



Finance Committee Meeting
Wednesday, March 12, 2025 2:00 – 3:30 PM
Allan Hancock College – Building B, Captain’s Room

AGENDA

	Page	Tentative Time
1. Call to Order		2:00 PM
2. Roll Call		
3. Public Comment		
<i>This section of the agenda is intended for members of the public to address the Executive Committee on items involving the Foundation that are being considered in Open Session. Please note that Directors are prohibited by the Brown Act from responding to comments made regarding topics not on the official agenda. If you wish to speak to any item listed, please complete a Request to Speak Card available from the Executive Director. It is suggested that speakers limit themselves to 5 minutes.</i>		
4. Approval of Agenda for March 10, 2025 (ACTION)	1-2	
5. Approval of Minutes for November 6, 2024 (ACTION)	3-4	
6. Investments Review from The Murray Group - Morgan Stanley		2:05 PM
7. Review and Approval of Financial Statements (ACTION)	5	2:40 PM
7.A. Check Registers – 9/1/24 - 1/31/2025	6-25	
7.B. Contributions Report – 9/1/23 - 1/31/2025	26	
7.C. Statement of Operations – 1/31/2025	27	
7.D. Statement of Financial Position – 1/31/2025	28	
7.E. General Operations Budget – 1/31/2025	29	
8. Current Economic Climate – Discussion		
9. Approval of Proposed 2025-2026 Operating and All Fund Budgets (ACTION)	30-31	3:00 PM
10. Auditors 2023-2024 IRS Form 990 Report (ACTION)	32-85	
11. Next Meeting – July 9, 2023, 2:00 – 3:30 p.m.		
12. Adjournment (ACTION)		3:30 PM



Finance Committee Meeting
Wednesday, March 12, 2025 2:00 – 3:30 PM
Allan Hancock College – Building B, Captain’s Room

In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact the Allan Hancock College Foundation office at (805) 925-2004. Please make requests 48 hours prior to the meeting in order to make reasonable arrangements to ensure accessibility to this meeting.

A handwritten signature in blue ink, appearing to read "Jon Hooten".

Jon Hooten, Executive Director – College Advancement

Finance Committee Members:

- Mike Gibson, Chair
- Paul Cook, Director
- Judy Frost, Director
- Manny Molera, Director
- Keli Seyfert, Director, Auxiliary Accounting
- Dennis Curran, AHC Vice President, Finance & Administration

**ALLAN HANCOCK COLLEGE FOUNDATION
FINANCE COMMITTEE MEETING
Minutes of November 6, 2024**

1. Call to Order

The meeting was called to order at 2:02 p.m. by Chair, Mike Gibson

2. Roll Call

Finance Committee Members Present: Naishadh Buch, Paul Cook, Dennis Curran, Judy Frost, Mike Gibson

Finance Committee Members Absent: J. Edwin Fields, Manny Molera

College Staff Present: Jon Hooten, Keli Seyfert

Foundation Staff Present: Erinn Artrip

Recorder: Marisol Diaz

3. Public Comment

None

4. Approval of Agenda for November 6, 2024 (ACTION)

MOTION: On a motion by J. Frost seconded by D. Curran, the Finance Committee approved the agenda by a unanimous vote.

5. Approval of Minutes for July 17, 2024

MOTION: On a motion by J. Frost seconded by D. Curran, the Finance Committee approved the July 17, 2024, minutes by a unanimous vote.

6. Approval of Minutes for September 26, 2024

MOTION: On a motion by J. Frost seconded by N. Buch, the Finance Committee approved the September 26, 2024, minutes with the following vote:

Ayes: N. Buch, J. Frost, N. Gibson

Noes: None

Abstain: P. Cook, D. Curran

7. Review and Approval of Financial Statements (ACTION)

7.A. Check Registers – 6/1/2024- 8/31/2024

7.B. Contributions Report – 7/1/2024 - 6/30/2024 and 8/31/2024

7.C. Statement of Operations – 6/30/2024 and 8/31/2024

7.D. Statement of Financial Position – 6/30/2024 and 8/31/2024

7.E. General Operations Budget – 6/30/2024 and 8/31/2024

The Finance Committee reviewed items 7.A. through 7.E.

MOTION: On a motion by C. Curran, seconded by P. Cook, the Finance Committee approved the financial statements, items 7.A. through 7.E., as presented and will be forwarded to the Executive Committee and the Board of Directors for approval.

8. Endowment Scholarship and Program Funding (ACTION)

M. Gibson discussed endowment scholarship and program funding report and considered staff's recommendation to fund at 5% across the board.

MOTION: On a motion by J. Frost, seconded by N. Buch, the Finance Committee approved the endowment scholarship and program funding presented and will be forwarded to the Executive Committee and the Board of Directors for approval.

9. Investment Policy Statement (ACTION)

The Investment Policy Statement was revised to align with current processes.

MOTION: On a motion by P. Cook, seconded by J. Frost, the Finance Committee approved the Investment Policy Statement as presented and will be forwarded to the Executive Committee and the Board of Directors for approval.

10. Restricted Funds (Information)

At the last meeting, J. Frost asked to see a report on all restricted funds. The committee discussed the age specific funds and how college staff are notified of these funds.

11. Investment Advisors Review (Information)

Committee members discussed including the investment advisors' presentations at the beginning of the next Finance Committee meeting on March 12, 2025.

12. Next Meeting – March 12, 2025, 2:00 – 3:30 p.m.

13. Adjournment

MOTION: On a motion by M. Gibson, seconded by J. Frost, the Finance Committee approved the adjournment of the meeting at 2:54 p.m.

To: Finance Committee	ACTION
From: Mike Gibson, Chair Finance Committee	March 12, 2025
Subject: Review and Approval of Financial Statements	

BACKGROUND

A review of the Allan Hancock College Foundation financial statements.

7.A. Check Registers	9/1/2024 - 1/31/2025	6-25
7.B. Contributions Report	1/31/2025	26
7.C. Statement of Operations	1/31/2025	27
7.D. Statement of Financial Position	1/31/2025	28
7.E. General Operations Budget	1/31/2025	29

RECOMMENDATION

Staff recommend approval of the financial statements as submitted. Upon approval, the financial statements will be forwarded to the Executive Committee and board for review and approval.

Allan Hancock College
Check Register
Check Dates from 9/1/2024 to 9/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Bright Event Rentals LLC	Rental Equipment Hancock Honors Event 090724	\$6,803.69	
	Delivery and Pickup Hancock Honors Event 090724	\$1,360.00	
	Damage Waiver HH Event 090724	\$2,442.63	
	Sales Items - Taxable HH Event 090724	\$247.30	
		\$10,853.62	FN 83002592
Coasthills Community Foundation	Rancho Vino Sponsorship 101224	\$1,000.00	
		\$1,000.00	FN 83002593
Jazz Mafia	Live Music Hancock Honors Event 090724	\$5,000.00	
		\$5,000.00	FN 83002594
Jenna Nichols	Planner-Designer Hancock Honors Event 090724	\$4,200.00	
		\$4,200.00	FN 83002595
Robert Nourse	Live Painting Exhibit Hancock Honors Event 090724	\$566.00	
		\$566.00	FN 83002596
Point Of Action	T-Shirts Ambassadors Hancock Honors Event 090724	\$223.97	
	Set Up Fee	\$15.00	
		\$238.97	FN 83002597
Rotary Club of Santa Maria South	Dues and Membership Fees EA 2024	\$85.00	
		\$85.00	FN 83002598
Santa Ynez Valley Foundation	Sponsor Champions of the the Valley 101324	\$1,000.00	
		\$1,000.00	FN 83002599
Testa Catering	Meals Crew Hancock Honors Event 090724	\$758.07	
	Operations Fee & Delivery Fee	\$172.86	
		\$930.93	FN 83002600
Adam Trovao	Videographer Hancock Honors Event 090724	\$3,290.00	
		\$3,290.00	FN 83002601
AHC Viticulture & Enology Foundation	Fd Sppls Pinot Noir-Hancock Honors Event	\$495.24	
	Fd Sppls Syrah-Hancock Honors Event	\$660.34	
	Fd Sppls Chardonnay-Hancock Honors Event	\$258.39	
	Fd Sppls Sparkling Wine-Hancock Honors Event	\$165.08	
	Fd Sppls Pinot Rose-Hancock Honors Event	\$129.20	
	CA-CRV	\$14.35	
	\$1,722.60	FN 83002602	
Cal Poly State University	F2024 Schol A Woolsey	\$2,000.00	
		\$2,000.00	FN 83002603
	F2024 Schol C Gomez Castaneda	\$1,000.00	
		\$1,000.00	FN 83002604
	F2024 Schol C Perez	\$1,750.00	
	\$1,750.00	FN 83002605	

Allan Hancock College
Check Register
Check Dates from 9/1/2024 to 9/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Cal Poly State University	F2024 Schol J Kafeyan	\$2,000.00	
		\$2,000.00	FN 83002606
	(928) 600-0233 L Cortinez Hernandez	\$500.00	
		\$500.00	FN 83002607
	F2024 Schol M Zavala	\$500.00	
	F2024 Schol M Zavala	\$1,000.00	
		\$1,500.00	FN 83002608
	F2024 Schol M Cabezas	\$1,000.00	
	F2024 Schol M Cabezas	\$1,300.00	
		\$2,300.00	FN 83002609
	F2024 Schol N Signorelli	\$1,000.00	
	F2024 Schol N Signorelli	\$1,750.00	
		\$2,750.00	FN 83002610
	F2024 Schol N Nickell	\$3,000.00	
		\$3,000.00	FN 83002611
	F2024 Schol N Salinas	\$500.00	
	F2024 Schol N Salinas	\$500.00	
		\$1,000.00	FN 83002612
	F2024 Schol R Larson	\$1,000.00	
	F2024 Schol R Larson	\$2,000.00	
	\$3,000.00	FN 83002613	
F2024 Schol R Prado	\$1,500.00		
F2024 Schol R Prado	\$500.00		
	\$2,000.00	FN 83002614	
F2024 Schol R Broomall	\$1,000.00		
F2024 Schol R Broomall	\$1,500.00		
	\$2,500.00	FN 83002615	
F2024 Schol R Gechter	\$500.00		
F2024 Schol R Gechter	\$500.00		
	\$1,000.00	FN 83002616	
F2024 Schol R Castillo	\$1,000.00		
	\$1,000.00	FN 83002617	
F2024 Schol T Sheldon	\$3,000.00		
	\$3,000.00	FN 83002618	
F2024 Schol V Nerona	\$750.00		
F2024 Schol V Nerona	\$250.00		
	\$1,000.00	FN 83002619	
Emory & Henry University	F2024 Schol A Madassalia	\$1,800.00	
	F2024 Schol A Madassalia	\$200.00	
		\$2,000.00	FN 83002620

