL PROPOSAL WILL BE INVITED. THE FOUNDATION PROVIDES GENERAL SUPPORT AND PROJECT SPECIFIC GRANTS. APPLICANT ORGANIZATIONS MUST BE CLASSIFIED AS A 501(C)(3) BY THE US INTERNAL REVENUE SERVICE. FOREIGN APPLICANTS SHOULD NOTE THAT THE FOUNDATION MAKES A VERY LIMITED NUMBER OF DIRECT GRANTS ABROAD (I.E., WITHOUT FISCAL SPONSORSHIP BY A US-BASED ORGANIZATION). THE FOUNDATION DOES NOT PROVIDE SUPPORT TO INDIVIDUALS, ENDOWMENTS, BOOKS, FILMS, OR DIRECT LOBBYING ACTIVITIES.



ANY SUBMISSION DEADLINES

THERE ARE NO DEADLINES FOR LETTERS OF INQUIRY AS THEY ARE ACCEPTED THROUGHOUT THE YEAR. PROPOSALS MUST BE RECEIVED BY THE FIRST MONDAY IN JANUARY FOR CONSIDERATION DURING THE SPRING GRANTMAKING CYCLE OR THE FIRST MONDAY IN AUGUST FOR CONSIDERATION DURING THE FALL GRANTMAKING CYCLE. FUNDING DECISIONS ARE MADE DURING BOARD MEETINGS GENERALLY HELD IN APRIL AND DECEMBER, RESPECTIVELY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

CS FUND IS CURRENTLY GRANTING IN THREE CATEGORIES, EACH ONE WITH A SPECIFIC EMPHASIS:  
FOOD SOVEREIGNTY  
RIGHTS AND GOVERNANCE  
EMERGING TECHNOLOGIES

BOARD INITIATED GRANTS: OCCASIONALLY THE FOUNDATION MAY INITIATE SUPPORT FOR PROJECTS THAT FALL OUTSIDE OF THE ESTABLISHED GUIDELINES.

GENERAL EXPLANATION

STATEMENT 19

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990PF, PAGE 9, PART XII, LINE 7 - ELECTION TO TREAT DISTRIBUTIONS AS

EXPLANATION:

CS FUND HEREBY ELECTS, PURSUANT TO TREASURY REGULATION SEC. 1.170A-9(H) AND SEC. 53.4942(A)-3(C)(2), TO TREAT DISTRIBUTIONS OF \$3,400,000 (WHICH EQUALS THE VALUE OF ALL CONTRIBUTIONS RECEIVED IN THE YEAR ENDED SEPTEMBER 30, 2022) AS DISTRIBUTIONS OUT OF CORPUS. ACCORDINGLY, THE FOUNDATION MEETS THE PASS THROUGH REQUIREMENTS OF THE INTERNAL REVENUE CODE SEC. 170(B)(1)(F) AND SEC. 4942(G)(3).

(SIGNATURE ON FILE) BAILEY MALONE 08/15/2023

SIGNATURE OF OFFICER DATE