PUBLIC DISCLOSURE COPY \*\*

# **Return of Organization Exempt From Income Tax**

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

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. and ending SEP 30 2021 For the 2023 calendar year, or tax year beginning OCT 1 2023 В

١ г	OI LITE	e 2023 Calendar year, or tax year beginning OCI I, 2023 and	enumy ,	3EF 30, 4044	
a	heck if pplicabl	C Name of organization		D Employer identifi	cation number
	Addre	RANCHO CIELO, INC.			
	Name chang			77-05558	59
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	_ □Final □return	D O BOY 6948		831-444-	
	termin ated			G Gross receipts \$	10,232,222.
	Ameno			H(a) Is this a group re	
	Applic			for subordinates	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	
Т	ax-ex	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) $4947(a)(1)$		list. See instructions	
	Vebsit			H(c) Group exemptio	n number
( F	orm of	organization: X Corporation Trust Association Other	<b>L</b> Year		✓ State of legal domicile: CA
	rt I	Summary			_
	1	Briefly describe the organization's mission or most significant activities: RANC	HO CIE	ELO INVESTS :	IN ALL
Activities & Governance		YOUNG PEOPLE FACING CHALLENGES FOR SUCCES			
rna	2	Check this box if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as:	
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	19
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19	
S S	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	87	
Viţi	6	Total number of volunteers (estimate if necessary)	6	500	
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	3,125.	
۹.	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			1,125.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		4,927,189.	4,811,934.
ž	9	Program service revenue (Part VIII, line 2g)		296,751.	357,276.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		202,458.	97,837.
<u>-</u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		989,219.	1,043,797.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,415,617.	6,310,844.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,250.	19,250.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Se		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,294,041.	4,098,003.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	47,700.
xpe	b	Total fundraising expenses (Part IX, column (D), line 25) 816,70	<u>61.</u>		
Ш	l .	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,376,419.	2,870,870.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,671,710.	7,035,823.
	19	Revenue less expenses. Subtract line 18 from line 12		743,907.	-724,979.
t Assets or id Balances			<u>  B</u>	eginning of Current Year	End of Year
sset 3alai	20	Total assets (Part X, line 16)	·····	20,506,232.	19,865,604.
nd Page		Total liabilities (Part X, line 26)		756,026.	523,416.
Ž,		Net assets or fund balances, Subtract line 21 from line 20		19,750,206.	19,342,188.
	rt II				1 1 . 1 1 b . P . 6 . 9 . 5 .
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			/ knowleage and beliet, it is
ue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	lich prepare	r nas any knowledge.	
٠	_	Signature of officer		I Date	
igr Ior		CHRIS DEVERS, CEO			
ler	е	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN
aid		AUTUMN ROSSI AUTUMN ROSSI	le	08/14/25 if self-employ	
	arer	Firm's name CLIFTONLARSONALLEN LLP			1-0746749
-	Only	Firm's address 1188 PADRE DRIVE, STE 101		, iiiii o ciiv	
		SALINAS, CA 93901		Phone no. (8	31) 759-6300
/lav	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No
y		Figure 2012 and 1012			- 000