Allan Hancock College
Check Register
Check Dates from 9/1/2024 to 9/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Grand Canyon University	F2024 Schol M Morales	\$500.00	
	F2024 Schol M Morales	\$500.00	
		\$1,000.00	FN 83002621
Tracy McKee	RMB Sppls HH Event 090724	\$159.50	
	RMB Mlg 08/19-20/24	\$96.21	
		\$255.71	FN 83002622
Office Depot	Sppls Office Supplies	\$108.73	
	Equip Sppls - Office Chair	\$630.74	
	Sppls Office Paper	\$51.10	
		\$790.57	FN 83002623
Rotary Club of Santa Maria South	Dues and Membership Fees E Artrip Aug 2024	\$54.00	
		\$54.00	FN 83002624
Santa Maria Breakfast Rotary Club	Dues and Membership Fees KW Aug 2024	\$161.00	
		\$161.00	FN 83002625
Savoir Faire Catering Inc	Catering Hancock Honors Event 090724	\$29,600.63	
		\$29,600.63	FN 83002626
School Pride Ltd	Sppls Ten Banners Athletics Sport Teams	\$3,600.00	
	Freight	\$900.00	
		\$4,500.00	FN 83002627
Feride Schroeder	Fd Sppls Meals PHSC 199G Field Trip 09/18-22/24	\$2,295.00	
		\$2,295.00	FN 83002628
Southern New Hampshire University	F2024 Schol O Shrecengost	\$500.00	
	F2024 Schol O Shrecengost	\$1,000.00	
		\$1,500.00	FN 83002629
The University of Oklahoma	F2024 Schol M Darby	\$500.00	
	F2024 Schol M Darby	\$1,000.00	
	F2024 Schol M Darby	\$500.00	
		\$2,000.00	FN 83002630
Uc San Diego	F2024 Schol I Almaguer	\$500.00	
	F2024 Schol I Almaguer	\$500.00	
		\$1,000.00	FN 83002631
Uc Santa Barbara	F2024 Schol E Valencia-Dominguez	\$1,000.00	
		\$1,000.00	FN 83002632
	F2024 Schol K Branch	\$2,500.00	
		\$2,500.00	FN 83002633
	F2024 Schol L Espinoza	\$750.00	
F2024 Schol L Espinoza	\$500.00		
	\$1,250.00	FN 83002634	

Allan Hancock College
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Vendor Name	Description	Amount	Check
Uc Santa Barbara	F2024 Schol P Medina	\$1,250.00	
		\$1,250.00	FN 83002635
Kevin Walthers	RMB Trvl Exps DBW Dinner 082924	\$252.48	
		\$252.48	FN 83002636
Adept Events LLC	Sound/Lighting Svcs Hancock Honors Event 090924	\$10,750.00	
		\$10,750.00	FN 83002637
AHC District	Fdtn Banner Schols Aug 2024	\$241,168.75	
		\$241,168.75	FN 83002638
Anthem Blue Cross	Health Insurance Premium Oct 2024	\$2,525.79	
		\$2,525.79	FN 83002639
Erinn Artrip	RMB Mlg 090524	\$43.42	
		\$43.42	FN 83002640
Henry Barber	Live Music Military Apprec. Fbll Game 092024	\$300.00	
		\$300.00	FN 83002641
Charles Schwab & Co. Inc.	HP End Investment 082024-090124	\$4,314.30	
		\$4,314.30	FN 83002642
Christopher Hite	RMB Sppls Film & Video Dept 081724-090524	\$120.03	
		\$120.03	FN 83002643
Jon Hooten	RMB Mlg Various Fdtn Events 071124-090424	\$305.19	
		\$305.19	FN 83002644
The Guardian Life Insurance Company of America	Dental/Vision/Life Ins Prem Oct 2024	\$369.28	
		\$369.28	FN 83002645
Mario Vega	Catering PCPA Dinner on the Lawn Event 091124	\$1,903.13	
	Gratuity	\$250.00	
		\$2,153.13	FN 83002646
Jeremy Wirth	RMB Mlg Hancock Honors Videography 082724	\$38.06	
		\$38.06	FN 83002647
Cal Poly Humboldt	F2024 Schol C Duran	\$1,400.00	
	F2024 Schol C Duran	\$150.00	
		\$1,550.00	FN 83002648
Cal Poly State University	F2024 Schol J Diaz	\$2,000.00	
		\$2,000.00	FN 83002649
	F2024 Schol D Duran	\$3,000.00	
		\$3,000.00	FN 83002650
	F2024 Schol J Garcia	\$500.00	
	F2024 Schol J Garcia	\$1,000.00	
		\$1,500.00	FN 83002651

Allan Hancock College
Check Register
Check Dates from 9/1/2024 to 9/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Cal Poly State University	F2024 Schol J Garcia	\$1,250.00	
	F2024 Schol J Garcia	\$1,000.00	
		\$2,250.00	FN 83002652
	F2024 Schol L Murica	\$2,000.00	
		\$2,000.00	FN 83002653
	F2024 Schol N Piacentini	\$1,000.00	
	F2024 Schol N Piacentini	\$700.00	
		\$1,700.00	FN 83002654
	F2024 Schol C Villanueva	\$1,500.00	
		\$1,500.00	FN 83002655
Cornish College Of The Arts	F2024 Schol J Peters	\$3,250.00	
		\$3,250.00	FN 83002656
Kim Ensing	RMB Fd Sppls Stdt Workers FBII Game 091424	\$45.59	
		\$45.59	FN 83002657
	RMB Fd Sppls Mtg 091324 & FBII Game 091624	\$508.21	
	RMB Fd Sppls Staff FBII Game 092124	\$560.00	
		\$1,068.21	FN 83002658
Armando GonzalezDiaz	RMB Sppls Athletic Dept	\$168.85	
		\$168.85	FN 83002659
Paul Marszalkowski	Pianist for Hancock Honors Event 090724	\$200.00	
		\$200.00	FN 83002660
Sharaya Olmeda	RMB Sppls Banned Books Scavenger Hunt	\$100.00	
		\$100.00	FN 83002661
Pacific Coast Business Times	Advertising - Giving Guide 2024	\$1,250.00	
		\$1,250.00	FN 83002662
The Rotary Club Of Santa Maria	Dues and Membership Fees B Curry Aug 2024	\$37.00	
		\$37.00	FN 83002663
Uc Santa Barbara	F2024 Schol R Martinez	\$3,500.00	
		\$3,500.00	FN 83002664
	F2024 Schol M Solorio	\$500.00	
	F2024 Schol M Solorio	\$500.00	
		\$1,000.00	FN 83002665
		Total: \$399,804.11	

Allan Hancock College
Check Register
Check Dates from 10/1/2024 to 10/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Cal Poly State University	F2024 Schol DVazquez	\$5,000.00	
		\$5,000.00	FN 83002666
	F2024 Schol J Dees	\$500.00	
	F2024 Schol J Dees	\$1,000.00	
		\$1,500.00	FN 83002667
	F2024 Schol K Villanueva	\$600.00	
	F2024 Schol K Villanueva	\$400.00	
		\$1,000.00	FN 83002668
Calif State Univ Northridge	F2024 Schol L Ramirez	\$750.00	
		\$750.00	FN 83002669
Elan Financial Services	Svc Bottles Ice Deposit HH Event 090724	\$625.00	
	Fd Sppls Bus Mtg 082124	\$67.99	
	Svc Bottles Ice HH Event 090724	\$2,775.00	
	Svc Bottles Ice HH Event 090724	\$1,000.00	
	Fd Sppls PCPA Dinner on Lawn 091124	\$166.71	
	Sppls Hancock Honors Event 090724	\$871.23	
	Reg Fee Partnership for Excellence 091724	\$125.00	
	Hancock College Boosters Rodeo Auction 082424	\$800.00	
	Svc Photo Booth Hancock Honors Event 090724	\$616.97	
	Fd Sppls Beverages HH Event 090724	\$1,381.15	
	Email Marketing Svc Sept 2024	\$13.00	
	Fd Sppls Beverages HH Event 090724	\$227.45	
	Fd Sppls Staff 090324	\$30.34	
	Sppls HH Event 090724	\$10.87	
	Fd Sppls Donor Bus Mtg 090424	\$101.13	
	Textmunication	\$125.00	
	Sppls Hancock Honors Event 090724	\$13.37	
	Water Delivery Svc Aug 2024	\$43.75	
	Support Future for Lompoc Youth 091824	\$1,025.95	
	Sppls HH Event 090724	\$13.04	
	Fd Sppls HH Event 090724	\$103.90	
	Fd Sppls Staff 090624	\$135.31	
	Fd Sppls HH Event 090724	\$135.53	
	Sppls HH Event 090724	\$65.22	
	Fd Sppls HH Event Greenroom 090724	\$111.69	
	Sppls HH Event 090724	\$5.85	
		\$10,590.45	FN 83002670
Kim Ensing	RMB Fd SpplsFbll Military Apprec Game 092124	\$854.86	
		\$854.86	FN 83002671
Uc Santa Barbara	F2024 Schol E Marrs	\$2,000.00	
		\$2,000.00	FN 83002672
University Of Calif Los Angeles	F2024 Schol E Sandoval Villapando	\$3,500.00	
		\$3,500.00	FN 83002673
	F2024 Schol S Martinez	\$1,000.00	
	F2024 Schol S Martinez	\$500.00	

Allan Hancock College
Check Register
Check Dates from 10/1/2024 to 10/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
		\$1,500.00	FN 83002674
AHC Viticulture & Enology Foundation	Fd Sppls Pinot Noir Military Apprc Event 092124	\$201.10	
	Fd Sppls Chardonnay Military Apprc Event 092124	\$78.69	
	Fd Sppls Albarino Military Apprc Event 092124	\$78.69	
	CA-CRV Military Apprc Event 092124	\$2.61	
		\$361.09	FN 83002675
I. Miller Precision Optical Instruments Inc	Sppls Leica DME Microscope	\$1,150.00	
	Sppls Olympus CX31 Microscope	\$3,000.00	
	Shipping charges	\$105.00	
		\$4,255.00	FN 83002676
Office Depot	Sppls Ink & Paper	\$72.84	
	Sppls Coffee	\$43.53	
		\$116.37	FN 83002677
Santa Maria Breakfast Rotary Club	Dues and Membership Fees KW Sept 2024	\$151.00	
		\$151.00	FN 83002678
AHC District	Fdtn Banner Schols Sept 2024	\$32,059.80	
	Payroll Exps Teen Challenge	\$3,920.20	
	Fd Sppls LVC Campus Social 070524	\$132.25	
		\$36,112.25	FN 83002679
Marisol Diaz	RMB Mlg 092624	\$33.90	
		\$33.90	FN 83002680
Kim Ensing	RMB Fd Sppls Event Staff Meals 100524	\$520.00	
		\$520.00	FN 83002681
David Farber	Clarinet Player 093024 & 101424	\$300.00	
		\$300.00	FN 83002682
Sharaya Olmeda	Banned Books Week Zine Workshop Presenter 092424	\$200.00	
	RMB Fd Sppls 092424	\$32.46	
		\$232.46	FN 83002683
Natalie Rucobo	RMB Mlg 092624	\$33.90	
		\$33.90	FN 83002684
The Rotary Club Of Santa Maria	Dues and Membership Fees BC Sept 2024	\$65.00	
		\$65.00	FN 83002685
The Shack of Lompoc, Inc.	Sppls Nursing Program-Tops	\$681.51	
	Sppls Nursing Program-Pants	\$466.17	
		\$1,147.68	FN 83002686
AHC Campus Graphics	Print Hancock Honors Signage	\$61.08	
	Print Hancock Honors Lobby Signage	\$0.99	
	Print Hancock Honors Drink Menu	\$0.48	
	Print Hancock Honors Sponsor Signage	\$138.40	

Allan Hancock College
Check Register
Check Dates from 10/1/2024 to 10/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
AHC Campus Graphics	Print Hancock Honors Misc Signage	\$0.97	
	Print Hancock Honors Welcome Sign	\$18.60	
	Print Hancock Honors Sponsor Signage	\$0.68	
	Print Hancock Honors Takeaway Cards	\$10.85	
	Print Hancock Honors Proclamation-Lahr	\$0.24	
	Print Hancock Honors Panel Wall	\$622.76	
	Print Hancock Honors Ambassadors	\$4.11	
		\$859.16	FN 83002687
AHC District	Orfelea Fdtn Child Ctr Grant Exps	\$870.00	
		\$870.00	FN 83002688
Anthem Blue Cross	Health Ins Premium Nov 2024	\$2,013.37	
		\$2,013.37	FN 83002689
Bright Event Rentals LLC	Damage Waiver	\$14.82	
	Rental equipment for Hancock Honors 090724	\$123.52	
		\$138.34	FN 83002690
Charles Schwab & Co. Inc.	HP End Investment 09152-101524	\$8,333.10	
		\$8,333.10	FN 83002691
Jon Hooten	RMB Mlg 09/12-26/24	\$281.94	
		\$281.94	FN 83002692
PCPA	M Hancock Trust Qtrly Distribution	\$19,524.06	
		\$19,524.06	FN 83002693
Santa Maria Country Club	Deposit Athletic Golf Tournament 040724	\$1,000.00	
		\$1,000.00	FN 83002694
Voices Translation and Interpreting Services	Interpretation Services Hancock Honors Event 09072	\$172.12	
		\$172.12	FN 83002695
Kevin Walthers	RMB Fd Sppls Bus Mtg 101124	\$530.00	
		\$530.00	FN 83002696
Elan Financial Services	Fd Sppls Staff Appreciation Lunch 091624	\$260.92	
	Pacific Coast Business Times Annual Subscription	\$54.99	
	Sponsorship Savie Health-Heroes Luncheon	\$1,000.00	
	Fd Sppls Business Breakfast 092024	\$16.95	
	Sponsorship Cars and Cowboys Event 092824	\$1,500.00	
	Fd Sppls Board Meeting	\$3.08	
	Fd Sppls Tibetan Monks	\$187.86	
	Fd Sppls Tibetan Monks	\$120.17	
	Email Marketing Svc Oct 2024	\$19.50	
	Fd Sppls Tibetan Monks	\$111.83	
	Textmunication Svcs	\$125.00	
	Reg Fee SYVPHP-Legacies of Hope	\$2,600.00	
	Sponsor LVCHO 111424	\$1,000.00	
	Water Delivery Service Sept 2024	\$35.67	
	Sppls Festival Mozaic Tikts Board Members	\$54.00	
Reg Fee SYVPHP-Legacies of Hope	\$650.00		
Sppls Festival Mozaic Student Tkt	\$5.00		

Allan Hancock College
Check Register
 Check Dates from 10/1/2024 to 10/31/2024
 Bank Code: FN

Vendor Name	Description	Amount	Check
Elan Financial Services	Sppls Festival Mozaic Student Tkt	\$10.00	
	Fd Sppls Tibetan Monks	\$67.87	
	Sppls Hancock Honoree Gift	\$35.88	
	Sppls Photo-Hancock Honors photos	\$32.90	
	Fd Sppls District Business Mtg 091824	\$222.00	
	Fd Sppls District Business Mtg 091824	\$63.46	
	Fd Sppls District Business Mtg 092324	\$30.04	
	Sppls Retired Chancellor DVH	\$125.91	
	Fd Sppls District Business Mtg 100324	\$44.00	
	Refund Sppls HH Event	(\$385.95)	
		\$7,991.08	FN 83002697
Total:		\$111,737.13	

Allan Hancock College
Check Register
Check Dates from 11/1/2024 to 11/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Cal Poly State University	F24 Schol G Buenrostro	\$500.00	
		\$500.00	FN 83002698
Marisol Diaz	RMB Fd Sppls Board/Committee Mtgs	\$30.03	
		\$30.03	FN 83002699
Kim Ensing	RMB Sppls Athl Camera Equip	\$1,010.29	
		\$1,010.29	FN 83002700
LeeAnne McNulty	RMB Fd Sppls ACCT Conf 102424	\$267.36	
		\$267.36	FN 83002701
Oakie Smokie BBQ LLC	Fd Sppls AHC Fbll Game 102624	\$1,359.38	
		\$1,359.38	FN 83002702
Office Depot	Sppls Office Sppls	\$43.35	
	Sppls Office Sppls	\$29.35	
		\$72.70	FN 83002703
Sharaya Olmeda	RMB Fd Sppls Zine Workshop 103124	\$32.46	
		\$32.46	FN 83002704
Rotary Club of Santa Maria South	Dues and Membership Fees E Artrip	\$54.00	
		\$54.00	FN 83002705
School Pride Ltd	Sppls PVC Overlay Record Board-Track and Field	\$1,185.00	
	Sppls PVC Overlay Record Board-Swimming	\$1,185.00	
	Freight	\$970.00	
		\$3,340.00	FN 83002706
The Guardian Life Insurance Company of America	Dental/Vision/Life Ins Premium Nov 2024	\$369.28	
		\$369.28	FN 83002707
Uc San Diego	F24 Schol E Jacobo	\$500.00	
	F24 Schol E Jacobo	\$500.00	
		\$1,000.00	FN 83002708
AHC Campus Graphics	2024 - 2025 Scholarship Poster	\$9.87	
	AHC FDTN Thank You Cards and Envelopes	\$27.95	
	Foundation Letterhead	\$97.81	
	Scholarship Banners	\$9.96	
	Foundation Envelopes	\$73.00	
	New Dates for Scholarship Banners	\$9.30	
	2024 - 2025 Scholarship Table Tents	\$12.87	
	2024 - 2025 Scholarship Bookmarks	\$10.73	
		\$251.49	FN 83002709
Anthem Blue Cross	FY25 Open PO for health insurance - DEC 2024	\$2,013.37	
		\$2,013.37	FN 83002710
California Department Of Justice	Raffle Program Registration Renewal 2025	\$30.00	

Allan Hancock College
Check Register
Check Dates from 11/1/2024 to 11/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
		\$30.00	FN 83002711
Jon Hooten	RMB MLG 10/02-31/24	\$344.11	
		\$344.11	FN 83002712
Old Town Shirt Factory	Screen print T-shirts for Pink Week - Small	\$45.46	
	Screen print T-shirts for Pink Week - Medium	\$227.29	
	Screen print T-shirts for Pink Week - Large	\$11.36	
	Embroidery on Golf Towels for Pink Week	\$124.41	
	Spike Head Embroidery on Golf Towels	\$73.95	
	Screen print T-shirts for Pink Week - Small	\$117.36	
	Screen print T-shirts for Pink Week - Medium	\$102.69	
	Screen print T-shirts for Pink Week - Large	\$132.04	
	Screen print T-shirts for Pink Week - XLarge	\$29.34	
	Screen print T-shirts for Pink Week - Medium	\$295.47	
	Screen print T-shirts for Pink Week - Large	\$45.46	
		\$1,204.83	FN 83002713
Sharaya Olmeda	Halloween Zine Workshop 10.31.2024	\$200.00	
		\$200.00	FN 83002714
Natalie Rucobo	FY25 Open PO for travel - LVC	\$33.90	
		\$33.90	FN 83002715
Tomas Sanchez	Chicano Arts Exhibit reception informal art talk	\$700.00	
		\$700.00	FN 83002716
Santa Maria Breakfast Rotary Club	FY25 Open PO Dr Walthers dues and membership fees	\$198.50	
	FY25 Open PO Dr Walthers college support	\$271.00	
		\$469.50	FN 83002717
The Guardian Life Insurance Company of America	FY25 Open PO Insurance - DEC 2024 PREMIUM	\$369.28	
		\$369.28	FN 83002718
AHC District	Foundation Scholarships	\$10,272.75	
		\$10,272.75	FN 83002719
	Student Emergency Aid-Feernando Gonzales Orozco	\$500.00	
	Scholarship Award- Itandehui Olea	\$1,250.00	
	Garden Mediterranean-Supv/Conf & Mgr Luncheon	\$121.97	
	Gina's Piece of Cake-Supv/Conf & Mgr Luncheon	\$122.60	
	Rotary Centennial Park rental Supv/Conf & Mgr Lnch	\$257.00	
	Student Emergency Aid-Georgina Ayala	\$600.00	
	Julian Reyes OT for Hancock Honors	\$117.44	
	Student Emergency aid-Reyna Morelos Garcia	\$500.00	
	WalMart-Police Swearing In Ceremony supplies	\$52.13	
	Albertson-Police Swearing In Ceremony food sppls	\$72.56	
	Costco-supplies for Dept. Mtg/Ceremony	\$357.62	
	Costco-PCPA Student Dinner on the Lawn	\$65.76	
	Student Emergency aid-Karol Aldana Mesa	\$500.00	
	Stephan, Hernandez, Reyes OT Chicano Fmly Art Day	\$699.81	

Allan Hancock College
Check Register
Check Dates from 11/1/2024 to 11/30/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
		\$5,216.89	FN 83002720
AHC Viticulture & Enology Foundation	Wine for outreach - Syrah	\$67.04	
	Wine for outreach - Malbec	\$67.04	
	Wine for outreach - Pinot	\$67.04	
	CA-CRV	\$1.29	
		\$202.41	FN 83002721
Randi Barros	Screening and film discussion of Yes	\$700.00	
		\$700.00	FN 83002722
Cal Poly State University	CSEA Chapter Scholarship	\$500.00	
	Ridley Foundation Scholarship	\$500.00	
		\$1,000.00	FN 83002723
Kim Ensing	Rmb Athl Roundtable Meals 9.30.24	\$1,456.06	
		\$1,456.06	FN 83002724
	Rmb Athl Roundtable Meals 10.28.24	\$1,406.45	
		\$1,406.45	FN 83002725
	FBALL Game 11/16/24 Staff Meals	\$437.10	
		\$437.10	FN 83002726
	Meals for Athletic Roundtable 11/18/24	\$857.94	
		\$857.94	FN 83002727
	RMB Staff Meals Fball Game 11/24/24	\$133.18	
		\$133.18	FN 83002728
Kayla George	RMB Pre-Game Meal FBALL 11/16/24	\$204.46	
		\$204.46	FN 83002729
Amalia Jimenez Chavez	RMB Dia de Los Muertos Event Materials 11/01/24	\$141.52	
		\$141.52	FN 83002730
La Tapatia Bakery	Dia de Los Muertos Event Catering 11/01/24	\$340.00	
		\$340.00	FN 83002731
Jenna Nichols	Deposit for 2025 Hancock Honors event services	\$7,000.00	
		\$7,000.00	FN 83002732
Taqueria La Coqueta	100 Churros for Dia de los Muertos 11/01/24	\$217.50	
		\$217.50	FN 83002733
The Rotary Club Of Santa Maria	FY25 Open PO B Curry dues and membership fees	\$49.00	
	FY25 Open PO B Curry dues and membership fees	\$100.00	
		\$149.00	FN 83002734
Leslie Torres	RMB Uber Ride 10/26/2024	\$68.95	
		\$68.95	FN 83002735
Uc Santa Barbara	"Golden Medley" Kay Riley Hood	\$2,500.00	
	Constance Boynton	\$650.00	

Allan Hancock College

Check Register

Check Dates from 11/1/2024 to 11/30/2024

Bank Code: FN

Vendor Name	Description	Amount	Check
		<u>\$3,150.00</u>	FN 83002736
		Total: \$46,606.19	