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PARTNER WITH OUR COMMUNITY TO PROVIDE A SAFE CAMPUS TO DELIVER
	PROGRAMS AND SERVICES THAT INSPIRE AT-RISK YOUTH TO LEARN NEW SKILLS
	AND GAIN SELF-ESTEEM AND CONFIDENCE.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	<u> </u>
_	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 \$
	CONSTRUCTION & SUSTAINABLE DESIGN ACADEMY
	IN THE CONSTRUCTION & SUSTAINABLE DESIGN ACADEMY, STUDENTS ACHIEVE
	NATIONALLY RECOGNIZED CONSTRUCTION CERTIFICATES WHILE GAINING HANDS-ON
	EXPERIENCE IN BUILDING SMALL, SUSTAINABLE HOMES. A HIGH SCHOOL DIPLOMA
	IS GAINED THRU PARTNERSHIP WITH JOHN MUIR CHARTER SCHOOLS. JOB
	READINESS, JOB REFERRAL AND PLACEMENT ARE ALSO PART OF THE PROGRAM.
	·
4b	(Code:) (Expenses \$
40	(Code: ) (Expenses \$ 656, 706 • including grants of \$ 0 • ) (Revenue \$ 192,574 • )  DRUMMOND CULINARY ACADEMY
	EXECUTIVE CHEF TAKES THE STUDENTS THROUGH A NATIONALLY-RECOGNIZED
	CULINARY ARTS CURRICULUM, INCLUDING SAFE FOOD HANDLERS CERTIFICATION.
	THE TEN-MONTH PROGRAM, SPLIT BETWEEN THE KITCHEN AND THE JOHN MUIR
	CHARTER HIGH SCHOOL ACADEMIC CLASSROOM, RESULTS IN A CULINARY
	CERTIFICATE AND A HIGH SCHOOL DIPLOMA. STUDENTS WILL COMPLETE A 200
	HOUR EXTERNSHIP PROGRAM WORKING WITH LOCAL RESTAURANTS TO GAIN
	ADDITIONAL EMPLOYMENT EXPERIENCE. THE PROGRAM OFFERS JOB READINESS
	TRAINING, AS WELL AS PLACEMENT AND REFERRAL SERVICES FOR GRADUATES.
4c	(Code:) (Expenses \$808,122. including grants of \$0. (Revenue \$\$)
	YOUTH CORPS
	A CREW-BASED EMPLOYMENT PROGRAM FOR YOUNG PEOPLE 18-24 WHO HAVE
	TRADITIONALLY BEEN CONSIDERED THE "HARDEST TO EMPLOY." DEPENDABILITY,
	TEAMWORK, RESPECT, PUNCTUALITY AND OTHER JOB RETENTION SKILLS ARE A KEY
	PART OF THIS JOB READINESS EMPLOYMENT PROGRAM. OUR CREWS LEARN THROUGH
	THEIR INVOLVEMENT IN A VARIETY OF CONSTRUCTION PROJECTS THAT TEACH
	EVERYTHING FROM WORK ETHICS TO COMPLEX CONSTRUCTION SKILLS. THEY ARE
	EMPLOYED BY RANCHO CIELO DURING THEIR TENURE IN THE YOUTH CORPS. THIS
	PROGRAM IS CRITICAL TO THE CULTURAL CHANGE WE ARE TRYING TO AFFECT,
	PROVIDING YOUTH WITH POSITIVE OPPORTUNITIES TO LEARN NEW SKILLS AND
	SELF-SUFFICIENCY.
	DEUL-DOLLICIENCI.
	Others were an along (Describe on Orbertal O.)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 2,481,565. including grants of \$ 19,250.) (Revenue \$ 6,904.)
<u>4e</u>	Total program service expenses 4,930,255.
	Form <b>990</b> (2023)

# Form 990 (2023) RANCHO CIELO, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
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	19		Х
<b>2</b> 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X

Form 990 (2023) RANCHO CIELO, INC.
Part IV Checklist of Required Schedules (continued)

	- Toorinaday		Vaa	NI.
00	Did the examination report more than \$5,000 of grants or other assistance to exfor demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	Х	
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	<del>  22</del>		
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
	,		Х	
04 -	Schedule J	23		
24 a	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	١,,		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	۱		
	any tax-exempt bonds?	24c		_
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			,,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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			l <u></u>
	Schedule L, Part I	25b		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	26		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	27		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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	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	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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	33		Х
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	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1000		
- <b>-</b>	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		
0.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<del>                                     </del>		
00	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai		_ 55		
	Check if Schedule O contains a response or note to any line in this Part V			
	The second of th		Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 122			1,10
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 122  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	Х	
	gamenty, manage to prize minore.			(3U33)