Allan Hancock College
Check Register
Check Dates from 12/1/2024 to 12/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
Erinn Artrip	11/26/24 RMB Postage Certified Mail	\$9.68	
		\$9.68	FN 83002737
Elan Financial Services	Festival Mozaic-student ticket	\$5.00	
	Festival Mozaic-student tickets	\$10.00	
	Testa Catering for Festival Mozaic reception	\$640.27	
	Planes of Fame Airfest sponsorship	\$2,500.00	
	Festival Mozaic-student tickets	\$30.00	
	CASE fundraising book	\$65.10	
	Festival Mozaic-student tickets	\$35.00	
	Festival Mozaic-student tickets	\$20.00	
	Festival Mozaic-student ticket	\$5.00	
	879 Conserv Fuel-Ice for Festival Mozaic	\$8.69	
	Ginas Piece of Cake-staff celebration	\$17.85	
	Trader Joes-staff celebration	\$10.86	
	Mariscos El Picosito-Board recruitment lunch	\$22.17	
	Mailchimp	\$19.50	
	Textmunication	\$125.00	
	Culligan Water	\$35.67	
	Nella Kitchen-Board recruitment lunch	\$122.36	
	Sees Candies-Holiday gifts for board and donors	\$1,349.49	
	Lowes-Festival Mozaic supplies for reception	\$38.00	
	Walmart-Festival Mozaic supplies for reception	\$3.07	
	Trader Joes-Festival Mozaic supplies for reception	\$22.80	
	The Swiss Restaurant-District business lunch	\$62.76	
	Jazz Alley-ACCT Conference dinner for attendees	\$351.00	
	Jazz Alley-ACCT Conference dinner for attendees	\$354.00	
	Cinque Terre Ristorante-ACCT Conference dinner	\$130.34	
	Shaws Steakhouse-District business dinner	\$65.00	
	Teds Montana Grill-HACU Conf. dinner for attendees	\$350.00	
	Venice Ristorante-HACU Conf. dinner for attendees	\$210.00	
	Costco-snacks for students post-election day	\$187.95	
	PCPA tickets for college guests	\$124.00	
		\$6,920.88	FN 83002738
Rotary Club Of Lompoc	FY25 Open PO C Farley dues and membership	\$35.00	
	FY25 Open PO C Farley dues and membership	\$325.00	
		\$360.00	FN 83002739
Rotary Club of Santa Maria South	FY25 Open PO E Artrip dues and membership fees	\$151.00	
		\$151.00	FN 83002740
Santa Maria Breakfast Rotary Club	FY25 Open PO Dr Walthers dues and membership fees	\$118.00	
		\$118.00	FN 83002741
Santa Maria Sun LLC	Giving Tuesday Advertisement 11/28/24	\$582.00	
		\$582.00	FN 83002742
Erinn Artrip	2024 Bonus	\$250.00	

Allan Hancock College
Check Register
Check Dates from 12/1/2024 to 12/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
		\$250.00	FN 83002743
Calif State Univ Fresno	Edwin O'Neil Scholarship	\$2,500.00	
		\$2,500.00	FN 83002744
Marisol Diaz	Bonus 2024	\$250.00	
		\$250.00	FN 83002745
Kim Ensing	RMB Staff Lunch Meeting 12.04.24	\$117.45	
		\$117.45	FN 83002746
	RMB Staff Lunch Meeting 12.02.24	\$214.97	
		\$214.97	FN 83002747
Jon Hooten	FY25 Open PO for travel	\$142.58	
		\$142.58	FN 83002748
Tracy McKee	Bonus 2024	\$250.00	
		\$250.00	FN 83002749
Office Depot	FY25 Open PO office supplies	\$84.24	
	FY25 Open PO office supplies	\$27.27	
		\$111.51	FN 83002750
Natalie Rucobo	Bonus 2024	\$250.00	
		\$250.00	FN 83002751
Sergio Ruiz	Photography services for Fdtn New Years card	\$550.00	
	Photography services for Alumni Gathering	\$350.00	
		\$900.00	FN 83002752
Jeremy Wirth	Mileage incurred for Foundation photo shoot	\$37.25	
		\$37.25	FN 83002753
AHC Campus Graphics	FY25 Open PO Fdtn printing	\$45.02	
	FY25 Open PO Fdtn printing	\$21.70	
		\$66.72	FN 83002754
AHC District	Foundation Scholarships	\$9,250.00	
		\$9,250.00	FN 83002755
Anthem Blue Cross	FY25 Open PO for health insurance	\$2,013.37	
		\$2,013.37	FN 83002756
Charles Schwab & Co. Inc.	Promise Endowment	\$11,032.00	
		\$11,032.00	FN 83002757
Pacific Coast Business Times	Whos Who in Non Profit advertisement	\$1,588.00	
		\$1,588.00	FN 83002758
The Guardian Life Insurance Company of America	FY25 Open PO dental, vision, life insurance	\$369.28	
		\$369.28	FN 83002759
The University of Oklahoma	F2024 Schol M Darby	\$500.00	
	F2024 Schol M Darby	\$1,000.00	
	F2024 Schol M Darby	\$500.00	

Allan Hancock College
Check Register
Check Dates from 12/1/2024 to 12/31/2024
Bank Code: FN

Vendor Name	Description	Amount	Check
		\$2,000.00	FN 83002760
VTC Enterprises	FY25 Impact Report mailing	\$1,058.75	
	Glueing, sealing, flat charge taxable	\$152.74	
		\$1,211.49	FN 83002761
Gilbert Archuletta	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002762
Molly Bell	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002763
Michael Garcia	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002764
Donna Kemp	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002765
Skylar Platt	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002766
Josephine Swanson	PCPA Performance for Rotary Club 12.19.24	\$100.00	
		\$100.00	FN 83002767
		Total: \$41,296.18	

Allan Hancock College
Check Register
Check Dates from 1/1/2025 to 1/31/2025
Bank Code: FN

Vendor Name	Description	Amount	Check
AHC District	Student Emerg Funds G A Mondragon	\$500.00	
	Student Emerg Funds L Gonzales	\$500.00	
	Student Emerg Funds M G Aviles	\$500.00	
	Dicks Sporting Goods-Gift Items for Trustee Hall	\$83.84	
	LisaBag-Gift Items for Trustee Hall	\$198.99	
	Trader Joes-Welcome basket for Craig Bach	\$51.43	
	Hilton Garden Inn-Retirement Dinner	\$150.00	
	HR Payroll Hernandez OT for Hancock Honors	\$286.85	
		\$2,271.11	FN 83002768
Architectural Foundation of Santa Barbara	SBCHS Architectural Design Competition donation	\$1,000.00	
		\$1,000.00	FN 83002769
Elan Financial Services	4Imprint-STEM Alumni event swag	\$959.97	
	Costco-STEM Alumni event beverages	\$30.61	
	BevMo-STEM Alumni event beverages	\$36.63	
	Nella Kitchen - Board recruitment lunch	\$71.26	
	SYV Pride Love All Ball sponsorship	\$1,000.00	
	Mailchimp	\$13.00	
	Textmunication	\$125.00	
	Trattoria Uliveto-Staff Appreciation dinner	\$147.12	
	Culligan Water	\$35.67	
	Ginas Piece of Cake-gifts	\$114.60	
	MOTM Conference - February 2025	\$1,264.00	
	USPS-stamps	\$262.80	
	Trader Joes-Board meeting snacks	\$16.45	
	AHC Bookstore-STEM Alumni event swag	\$60.63	
	Orcutt Bakery-Angel Tree celebration cookies	\$230.00	
	Jovis Delights-Angel Tree celebration cookies	\$393.05	
	GAO district business dinner during CCLC conf.	\$190.57	
	Hilton Garden Inn-Trustee Halls retirement dinner	\$483.78	
	PCPA tickets for AHC district guests	\$124.00	
	PCPA tickets for AHC district guests	\$262.00	
The Boys Restaurant-district business breakfast	\$47.00		
Golden Corral-Thanksgiving meals for students	\$800.00		
Trader Joes-gift cards for PCPA recognition	\$300.00		
		\$6,968.14	FN 83002770
Office Depot	FY25 Open PO office supplies	\$22.83	
	FY25 Open PO office supplies	\$25.00	
		\$47.83	FN 83002771
The Maker's Son LLC	Venue fee for annual board retreat	\$1,000.00	
	Food and beverages for board retreat	\$633.52	
	Server labor for board retreat	\$125.00	
		\$1,758.52	FN 83002772
AHC Campus Graphics	FY25 Open PO Fdtn printing	\$1,584.77	
	FY25 Open PO Fdtn printing	\$20.00	
	FY25 Open PO Fdtn printing	\$96.40	
	FY25 Open PO Fdtn printing	\$24.68	

Allan Hancock College
Check Register
Check Dates from 1/1/2025 to 1/31/2025
Bank Code: FN

Vendor Name	Description	Amount	Check
AHC Campus Graphics	FY25 Open PO Scholarship program	\$76.67	
	FY25 Open PO Fdtn printing	\$351.50	
	FY25 Open PO Scholarship program	\$72.93	
	FY25 Open PO Scholarship program	\$29.88	
	FY25 Open PO Fdtn printing	\$3,819.89	
		\$6,076.72	FN 83002773
Angie Dunn Consulting	FY25 Open PO for RE Consulting services	\$100.00	
		\$100.00	FN 83002774
Bay Valley Conference	Professional Development Recruiting Workshop	\$200.00	
		\$200.00	FN 83002775
Cal Poly State University	Fred & Jae Knolls Memorial	\$3,000.00	
		\$3,000.00	FN 83002776
	Pasquini Family	\$2,000.00	
		\$2,000.00	FN 83002777
Paul Dunn	Bagpipe performance for Fire Academy graduation	\$250.00	
		\$250.00	FN 83002778
Philip Hamer	Bagpipe performance for EMS graduation ceremony	\$200.00	
		\$200.00	FN 83002779
Jon Hooten	FY25 Open PO for travel	\$249.24	
		\$249.24	FN 83002780
PCPA	M Hancock Trust qtrly distributions	\$19,524.06	
		\$19,524.06	FN 83002781
Rotary Club Of Lompoc	FY25 Open PO C Farley dues and membership	\$288.00	
		\$288.00	FN 83002782
San Diego State University	Edwin O'Neil	\$2,500.00	
		\$2,500.00	FN 83002783
Santa Maria Breakfast Rotary Club	FY25 Open PO Dr Walthers dues and membership fees	\$75.00	
		\$75.00	FN 83002784
Testa Catering	Catering Day of Gratitude 3-8-25 DEPOSIT	\$1,476.75	
		\$1,476.75	FN 83002785
The Rotary Club Of Santa Maria	FY25 Open PO B Curry dues and membership fees	\$37.00	
		\$37.00	FN 83002786
The Shack of Lompoc, Inc.	Aneroid Sphygmomanometer-Sprague Rappaport kits	\$1,930.98	
	Scrub tops - Style A	\$517.35	
	Scrub tops - Style B	\$65.22	
	Scrub tops - Style C	\$125.01	
	Scrub pants - Style A	\$628.21	
	Scrub pants - Style B	\$43.48	
		\$3,310.25	FN 83002787

Allan Hancock College
Check Register
Check Dates from 1/1/2025 to 1/31/2025
Bank Code: FN

Vendor Name	Description	Amount	Check
University Of California - Davis	Ridley Foundation	\$1,000.00	
		\$1,000.00	FN 83002788
AHC District	Mailroom Chargeback Jul-Dec 2024	\$455.17	
		\$455.17	FN 83002789
Anthem Blue Cross	FY25 Open PO for health insurance	\$2,013.37	
		\$2,013.37	FN 83002790
Cal Poly State University	Ridley Foundation	\$500.00	
		\$500.00	FN 83002791
AHC - District Trust Fund	Transfer from Golf Trny fund to Baseball Trust	\$7,000.00	
		\$7,000.00	FN 83002792
AHC District	Orfelea Child Center Grant	\$12,549.27	
	JBAY Grant Student Support	\$2,500.00	
	Choir Concert OT E. Torres 11.24.24	\$98.30	
	Student Support L. De La Cruz	\$500.00	
		\$15,647.57	FN 83002793
Erinn Artrip	Per diem meal for MOTM conference	\$269.00	
		\$269.00	FN 83002794
Marisol Diaz	Per diem meal for MOTM conference	\$269.00	
		\$269.00	FN 83002795
Elan Financial Services	Renaes Bouquet-flowers for donor	\$109.59	
	Urbane Cafe-business lunch	\$34.83	
	The Makers Son-deposit for annual Board retreat	\$1,758.53	
	USPS - stamps	\$73.00	
	Wayfinding- PD webinar for Jon	\$888.00	
	Mailchimp	\$13.00	
	Textmunication	\$125.00	
	Culligan Water	\$43.67	
	USPS- mailing annual raffle report	\$9.68	
	SM South Rotary-Human Trafficking Awareness Forum	\$28.52	
	Veggie Rescue sponsorship	\$1,000.00	
	Amazon-office supplies	\$74.47	
	Office Depot-office supplies	\$8.43	
	Straw Hat-holiday staff lunch on campus	\$437.93	
	Late fee	\$35.00	
	Interest charge	\$137.17	
		\$4,776.82	FN 83002796
Jon Hooten	Per diem meal for MOTM conference	\$210.00	
		\$210.00	FN 83002797
Rotary Club of Santa Maria South	FY25 Open PO E Artrip dues and membership fees	\$54.00	
		\$54.00	FN 83002798
Natalie Rucobo	Per diem meal for MOTM conference	\$269.00	

Allan Hancock College
Check Register
 Check Dates from 1/1/2025 to 1/31/2025
 Bank Code: FN

Vendor Name	Description	Amount	Check
		\$269.00	FN 83002799
The Guardian Life Insurance Company of America	FY25 Open PO dental, vision, life insurance	\$369.28	
		\$369.28	FN 83002800
		Total: \$84,165.83	

Allan Hancock College Foundation
Contributions
July 1, 2024 through June 30, 2025

Account	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
General Operations	\$ 6,508	\$ 70	\$ 25	\$ 6,543	\$ 35	\$ 6,578	\$ 35						\$ 19,794
Other Local Income	\$ -	\$ 1,201	\$ 30	\$ 3,207	\$ 1,104	\$ 1,929	\$ -						\$ 7,471
President's Circle Campaign	\$ 1,031	\$ 3,491	\$ 8,560	\$ 11,813	\$ 8,658	\$ 55,822	\$ 15,122						\$ 104,497
Restricted	\$ 23,861	\$ 7,575	\$ 3,025	\$ 430	\$ 1,815	\$ 23,515	\$ 9,160						\$ 69,381
Scholarships	\$ 32,404	\$ 32,641	\$ 32,626	\$ 42,920	\$ 29,758	\$ 111,464	\$ 35,481						\$ 317,293
Hancock Honors	\$ 166,175	\$ 31,125	\$ 22,317	\$ 33,285	\$ 28,285	\$ 1,035	\$ 835						\$ 283,057
Hancock Promise	\$ 3,512	\$ 4,268	\$ 5,209	\$ 20,749	\$ 249	\$ 10,807	\$ 149						\$ 44,943
Title V - Hancock Promise	\$ -	\$ -	\$ -	\$ 50,000	\$ -	\$ -	\$ -						\$ 50,000
Endowments	\$ 10,000	\$ 200	\$ 50	\$ 100	\$ -	\$ 72,661	\$ -						\$ 83,011
MONTHLY TOTALS	\$ 243,491	\$ 80,570	\$ 71,842	\$ 169,048	\$ 69,904	\$ 283,810	\$ 60,782	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 979,448
CURRENT YTD TOTALS	\$ 243,491	\$ 324,061	\$ 395,903	\$ 564,951	\$ 634,855	\$ 918,666	\$ 979,448	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 979,448

PRIOR YEARS CONTRIBUTIONS
 July 2023 - June 2024 2,898,514

July 2022 - June 2023 1,186,168

July 2021 - June 2022 1,754,527

July 2020 - June 2021 1,912,505

July 2019 - June 2020 3,661,328

July 2018 - June 2019 1,646,016

July 2017 - June 2018 2,547,577

July 2016 - June 2017 1,167,156

July 2015 - June 2016 1,766,065

July 2014 - June 2015 1,354,736

July 2013 - June 2014 4,230,595

July 2012 - June 2013 11,662,226

July 2011 - June 2012 774,867

July 2010 - June 2011 907,673

July 2009 - June 2010 941,725

NOTES:
 a) Report does not include investment portfolio activity.

Final Title V-Hancock Promise \$50,000.00 installment was invoiced October 2024 - Rec'd Nov 2024

**ALLAN HANCOCK COLLEGE FOUNDATION
STATEMENT OF OPERATIONS
FOR THE PERIOD ENDING 01/31/2025**

	Cash Admin	General Operations	Restricted	Scholar- ships	Endowment Principal	Endowment Rev/Exp	Total
REVENUES:							
Contributions, Gifts, Grants & Endwmnts	0	120,508	391,733	317,293	133,011	0	962,545
Non Cash Contribution	0	0	9,432	0	0	0	9,432
Interest and Investment Income	0	27,250	0	0	0	535,709	562,959
Realized Gain/Loss on Invest	0	4,181	0	0	0	419,326	423,507
Unrealized Gain/Loss on Invest	0	13,493	0	0	0	510,238	523,730
Other Local Revenues	0	1,201	2,720	3,550	0	0	7,471
Total Revenues	0	166,633	403,885	320,843	133,011	1,465,273	2,489,644
EXPENSES:							
Non Bargaining Unit	0	174,702	0	0	0	0	174,702
Benefits	0	39,997	0	0	0	0	39,997
Instructional Printing	0	0	1,517	0	0	0	1,517
Public Relations/Recognitions	0	1,756	13	0	0	0	1,769
Office/Operational Supplies	0	1,904	10,829	0	0	0	12,733
Non Instr Printing	0	6,199	1,606	0	0	0	7,805
Food - Business Meetings/Events	0	9,184	48,288	0	0	0	57,473
In-Kind Food Supplies	0	0	185	0	0	0	185
Indep Contractor (Individuals)	0	11,956	37,328	0	0	0	49,284
Service Contracts (Businesses)	0	6,038	37,675	0	0	0	43,713
In-Kind Service Contracts (Busnss)	0	0	3,302	0	0	0	3,302
Travel - All Travel Costs	0	3,883	556	0	0	0	4,439
In-Kind Travel Expense	0	0	946	0	0	0	946
On-Site-Prof. Develop/Webinars	0	888	200	0	0	0	1,088
Foundation Community Activities	0	18,148	0	0	0	0	18,148
Dues & Memberships	0	4,793	294	0	0	0	5,087
Non-Tech Licenses, Permits, Fees	0	74	1,492	0	0	0	1,566
Software License/Subscription Agrmt	0	29,767	0	0	0	0	29,767
Insurance	0	0	190	0	0	0	190
Equipment Rental	0	0	2,524	0	0	0	2,524
District/College Support	0	21,228	39,951	0	0	0	61,178
Postage/Express Services	0	2,028	566	0	0	0	2,594
Advertising/Sponsorships	0	3,575	39	0	0	0	3,614
In-Kind Advertising	0	0	5,000	0	0	0	5,000
Bank Service Charges	0	872	378	0	0	0	1,249
Investment Brokerage Fees	0	1,888	0	0	0	103,860	105,749
Cash Over and Short	0	0	0	0	0	0	0
PCPA Support	0	0	0	58,572	0	0	58,572
Equipment	0	631	9,176	0	0	0	9,807
Student Assistance	0	0	6,991	0	0	0	6,991
Scholarships	0	4,922	3,500	544,677	0	0	553,098
Total Expenses	0	344,432	212,545	603,249	0	103,860	1,264,086
Net Income (Loss)	0	(177,799)	191,340	(282,405)	133,011	1,361,412	1,225,558
OTHER FINANCING SOURCES/OUTGO:							
Intrafund Transfer-In	0	84,538	226,029	282,174	41,737	0	634,478
Intrafund Transfers-Out	0	19	51,223	2,000	0	581,236	634,478
Other Transfer-In	0	297,554	0	0	0	0	297,554
Net Transfers	0	382,073	174,807	280,174	41,737	(581,236)	297,554
Net Inc/Dec in Fund Bal	0	204,274	366,146	(2,231)	174,748	780,176	1,523,112
FUND BALANCE:							
Fund Equity, July 1	0	735,205	1,662,110	836,488	17,531,279	4,617,775	25,382,858
Current Balance	0	939,479	2,028,257	834,256	17,706,026	5,397,951	26,905,970

**ALLAN HANCOCK COLLEGE FOUNDATION
STATEMENT OF FINANCIAL POSITION
FOR THE PERIOD ENDING 01/31/2025**

	Cash Admin	General Operations	Restricted	Scholar- ships	Endowment Principal	Endowment Rev/Exp	Total
ASSETS:							
Claim on Cash	(12,295,250)	950,565	1,713,054	830,900	3,402,781	5,397,951	0
AHC Fdtn Mechanics Bank Checking	383,530	0	0	0	0	0	383,530
AHC Fdtn MS Active Assets MM	341,466	0	0	0	0	0	341,466
Petty Cash	0	300	0	0	0	0	300
MS Select UMA Boyd 3740 Inv Cash	0	0	0	0	123,463	0	123,463
MS Select UMA Unrestr 2948 Inv Cash	43,324	0	0	0	0	0	43,324
Monarch With Strategies Pooled Cash	21,229	0	0	0	0	0	21,229
Monarch With Strategies Lahr Cash	0	0	0	0	523	0	523
Monarch With Strtgs HP 3588 Cash	0	0	0	0	5,663	0	5,663
Monarch With Strtgs Young 0897 Cash	0	0	0	0	12,635	0	12,635
MS Select UMA Pooled 1441 Inv Cash	273,103	0	0	0	0	0	273,103
MorgStnly Title V HSI HP 8826 Cash	0	0	0	0	6,008	0	6,008
Accounts Receivable	0	0	21,000	44,000	0	0	65,000
Pledge Receivable - Current	0	0	103,200	0	0	0	103,200
Pledge Receivable - Non Current	0	0	202,800	0	0	0	202,800
Discount on Pledge Receivable	0	0	(11,967)	0	0	0	(11,967)
Due From Other Funds	0	8,406	700	0	0	0	9,106
MS Select UMA Boyd 3740 Inv Cost	0	0	0	0	2,267,895	0	2,267,895
MS Select UMA Unrestr 2948 Inv Cost	424,581	0	0	0	0	0	424,581
Monarch With Strategies Pooled Cost	2,188,421	0	0	0	0	0	2,188,421
Monarch With Strategies Lahr Cost	0	0	0	0	61,491	0	61,491
Monarch With Strtgs HP 3588 Cost	0	0	0	0	9,069,183	0	9,069,183
Monarch With Strtgs Young 0897 Cost	0	0	0	0	1,292,916	0	1,292,916
MS Select UMA Pooled 1441 Inv Cost	6,675,855	0	0	0	0	0	6,675,855
Interest in CA Comm Colleges Cost	0	0	0	0	164,132	0	164,132
MorgStnly Title V HSI HP 8826 Cost	0	0	0	0	520,620	0	520,620
MS Select UMA Boyd 3740 Inv FMV Adj	0	0	0	0	564,344	0	564,344
MS Select UMA Unrestr 2948 FMV Adj	93,881	0	0	0	0	0	93,881
Monarch With Strtgs Pooled FMV Adj	175,880	0	0	0	0	0	175,880
Monarch With Strtgs Lahr FMV Adj	0	0	0	0	4,572	0	4,572
Monarch With Strtgs HP 3588 FMV Adj	0	0	0	0	113,243	0	113,243
Monarch With Str Young 0897 FMV Adj	0	0	0	0	58,809	0	58,809
MS Select UMA Pooled 1441 FMV Adj	1,673,979	0	0	0	0	0	1,673,979
MrgStnly Title V HSI HP 8826 FMV Adj	0	0	0	0	37,749	0	37,749
Total Assets	0	959,271	2,028,787	874,900	17,706,026	5,397,951	26,966,934
LIABILITIES:							
Sales Tax Payable	0	908	0	0	0	0	908
Due To/From Interchart Scholarshi	0	0	0	40,643	0	0	40,643
Total Liabilities	0	908	0	40,643	0	0	41,551
FUND BALANCE:							
Fund Equity FYB	0	735,205	1,662,110	836,488	17,531,279	4,617,775	25,382,858
Current Income/Loss	0	204,274	366,146	(2,231)	174,748	780,176	1,523,112
Total Fund Balance	0	939,479	2,028,256	834,257	17,706,027	5,397,951	26,905,970
Total Liabilities & Fund Balance	0	940,387	2,028,256	874,900	17,706,027	5,397,951	26,947,521