	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)	7037		age •
ı uı	Statements regarding other mornings and rax compliance (continued)			L NI -
200	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No
za	· · · · · · · · · · · · · · · · · · ·	,		
			Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<del>                                     </del>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<del>                                     </del>
<del>4</del> a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
D	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).			v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a				X
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<del>  ^-</del>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			Х
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?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del>                                     </del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			X
	to file Form 8282?	7c		_^
d		+		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.  Did the appropriate organization make any tayable distributions under castion 40662	00		
a	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10		96		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a b	Our and the first state of the First COO Part VIII. From 40, for a left support of the first III.	-		
11	Section 501(c)(12) organizations. Enter:	-		
	Gross income from members or shareholders			
a	Gross income from other sources. (Do not net amounts due or paid to other sources against	1		
b	amounts due or received from them.)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.0		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u></u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.75		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, 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?	17		

If "Yes," complete Form 6069.

RANCHO CIELO, INC. 77-0555859 Form 990 (2023) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 19 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. 19 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 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? 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 Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12h c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 14 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 Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA 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. X Own website X Upon request Another's website Other (explain on Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2023)

93908

TOM BENNETT - (831)444-3529 710 OLD STAGE RD, SALINAS,

# 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.

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

- List all of the organization's **former** 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.

(A)  Name and title	(B) Average hours per week	(do box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				one h an	(D)  Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) CHRIS DEVERS CEO	40.00	-		Х				161,904.	0.	14,734.
(2) SUZANNE ERDBACHER	40.00			22				101,504.	0.	14,/54.
CFO				х				129,227.	0.	8,732.
(3) MIKE ZIMMERMAN	1.00							·		
TREASURER		Х		Х				0.	0.	0.
(4) JAMIE KITZ	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) JANINE CHICOURRAT	1.00							_	_	_
CHAIR		Х		Х				0.	0.	0.
(6) PETE SCUDDER	5.00	l								
CHAIR	1 00	Х		Х				0.	0.	0.
(7) CLEMENT MILLER	1.00	l								
VICE CHAIR	1 00	Х		Х				0.	0.	0.
(8) BILL HAYWARD	1.00	,,							0	•
(9) DON CHAPIN	1 00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0
(10) GREGORY AHN	1.00	^				<del>                                     </del>	┢	0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(11) JACQUELINE CRUZ	1.00	^	$\vdash$			$\vdash$	$\vdash$	0.	0.	<u></u>
DIRECTOR	1.00	х						0.	0.	0.
(12) JEFF COOK	1.00									
DIRECTOR		Х						0.	0.	0.
(13) JENNIFER DACQUISTO	1.00									
DIRECTOR		Х						0.	0.	0.
(14) JENNIFER ROSENTHAL	1.00									
DIRECTOR		Х						0.	0.	0.
(15) JESSE LOPEZ	1.00									
DIRECTOR THRU JAN 2024		Х						0.	0.	0.
(16) JOHN PHILLIPS	1.00									
DIRECTOR		Х						0.	0.	0.
(17) KATRINA MAESTRI	1.00									_
DIRECTOR		Х						0.	0.	0.

332007 12-21-23

Form 990 (2023)

Part VII Section A. Officers, Directors, Trus	(B)	oloy 	ees,			gnes	it C					<b>(E)</b>	
(A)	Average			(C Posi		1		(D)	(E)			(F)	
Name and title	hours per		not c	heck r ss per	nore	than o		Reportable compensation	Reportab <b>l</b> e compensatio		l	stimate nount	
	week			nd a di				from	from related		ا	other	OI .
	(list any	tor						the	organization		com	pensa	tion
	hours for	Individual trustee or director				8		organization	(W-2/1099-MIS		I	rom th	
	related	tee or	ustee			ensati		(W-2/1099-MISC/	1099-NEC)		org	janizat	ion
	organizations	trus	Institutional trustee		oyee	Highest compensated employee		1099-NEC)			an	d re <b>l</b> at	ed
	below	vidua	itutio	Jec.	Key employee	nest c	ner				org	anizati	ons
	line)	Indi	Inst	Officer	Key	High	Former						
(18) LANCE BUCKELDEE	1.00	1											
DIRECTOR		X						0.		0.			0.
(19) LUIS ALVAREZ	1.00												
DIRECTOR		Х						0.		0.			0.
(20) MIKE AVILA	1.00												
DIRECTOR THRU JAN 2024		Х						0.		0.			0.
(21) PATRICK AMARIS	1.00												
DIRECTOR		Х						0.		0.			0.
(22) SUSAN BLACK	1.00												
DIRECTOR		X						0.		0.			0.
(23) WALT DUFLOCK	1.00												
DIRECTOR		x						0.		0.			0.
		1											
-				П									
		1											
-		$\vdash$											
		1											
1b Subtotal	1	<u> </u>				<u> </u>	<u> </u>	291,131.		0.	2	3,4	66.
1b Subtotal								0.		0.			
								291,131.		0.	2	3,4	
d Total (add lines 1b and 1c)								•	000 of rapartable			J , ±	<del>50.</del>
compensation from the organization	iot firmted to th	1036	liste	u au	iove.	y wii	U I E	ceived more than \$100,	ooo or reportable	7			2
compensation from the organization												Yes	No
3 Did the organization list any former officer	director trust	00 I		mnl	0) (0)		hia	hoot componented ampl	lovos on			100	110
,			•		-		_	•	•		_		Х
line 1a? If "Yes," complete Schedule J for s											3		
4 For any individual listed on line 1a, is the si											4	х	
and related organizations greater than \$15											4		
5 Did any person listed on line 1a receive or								-			_		v
rendered to the organization? If "Yes." con	<u>nplete Schedul</u>	e <i>J f</i>	or sı	ıch p	oers	on .					5		X
Section B. Independent Contractors									100 000 1				
1 Complete this table for your five highest co										oensa	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin T		ear.				
<b>(A)</b> Name and business	addross	3.77	<b>~</b> ****	,				<b>(B)</b> Description of s	onioos			C) nsatio	n
- Name and business	addiess	1//	INC	<u> </u>			$\dashv$	Description of s	ervices		onipe	Tisatio	
							$\dashv$						
									l				
							$\dashv$						
									l				
							$\dashv$						
							$\dashv$						
							[						
2 Total number of independent contractors (		ot <b>l</b> ir	nited	d to t	_		ted	above) who received mo	ore than				
\$100,000 of compensation from the organ	zation				C	)							