Query View Budget Status by Account
 Fiscal period start date 07/01/2024
 Fiscal period end date 06/30/2025
 As of Date 01/31/2025
 Currency USD

Query Parameters
 Chart of Accounts 3 Allan Hancock College Foundn
 Fund 831001 Fdtn General Operations
 Organization AFN AHC Foundation
 Account All
 Program 709001 AHC Foundation

Account	Account Title	Adopted Budget	Adjusted Budget	Year to Date	Available Balance
Expenses					
214000	Non Bargaining Unit	296,007	296,007	174,702	121,305
332000	Classified Non Instr FICA-Soc Scrt'y	18,352	18,352	10,832	7,520
336000	Classified Non-Instr FICA-Medicare	4,292	4,292	2,533	1,759
342000	Classified Non Instr Health & Wifr	36,240	35,461	16,740	18,721
352000	Classified Non-Instr SUl	1,736	1,736	71	1,665
352500	Classified ETT-Foundation	28	28	25	3
362000	Classified Non Instr Workers Comp	2,368	2,368	1,869	499
395100	Employer Matching of TSA	35,521	26,217	7,928	18,289
451500	Public Relations/Recognitions	1,500	1,756	1,756	0
452000	Office/Operational Supplies	5,000	5,000	1,493	3,507
454000	Non Instr Printing	10,000	9,222	6,199	3,022
471000	Food - Business Meetings/Events	6,000	11,310	3,174	8,136
511000	Indep Contractor (Individuals)	500	850	650	200
511200	Service Contracts (Businesses)	4,500	6,950	6,038	912
521000	Travel - All Travel Costs	7,800	9,542	3,883	5,659
522000	On-Site-Prof. Develop/Webinars	0	1,183	888	295
522400	Foundation Community Activities	15,000	24,258	17,258	7,000
531000	Dues & Memberships	3,053	3,690	3,315	375
532000	Non-Tech Licenses,Permits,Fees	2,000	1,000	74	926
532200	Software License/Subscription Agrmt	28,000	29,767	29,767	0
587000	Postage/Express Services	5,000	2,709	2,028	681
588000	Advertising/Sponsorships	7,500	4,700	3,575	1,125
589200	Bank Service Charges	1,000	1,000	416	584
594000	Cash Over and Short	0	0	0	0
641000	Equipment	1,000	1,000	631	369
721500	Intrafund Transfers-Out	45,000	39,000	0	39,000
Revenue					
882000	Contributions,Gifts,Grants&Endwmnts	65,000	65,000	19,794	45,206
886000	Interest and Investment Income	0	0	10,392	-10,392
889000	Other Local Revenues	100	100	1,201	-1,101
898200	Intrafund Transfer-In	123,000	123,000	84,538	38,462
898300	Other Transfer-In	349,297	349,297	297,554	51,743
Revenue Total		537,397	537,397	413,480	123,917
Expenditure Total		537,397	537,397	295,843	241,554
Report Total (of all records)		0	0	117,637	-117,637

<u>Intra Fund Transfers-Out</u>	<u>Budget</u>	<u>Actual</u>
Scholarship Banquet	45,000	0
	<u>45,000</u>	<u>0</u>
 <u>Intra Fund Transfers-In</u>		
Administration Fee @ 1.5%	118,000	79,065
Hancock Promise Gift Fee @ 1.5%	0	473
Unrestricted End. Proceeds-Madson	5,000	5,000
Unrestricted Endowment	0	0
Other Transfer-In (District support)	108,735	56,992
Other Transfer-In (District support)	<u>240,562</u>	<u>240,562</u>
	<u>472,297</u>	<u>382,092</u>

To: Finance Committee	ACTION
From: Jon Hooten Executive Director, College Advancement	March 12, 2025
Subject: Approval of 2025-2026 Proposed Operating and All Fund Budgets	

BACKGROUND

Each year the Finance Committee reviews and approves the Foundation’s operating budget for the upcoming fiscal year. The proposed 2025-2026 Operating Budget is being presented for review and consideration by the Finance Committee. The proposed budget includes a 3% COLA for staff salaries.

RECOMMENDATION

Staff recommends approval of the fiscal year 2025-2026 *Foundation Operating Budget* as submitted to the Finance Committee which will be forwarded to the Executive Committee and the board for approval.

**Allan Hancock College Foundation
All Foundation Funds
Proposed Operating Budget and Budget for District**

July 1, 2025 - June 30, 2026

	Account Title	FY25 Gen Opr Budget	FY25 Rest. Sch. & End.	Approved FY25 Total Budget	Proposed FY26 Gen Opr	Proposed FY26 Unrestr. Rest. Sch. & End.	FY26 Proposed Total Budget
	EXPENDITURES						
	Non Bargaining Unit	\$ 296,007	\$ -	\$ 296,007	\$ 374,338	\$ -	\$ 374,338
	Classified Non Instr FICA-SocScty	\$ 18,352	\$ -	\$ 18,352	\$ 23,209	\$ -	\$ 23,209
	Classified Non-Instr FICA-Medi	\$ 4,292	\$ -	\$ 4,292	\$ 5,428	\$ -	\$ 5,428
(*1)	Classified Non Instr Health & Wlfr	\$ 36,240	\$ -	\$ 36,240	\$ 48,000	\$ -	\$ 48,000
	Classified Non-Instr SUI	\$ 1,736	\$ -	\$ 1,736	\$ 2,170	\$ -	\$ 2,170
	Classified ETT-Foundation	\$ 28	\$ -	\$ 28	\$ 35	\$ -	\$ 35
	Classified Non Instr Workers Comp	\$ 2,368	\$ -	\$ 2,368	\$ 2,995	\$ -	\$ 2,995
(*2)	Employer Matching of TSA	\$ 35,521	\$ -	\$ 35,521	\$ 44,921	\$ -	\$ 44,921
	Public Relations/Recognitions	\$ 1,500	\$ -	\$ 1,500	\$ 2,000	\$ 400	\$ 2,400
	Office/Operational Supplies	\$ 5,000	\$ 35,000	\$ 40,000	\$ 5,000	\$ 35,000	\$ 40,000
	Non Instr Printing	\$ 10,000	\$ 20,000	\$ 30,000	\$ 10,000	\$ 7,500	\$ 17,500
	Food - Business Meetings/Events	\$ 6,000	\$ 96,000	\$ 102,000	\$ 7,000	\$ 110,000	\$ 117,000
	Indep Contractor (Individuals)	\$ 500	\$ 40,000	\$ 40,500	\$ 1,000	\$ 65,000	\$ 66,000
	Service Contracts (Businesses)	\$ 4,500	\$ 30,000	\$ 34,500	\$ 9,900	\$ 55,000	\$ 64,900
	Travel - All Travel Costs	\$ 7,800	\$ -	\$ 7,800	\$ 8,000	\$ 4,000	\$ 12,000
	On-Site Prof Develop/Webinars	\$ -	\$ -	\$ -	\$ 1,000	\$ 500	\$ 1,500
	Foundation Community Activities	\$ 15,000	\$ -	\$ 15,000	\$ 20,000	\$ -	\$ 20,000
	Dues & Memberships	\$ 3,053	\$ 7,000	\$ 10,053	\$ 5,500	\$ 6,000	\$ 11,500
	Non-Tech Licenses, Permits, Fees	\$ 2,000	\$ 5,000	\$ 7,000	\$ 2,000	\$ 2,200	\$ 4,200
	Software/Technology Licenses	\$ 28,000	\$ -	\$ 28,000	\$ 38,570	\$ 5,336	\$ 43,906
	Equipment Rental	\$ -	\$ 28,000	\$ 28,000	\$ -	\$ 10,000	\$ 10,000
	District/College Support	\$ -	\$ 345,000	\$ 345,000	\$ -	\$ 450,000	\$ 450,000
	Postage/Express Services	\$ 5,000	\$ 200	\$ 5,200	\$ 4,000	\$ 1,000	\$ 5,000
	Advertising	\$ 7,500	\$ -	\$ 7,500	\$ 6,500	\$ -	\$ 6,500
	Bank Service Charges	\$ 1,000	\$ 500	\$ 1,500	\$ 1,000	\$ 900	\$ 1,900
	PCPA/PCPA Fdtn. Support	\$ -	\$ 80,000	\$ 80,000	\$ -	\$ 90,000	\$ 90,000
	Equipment	\$ 1,000	\$ -	\$ 1,000	\$ 1,000	\$ 10,000	\$ 11,000
	Student Assistance	\$ -	\$ 34,500	\$ 34,500	\$ -	\$ 31,400	\$ 31,400
	Scholarship	\$ -	\$ 600,000	\$ 600,000	\$ -	\$ 600,000	\$ 600,000
(*3)	Intrafund Transfers-Out	\$ 45,000	\$ 1,800,000	\$ 1,845,000	\$ 40,000	\$ 2,200,000	\$ 2,240,000
	REVENUES						
	Contributions, Gifts, Grants & End.	\$ 65,000	\$ 1,421,200	\$ 1,486,200	\$ 30,000	\$ 1,584,236	\$ 1,614,236
	Other Local Revenues	\$ 100	\$ -	\$ 100	\$ 1,271	\$ -	\$ 1,271
	Intrafund Transfer-In	\$ 123,000	\$ 1,700,000	\$ 1,823,000	\$ 280,000	\$ 2,100,000	\$ 2,380,000
(*4)	Other Transfer-In	\$ 108,735	\$ -	\$ 108,735	\$ 111,733	\$ -	\$ 111,733
(*5)	Other Transfer-In	\$ 240,562	\$ -	\$ 240,562	\$ 240,562	\$ -	\$ 240,562
	Revenue Total	\$ 537,397	\$ 3,121,200	\$ 3,658,597	\$ 663,566	\$ 3,684,236	\$ 4,347,802
	Expenditure Total	\$ 537,397	\$ 3,121,200	\$ 3,658,597	\$ 663,566	\$ 3,684,236	\$ 4,347,802
	Report Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

	General Operations Approved FY25 Intrafund Transfers-In	General Operations Proposed FY26 Intrafund Transfers-In
<i>(*1) Maximum budgeted benefits with 10% increase</i>	Administration Fee @ 1.5% \$ 118,000	Administration Fee @ 1.5% \$ 130,000
<i>(*2) Maximum budgeted at 12% of salaries</i>	Unrestricted End. Proceeds-Madson \$ 5,000	Unrestricted End. Proceeds-Madson \$ 5,000
<i>(*3) Scholarship reception support</i>	Unrestricted Endowment \$ -	Unrestr PCC Contributions \$ 50,000
<i>(*4) Advancement Officer payroll</i>	Other Transfer-In (District support) \$ 108,735	Unrestr Hancock Honors \$ 95,000
<i>(*5) District support for salaries/benefits</i>	Other Transfer-In (District support) \$ 240,562	Unrestricted Endowment \$ -
	\$ 472,297	Other Transfer-In (District support) \$ 111,733
		\$ 240,562
		\$ 632,295

To: Finance Committee	ACTION
From: Jon Hooten, Executive Director AHC Foundation	March 12, 2025
Subject: Auditor's 2023-2024 IRS Form 990 Report	

BACKGROUND

As a part of the foundation's annual audit, representatives from CWDL, Certified Public Accountants, prepare the Internal Revenue Service's Form 990. The firm has provided the foundation with the filed *Form 990 – Return of Organization Exempt from Income Tax* form for the committee's review and approval. The form will be included as a PDF packet emailed to the committee. A hardcopy will not be included in the mailed packet.