77-0555859

Page 1   1   2   2   2   2   2   2   2   2					or note to any line	e in this Part VIII			
December				Officer in deficultie of contains a response i	or note to any ini	(A)	Related or exempt	Unrelated	Revenue excluded from tax under
Page	ts ts	1	а	Federated campaigns 1a					
Page	ran		b	Membership dues 1b					
Page	S, G		С	Fundraising events 1c	688,503.				
Page	iifts ar A								
Page	s, G		е	Government grants (contributions) 1e	219,605.				
Page	Sign		f	All other contributions, gifts, grants, and					
Page	but the			similar amounts not included above 1f	3,903,826.				
Page	n diti		g	Noncash contributions included in lines 1a-1f	280,281.				
Page	Co		h	Total. Add lines 1a-1f		4,811,934.			
Second   S					Business Code				
3   Total. Add lines 2a2f   357,276   3   Investment income (including dividends, interest, and other similar amounts)   52,547	ě	2	а	CULINARY ACADEMY	611600	192,574.			
3   Total. Add lines 2a2f   357,276   3   Investment income (including dividends, interest, and other similar amounts)   52,547	e Ķ		b	YOUTH CORPS	611600	157,798.	157,798.		
3   Total. Add lines 2a2f   357,276   3   Investment income (including dividends, interest, and other similar amounts)   52,547	Se		С	BEE PROGRAM	611600	6,904.	6,904.		
3   Total. Add lines 2a2f   357,276   3   Investment income (including dividends, interest, and other similar amounts)   52,547	am		d						
3   Total. Add lines 2a2f   357,276   3   Investment income (including dividends, interest, and other similar amounts)   52,547	og B		е						
3   Investment income (including dividends, interest, and other similar amounts)   52,547.   5	P		f	All other program service revenue					
Other similar amounts			g	Total. Add lines 2a-2f		357,276.			
1		3		Investment income (including dividends, intere	st, and				
The state of the				/		52,547.			52,547.
Page		4							
Second   S		5		Royalties					
Page 20   Page					(ii) Personal				
C   Rental income or (loss)   Ge   520,654		6	а						
Net rental income or (loss)   Table				Ledde: Territal experiede					
Table   Gross amount from sales of assets other than inventory   Table   Gill Other				, , ,					
Assets other than inventory   December 2016						520,654.			520,654.
b   Less: cost or other basis and sales expenses   7b   3,858,716.   4,597.   2   46,284.   -994.   45,290.   418,108.   4		7	а	()	` '				
Part					3,603.				
C Gain or (loss) 7c 46,284994.  d Net gain or (loss) 688,503. of contributions reported on line 1c). See Part IV, line 18 8a 476,173. b Less: direct expenses 8b 58,065. c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory    11 a INSURANCE PROCEEDS   MISCELLANEOUS INCOME   S11600   99,438.   99,438.	_		b						
8 a Gross income from fundraising events (not including \$ 688,503. of contributions reported on line 1c). See Part IV, line 18 8a 476,173. 8b 58,065.  c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory  11 a Insurance Proceeds 11 a Insurance Proceeds 15 a Insurance Proceeds 16 a Insurance 16 a Insura	une								
8 a Gross income from fundraising events (not including \$ 688,503. of contributions reported on line 1c). See Part IV, line 18 8a 476,173. 8b 58,065.  c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory  11 a Insurance Proceeds 11 a Insurance Proceeds 15 a Insurance Proceeds 16 a Insurance 16 a Insura	, ve			. ,	•				
including \$ 688,503. of contributions reported on line 1c). See Part IV, line 18 8a 476,173. b Less: direct expenses 8b 58,065. c Net income or (loss) from fundraising events 418,108. 418,108. 9 a Gross income from gaming activities. See Part IV, line 19 9a 9b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 11 a Insurance Proceeds 611600 99,438. 99,438. 99,438. 105,597. 3,125. 2,472. 105,035.	r Re				I	45,290.			45,290.
Contributions reported on line 1c), See   Part IV, line 18   8a   476,173.		8	а						
Part IV, line 18	Ó								
b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9 b Less: direct expenses 9 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a INSURANCE PROCEEDS b MISCELLANEOUS INCOME 11 a INSURANCE PROCEEDS c d All other revenue e Total. Add lines 11a-11d  105,035.				' '	456 450				
C Net income or (loss) from fundraising events 418,108.  9 a Gross income from gaming activities. See Part IV, line 19  b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a INSURANCE PROCEEDS b MISCELLANEOUS INCOME c d All other revenue e Total. Add lines 11a-11d  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.  418,108.			_						
9 a Gross income from gaming activities. See Part IV, line 19  b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a INSURANCE PROCEEDS b MISCELLANEOUS INCOME 611600 99,438. 611600 99,438. 99,438. 99,438. 99,438. 104 105,035.					58,065.	410 100			410 100
Part IV, line 19				· · · · · · · · · · · · · · · · · · ·		418,108.			418,108.
b Less: direct expenses 9b Country Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a Db Country Net income or (loss) from sales of inventory 11 a INSURANCE PROCEEDS 611600 99,438. 99,438. 99,438. 99,438. 99,438. 99,438. Country C		9	а						
C Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  11 a INSURANCE PROCEEDS b MISCELLANEOUS INCOME c d All other revenue e Total. Add lines 11a-11d  105,035.									
10 a Gross sales of inventory, less returns and allowances   10a									
and allowances					· · · · · · · · · · · · · · · · · · ·				
b Less: cost of goods sold		10	а						
C   Net income or (loss) from sales of inventory			<u>_</u>						
Total Add lines 11a-11d   Business Code					1				
11 a   INSURANCE PROCEEDS   611600   99,438.   99,438.   99,438.			Ü	The time of the solution sales of inventory	Business Code				
e Total. Add lines 11a-11d	sn	11	2	INSURANCE PROCEEDS		99 438			99 438
e Total. Add lines 11a-11d	neo	• •				,		3 125	·
e Total. Add lines 11a-11d	ilai ven		~			-,,-		,,,,,,,	
e Total. Add lines 11a-11d	Sce			All other revenue				1	
	Σ					105.035.			
			_			,	357,276.	3,125.	1138509.