RECOMMENDATION

Staff recommend approval of the IRS Form 990 as submitted. Upon approval, the IRS Form 990 will be forwarded to the Executive Committee and the board for review and approval.

Return of Organization Exempt From Income Tax

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

2023

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/Form990 for instructions and the latest information.

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning 7/01, 2023, and ending 6/30, 2024

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C ALLAN HANCOCK COLLEGE FOUNDATION 800 S COLLEGE DR. SANTA MARIA, CA 93454	D Employer identification number 95-3143396	E Telephone number 8059226966
F Name and address of principal officer: DENNIS CURRAN SAME AS C ABOVE		G Gross receipts \$ <u>11,307,589.</u>	

I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.
--	--

J Website: <u>WWW.AHCFOUNDATI.ON.ORG</u>	H(c) Group exemption number
---	------------------------------------

K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation: <u>1977</u>	M State of legal domicile: <u>CA</u>
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Part I Summary

1 Briefly describe the organization's mission or most significant activities: FOR ADVANCEMENT OF EDUCATION BY RAISING FUNDS AND BUILDING COMMUNITY SUPPORT TO MEET THE NEEDS OF THE COLLEGE IN THE AREAS OF SCHOLARSHIPS, CAPITAL/INFRASTRUCTURE PROJECTS, AND PROGRAM SUPPORT.

2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	4
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,065,152.	2,549,957.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	362,452.	2,156,935.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	405,412.	497,933.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,833,016.	5,204,825.

		Prior Year	Current Year
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	965,292.	1,255,322.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	298,091.	337,318.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25)		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	244,231.	230,975.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,507,614.	1,823,615.
19	Revenue less expenses. Subtract line 18 from line 12	325,402.	3,381,210.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	22,037,332.	25,689,135.
21	Total liabilities (Part X, line 26)	211,366.	306,280.
22	Net assets or fund balances. Subtract line 21 from line 20	21,825,966.	25,382,855.

Part II Signature Block

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

Sign Here	Signature of officer <u>DENNIS CURRAN</u>	Date	
	Type or print name and title <u>ASSOC SUPERINTENDENT</u>		
Paid Preparer Use Only	Print/Type preparer's name <u>JOHN DOMINGUEZ, CPA</u>	Preparer's signature <u>JOHN DOMINGUEZ, CPA</u>	Date
	Firm's name <u>CWDL, CPAS</u>	Firm's EIN <u>90-0916070</u>	Check <input type="checkbox"/> if self-employed <input type="checkbox"/> PTIN <u>P01955973</u>
	Firm's address <u>3131 CAMINO DEL RIO NORTH, STE 820 SAN DIEGO, CA 92108</u>	Phone no. <u>(858) 565-2700</u>	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO OPERATE FOR THE ADVANCEMENT OF EDUCATION BY RAISING FUNDS AND BUILDING COMMUNITY SUPPORT TO MEET THE NEEDS OF THE COLLEGE IN THE AREAS OF SCHOLARSHIPS, CAPITAL/INFRASTRUCTURE PROJECTS, AND PROGRAM SUPPORT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

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

4a (Code:) (Expenses \$ 971,040. including grants of \$ 656,644.) (Revenue \$)

CAMPUS WIDE EDUCATIONAL PROGRAMS: CAMPUS GROUPS ARE PROVIDED FINANCIAL SUPPORT AND SUPPORT SERVICES FOR THE STUDENTS OF THE COLLEGE DISTRICT, IN AGREEMENT WITH THE COLLEGE CURRICULUM.

4b (Code:) (Expenses \$ 598,172. including grants of \$) (Revenue \$)

SCHOLARSHIPS AWARDED TO ALLAN HANCOCK COLLEGE STUDENTS.

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

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

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

4e Total program service expenses 1,569,212.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1a	27		
b	Enter the number of voting members included on line 1a, above, who are independent.		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 KELI SEYFERT 800 S COLLEGE DRIVE SANTA MARIA CA 93454 805-922-6966

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KEVIN G. WALTHERS, PH. D. PRESIDENT	1 40	X		X				0.	293,159.	146,734.
(2) DENNIS CURRAN VICE PRESIDENT	1 40	X		X				0.	205,301.	64,832.
(3) JON HOOTEN, PH. D. EXECUTIVE DIR.	1 40	X						0.	152,345.	109,438.
(4) NICHOLE DECHAI NE, DMA FACULTY REP	1 40	X						0.	108,853.	54,130.
(5) JEFFERY C. HALL COLLEGE TRUSTEE	1 1	X						0.	3,100.	288.
(6) GREGORY A. PENSA COLLEGE TRUSTEE	1 1	X						0.	1,582.	288.
(7) SAMANTHA MARTINEZ STUDENT REP	1 20	X						0.	842.	0.
(8) JUDITH E. DALE PRESIDENT	1 0	X						0.	0.	0.
(9) DEBRA HOOD VICE PRESIDENT	1 0	X		X				0.	0.	0.
(10) JUDY FROST DIRECTOR	1 0	X						0.	0.	0.
(11) MICHAEL J. CARROLL DIRECTOR	1 0	X						0.	0.	0.
(12) MAGGI DAANE PAST PRESIDENT	1 0	X						0.	0.	0.
(13) NAI SHADH BUCH DIRECTOR	1 0	X						0.	0.	0.
(14) JAMES E. FIELDS DIRECTOR	1 0	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) PAUL COOK DI RECTOR	1 0	X					0.	0.	0.	
(16) TIM HARRINGTON SECRETARY	1 0	X					0.	0.	0.	
(17) CHRISTINA HERNANDEZ DI RECTOR	1 0	X					0.	0.	0.	
(18) ERICA JANE FLORES DI RECTOR	1 0	X					0.	0.	0.	
(19) GEORGE GRAMA DI RECTOR	1 0	X					0.	0.	0.	
(20) MARIO JUAREZ, ESQ. DI RECTOR	1 0	X					0.	0.	0.	
(21) ROBERT B. KLUG PAST DI RECTOR	1 0	X					0.	0.	0.	
(22) LEE-VOLKER COX DI RECTOR	1 0	X					0.	0.	0.	
(23) MICHAEL L GIBSON TREASURER	1 0	X					0.	0.	0.	
(24) LARRY LAHR DI RECTOR	1 0	X					0.	0.	0.	
(25) GLORIA SOTO DI RECTOR	1 0	X					0.	0.	0.	
1b Subtotal							0.	765, 182.	375, 710.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							0.	765, 182.	375, 710.	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0										

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Department of the Treasury
Internal Revenue Service

Name of the Organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer Identification number 95-3143396
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Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SAM OROZCO DI RECTOR	1 0	X						0.	0.	0.
(2) JEN JARROTT DI RECTOR	1 0	X						0.	0.	0.
(3) SUSAN APPEL DI RECTOR	1 0	X						0.	0.	0.
(4) -----										
(5) -----										
(6) -----										
(7) -----										
(8) -----										
(9) -----										
(10) -----										
(11) -----										
(12) -----										
(13) -----										
(14) -----										
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns					
	1b	Membership dues					
	1c	Fundraising events					
	1d	Related organizations					
	1e	Government grants (contributions)					
	1f	All other contributions, gifts, grants, and similar amounts not included above	2,549,957.				
	1g	Noncash contributions included in lines 1a-1f	13,857.				
	h	Total. Add lines 1a-1f		2,549,957.			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Miscellaneous Revenue	3		406,548.	406,548.			
	4						
	5						
	6a	Gross rents	(i) Real				
			(ii) Personal				
	6b	Less: rental expenses					
	6c	Rental income or (loss)					
	d		Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	7,680,066.			
			(ii) Other				
	7b	Less: cost or other basis and sales expenses	5,929,679.				
	7c	Gain or (loss)	1,750,387.				
d		Net gain or (loss)	1,750,387.	1,750,387.			
Other Revenue	8a						
	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		348,557.				
	8b	Less: direct expenses	173,085.				
	c		Net income or (loss) from fundraising events	175,472.			
	9a						
	Gross income from gaming activities. See Part IV, line 19						
9b	Less: direct expenses						
c		Net income or (loss) from gaming activities					
10a							
Gross sales of inventory, less returns and allowances							
10b	Less: cost of goods sold						
c		Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11a		Business Code				
	TRANSFERS-IN		900099	322,461.		322,461.	
	b OTHER INCOME		900099				
	c						
	d All other revenue						
e		Total. Add lines 11a-11d	322,461.				
12		Total revenue. See instructions	5,204,825.	2,156,935.	0.	322,461.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	655,151.	655,151.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	600,171.	600,171.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	0.	0.	0.	0.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	282,269.	149,950.	132,319.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	55,049.	16,989.	38,060.	
10 Payroll taxes.				
11 Fees for services (nonemployees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	58,004.	51,816.	6,188.	
12 Advertising and promotion.	4,180.		4,180.	
13 Office expenses.	94,786.	75,594.	19,192.	
14 Information technology.				
15 Royalties.				
16 Occupancy.				
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	25,724.	8,965.	16,759.	
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.				
23 Insurance.				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP AND PERMITS	38,633.	7,499.	31,134.	
b BUILDING AND EQUIPMENT	6,917.	2,775.	4,142.	
c POSTAGE AND SHIPPING	1,588.		1,588.	
d BANK CHARGES	1,143.	302.	841.	
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	1,823,615.	1,569,212.	254,403.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	338,549.	1	397,004.
	2 Savings and temporary cash investments	62,437.	2	303,225.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	343.	4	2,244.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	47,661.	9	66,576.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	21,581,414.	12	24,902,749.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	6,928.	15	17,337.
16 Total assets. Add lines 1 through 15 (must equal line 33)	22,037,332.	16	25,689,135.	
Liabilities	17 Accounts payable and accrued expenses	2,707.	17	37,293.
	18 Grants payable	136,259.	18	126,287.
	19 Deferred revenue	72,400.	19	142,700.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	211,366.	26	306,280.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/>			
	27 Net assets without donor restrictions	2,416,270.	27	2,584,336.
	28 Net assets with donor restrictions	19,409,696.	28	22,798,519.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances.	21,825,966.	32	25,382,855.
33 Total liabilities and net assets/fund balances.	22,037,332.	33	25,689,135.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,204,825.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,823,615.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,381,210.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,825,966.
5	Net unrealized gains (losses) on investments	5	175,679.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	25,382,855.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3.						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10.						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)).	14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14.	15	%
16a 33-1/3% support test 2023. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 33-1/3% support test 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
17a 10%-facts-and-circumstances test 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,630,550.	1,913,890.	1,755,426.	1,188,176.	2,898,514.	11,386,556.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 Total. Add lines 1 through 5	3,630,550.	1,913,890.	1,755,426.	1,188,176.	2,898,514.	11,386,556.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support. (Subtract line 7c from line 6.)						11,386,556.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	3,630,550.	1,913,890.	1,755,426.	1,188,176.	2,898,514.	11,386,556.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	651,733.	483,467.	544,712.	300,310.	406,548.	2,386,770.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	651,733.	483,467.	544,712.	300,310.	406,548.	2,386,770.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0.
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI	258,511.	196,240.	201,689.	317,680.	322,461.	1,296,581.
13 Total support. (Add lines 9, 10c, 11, and 12.)	4,540,794.	2,593,597.	2,501,827.	1,806,166.	3,627,523.	15,069,907.
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	75.56 %
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	73.80 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	15.84 %
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	19.03 %

- 19a **33-1/3% support tests' 2023.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b **33-1/3% support tests' 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

Section C ' Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

BAA

Schedule A (Form 990) 2023

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

Section D' Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required * provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E' Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required * explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

BAA

Schedule A (Form 990) 2023

Part VI

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

PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE	2023	2022	2021	2020	2019
OTHER TRANSFERS IN	\$ 322,461.	\$ 317,680.	\$ 201,689.	\$ 196,240.	\$ 258,511.
TOTAL	<u>\$ 322,461.</u>	<u>\$ 317,680.</u>	<u>\$ 201,689.</u>	<u>\$ 196,240.</u>	<u>\$ 258,511.</u>

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

ALLAN HANCOCK COLLEGE FOUNDATION

Employer identification number

95-3143396

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

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

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

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

[] 501(c)(3) taxable private foundation

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

[X] 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 ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 13,913.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 179,372.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 11,425.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 38,520.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 57,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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		\$ 6,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 12,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
13		\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14		\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15		\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16		\$ 20,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17		\$ 16,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18		\$ 34,608.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
19		\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20		\$ 11,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22		\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23		\$ 16,020.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24		\$ 5,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
25		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26		\$ 8,156.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27		\$ 100,913.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28		\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29		\$ 339,834.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
31	----- ----- -----	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	----- ----- -----	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	----- ----- -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	----- ----- -----	\$ 5,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	----- ----- -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	----- ----- -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
37		\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38		\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39		\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40		\$ 71,709.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41		\$ 9,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42		\$ 12,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ALLAN HANCOCK COLLEGE FOUNDATION

95-3143396

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
43	----- ----- -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	----- ----- -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	----- ----- -----	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	----- ----- -----	\$ 20,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	----- ----- -----	\$ 683,466.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
49		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50		\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51		\$ 17,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54		\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ALLAN HANCOCK COLLEGE FOUNDATION	Employer identification number 95-3143396
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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
55	----- ----- -----	\$ 50,500.	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.)
---	----- ----- -----	\$ -----	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

Employer identification number

ALLAN HANCOCK COLLEGE FOUNDATION

95-3143396

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
-----	N/A ----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization: ALLAN HANCOCK COLLEGE FOUNDATION
 Employer identification number: 95-3143396

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 information once. See instructions.) \$ _____ N/A
 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
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

ALLAN HANCOCK COLLEGE FOUNDATION

95-3143396

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X. \$ _____

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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

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

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

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

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

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

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

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	18,686,286.	16,058,788.	33,966,809.	26,184,121.	24,654,762.
b Contributions	1,769,997.	1,233,566.	740,995.	1,338,673.	432,918.
c Net investment earnings, gains, and losses	2,282,669.	1,814,595.	-2,655,711.	1,738,423.	67,318.
d Grants or scholarships					
e Other expenditures for facilities and programs	589,898.	420,663.	15,993,305.	-4,705,592.	-1,029,123.
f Administrative expenses					
g End of year balance	22,149,054.	18,686,286.	16,058,788.	33,966,809.	26,184,121.

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

	Yes	No
(i) Unrelated organizations?	<input type="checkbox"/>	X
(ii) Related organizations?	<input type="checkbox"/>	X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)). 0.

Part VII Investments ' Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other COMMON STOCK	6,816,684.	END OF YEAR MARKET VALUE
(A) CORPORATE BONDS	7,077,925.	END OF YEAR MARKET VALUE
(B) US GOVERNMENT SECURITIES	655,529.	END OF YEAR MARKET VALUE
(C) EXCHANGE TRADED FUND	5,973,845.	END OF YEAR MARKET VALUE
(D) MUTUAL FUNDS	4,214,634.	END OF YEAR MARKET VALUE
(E) BENEFICIAL INTEREST FOUNDATION FOR	CCC	
(F)	164,132.	END OF YEAR MARKET VALUE
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, line 12, column (B))	24,902,749.	

Part VIII Investments ' Program Related N/A

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, line 13, column (B))		

Part IX Other Assets N/A

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, line 15, column (B))	

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, line 25, column (B))	

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	5,553,589.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	175,679.	
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	173,085.	
	e Add lines 2a through 2d	2e		348,764.
3	Subtract line 2e from line 1		3	5,204,825.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	5,204,825.

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

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

1	Total expenses and losses per audited financial statements		1	1,996,700.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	173,085.	
	e Add lines 2a through 2d	2e		173,085.
3	Subtract line 2e from line 1		3	1,823,615.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,823,615.

Part XIII Supplemental Information

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

PART X - FASB ASC 740 FOOTNOTE

THE FOUNDATION IS A CHARITABLE, NOT-FOR-PROFIT, TAX-EXEMPT ORGANIZATION QUALIFIED UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND CORRESPONDING CALIFORNIA PROVISIONS. ACCORDINGLY, NO PROVISIONS FOR INCOME TAXES HAS BEEN PROVIDED IN THE FINANCIAL STATEMENTS. THE FOUNDATION HAS ALSO BEEN CLASSIFIED AS AN ENTITY THAT IS NOT A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) AND QUALIFIES FOR DEDUCTIBLE CONTRIBUTIONS AS PROVIDED IN SECTION 170(B)(A)(VI). THE FOUNDATION ANNUALLY FILES INFORMATION RETURNS, FORMS 990, 199 AND RRF-1, WITH THE APPROPRIATE

Part XIII Supplemental Information (continued)

PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

AGENCIES. THERE WAS NO UNRELATED BUSINESS ACTIVITY INCOME.

THE FOUNDATION HAS ADOPTED FASB ASC TOPIC 740 THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKE, OR EXPECTED TO BE TAKEN, ON A TAX RETURN AND PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF, BASED ON ITS MERITS. THE POSITION IS MORE LIKELY THAT NOT TO BE SUSTAINED ON AUDIT BY THE TAXING AUTHORITIES. MANAGEMENT BELIEVES THAT ALL TAX POSITIONS TAKEN TO DATE ARE HIGHLY CERTAIN AND, ACCORDINGLY, NO ACCOUNTING ADJUSTMENTS HAS BEEN MADE TO THE FINANCIAL STATEMENTS

**SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

DI RECT EXPENSES.....	\$ 173,085.
TOTAL	<u>\$ 173,085.</u>

**SCHEDULE D, PART XII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S**

DI RECT EXPENSES.....	\$ 173,085.
TOTAL	<u>\$ 173,085.</u>

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

ALLAN HANCOCK COLLEGE FOUNDATION

Employer identification number

95-3143396

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		HANCOCK HONORS (event type)	ATHLETIC GOL T (event type)	1 (total number)	(add column (a) through column (c))	
Revenue	1	Gross receipts	240,107.	62,725.	45,725.	348,557.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	240,107.	62,725.	45,725.	348,557.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	42,340.	10,640.		52,980.
	7	Food and beverages	48,469.	13,619.		62,088.
	8	Entertainment	11,356.			11,356.
	9	Other direct expenses	35,560.	4,218.	6,883.	46,661.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				173,085.
	11	Net income summary. Subtract line 10 from line 3, column (d)				175,472.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name -----

Address -----

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name -----

Address -----

16 Gaming manager information:

Name -----

Gaming manager compensation \$ _____

Description of services provided -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year. . . \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ALLAN HANCOCK COLLEGE FOUNDATION

Employer identification number

95-3143396

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ALLAN HANCOCK JOINT CCD 800 S. COLLEGE DR. SANTA MARIA, CA 93454	95-6000940		567,466.	0.			GENERAL DISTRICT SUPPORT
(2) AH COLLEGE AUX PROGRAMS 800 S. COLLEGE DR. SANTA MARIA, CA 93454	95-1803920		87,685.	0.			PCPA THEATRE SUPPORT
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0

3 Enter total number of other organizations listed in the line 1 table 2

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

TEEA3901L 06/12/23

Schedule I (Form 990) 2023

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 STUDENT SCHOLARSHIPS	421	576,696.	21,475.		
2 STUDENT ASSISTANCE	4	2,000.			
3					
4					
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

INDIVIDUAL SCHOLARSHIPS ARE AWARDED BASED ON CRITERIA PROVIDED BY THE DONOR. THERE IS A SCHOLARSHIP COMMITTEE COMPRISED OF FULL-TIME FACULTY THAT REVIEW THE APPLICATIONS AND IDENTIFY RECIPIENTS FOR SCHOLARSHIPS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ALLAN HANCOCK COLLEGE FOUNDATION

Employer identification number

95-3143396

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation			
1 KEVIN G. WALTHERS, PH. D. PRESIDENT	(i)	0.	0.	0.	0.	0.	0.
	(ii)	293,159.	0.	0.	0.	439,893.	0.
2 DENNIS CURRAN VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.
	(ii)	205,301.	0.	0.	0.	270,133.	0.
3 NICHOLE DECHAI NE, DMA FACULTY REP	(i)	0.	0.	0.	0.	0.	0.
	(ii)	108,853.	0.	0.	0.	162,983.	0.
4 JON HOOTEN, PH. D. EXECUTIVE DIR.	(i)	0.	0.	0.	0.	0.	0.
	(ii)	152,345.	0.	0.	0.	261,783.	0.
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

ALLAN HANCOCK COLLEGE FOUNDATION

Employer identification number

95-3143396

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

THERE ARE NO SUB COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE ORGANIZATION.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 WILL BE PROVIDED TO THE DIRECTORS OF ADMINISTRATIVE SERVICES FOR REVIEW AND APPROVAL PRIOR TO FILING AND PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AFTER BEING FILED.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

IN ADDITION TO REVIEWING ANNUALLY, THE BOARD MEMBERS DISCLOSE CONFLICTS OF INTEREST DURING THE YEAR AS THEY ARISE. THE BOARD ADDRESSES CONFLICTS OF INTEREST IMMEDIATELY UPON DISCLOSURE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

A RIGOROUS HIRING PROCESS SET FORTH BY ALLAN HANCOCK COLLEGE. PAY INCREASES FOR EMPLOYEES ARE APPROVED BY THE AHC FOUNDATION'S EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FINANCIALS, GOVERNING DOCUMENTS AND POLICIES ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

ALLAN HANCOCK COLLEGE FOUNDATION

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number

95-3143396

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) ----- ----- -----					
(2) ----- ----- -----					
(3) ----- ----- -----					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) ALLAN HANCOCK JOINT COMMUNITY COLL 800 S. COLLEGE DR. SANTA MARIA, CA 93454 95-6000940	EDUCATION	CA	115		N/A		X
(2) ALLAN HANCOCK COLLEGE AUXILIARY PR 800 S. COLLEGE DR. SANTA MARIA, CA 93454 95-1803920	SUPPORT OF THE ALLAN HANCKOCK JOINT CCD	CA	501(C)(3)	170(B)(1)(A)	N/A		X
(3) ----- ----- -----							
(4) ----- ----- -----							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ----- ----- -----												
(2) ----- ----- -----												
(3) ----- ----- -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) ----- ----- -----									
(2) ----- ----- -----									
(3) ----- ----- -----									

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

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

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) ----- ----- -----													
(2) ----- ----- -----													
(3) ----- ----- -----													
(4) ----- ----- -----													
(5) ----- ----- -----													
(6) ----- ----- -----													
(7) ----- ----- -----													
(8) ----- ----- -----													

Part VII **Supplemental Information**

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