Form **990** (2023)

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	ion 501(c)(3) and 501(c)(4) organizations must compl				
	Check if Schedule O contains a respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations			<u> </u>	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	19,250.	19,250.		
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,	350 000	05 200	207 200	47 600
	trustees, and key employees	350,000.	95,200.	207,200.	47,600.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2,983,854.	2,191,223.	394,438.	398,193.
7	Other salaries and wages	4,703,034.	4,131,443.	334,430.	330,133.
8	Pension plan accruals and contributions (include	57,182.	32,777.	12,886.	11,519.
^	section 401(k) and 403(b) employer contributions)	439,867.	316,268.	81,262.	42,337.
9	Other employee benefits	267,100.	186,171.	47,009.	33,920.
10	Payroll taxes	207,100.	100,171.	47,005.	33,320.
11	Fees for services (nonemployees):				
a	Management	113,940.		113,940.	
b	LegalAccounting	51,217.		51,217.	
		31,2176		31,211	
	Lobbying Professional fundraising services. See Part IV, line 17	47,700.			47,700.
f	Investment management fees	14,812.		14,812.	17,7000
ı q		21,0120		21/0220	
9	column (A), amount, list line 11g expenses on Sch O.)	454,141.	322,025.	79,023.	53,093.
12	Advertising and promotion		,	12,4224	
13	Office expenses	160,868.	58,524.	60,201.	42,143.
14	Information technology	,	,	,	•
15	Royalties				
16	Occupancy	520,129.	473,557.	27,426.	19,146.
17	Travel	16,097.	9,640.	6,149.	308.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	593,509.	569,759.	20,336.	3,414.
23	Insurance	176,187.	138,082.	33,706.	4,399.
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.)				
а	PROGRAM COSTS	264,703.	260,193.		4,510.
b	SUPPLIES	116,075.	99,985.	10,478.	5,612.
C	VEHICLE EXPENSES	104,911.	102,710.	1,637.	564.
d		103,500.	,	103,500.	
	All other expenses	180,781.	54,891.	23,587.	102,303.
25	Total functional expenses. Add lines 1 through 24e	7,035,823.	4,930,255.	1,288,807.	816,761.
26	Joint costs. Complete this line only if the organization		-	-	-
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

I a	IL A	Balance Sneet					
		Check if Schedule O contains a response or note	e to any	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			74,503.	1	18,214.
	2	Savings and temporary cash investments			890,728.	2	694,672.
	3	Pledges and grants receivable, net			640,845.	3	449,309.
	4	Accounts receivable, net			180,972.	4	137,529.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			7,998.	8	7,782.
ĕ	9	Prepaid expenses and deferred charges			647.	9	93,012.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	17,003,852.			
	b	Less: accumulated depreciation	$\overline{}$	3,973,949.	12,847,996.	10c	13,029,903.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 1	2,827,408.	12	2,496,112.		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		2 225 425	14	0 000 001	
	15	Other assets. See Part IV, line 11		3,035,135.	15	2,939,071.	
	16	Total assets. Add lines 1 through 15 (must equa			20,506,232.	16	19,865,604.
	17	Accounts payable and accrued expenses		683,832.	17	361,064.	
	18	Grants payable		18	60 207		
	19	Deferred revenue				19	69,297.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substantial and the control of the con				00	
Lia		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay				24	
	25	parties, and other liabilities not included on lines					
		of Schedule D	17-24)	. Complete Fait A	72,194.	25	93,055.
	26				756,026.	26	523,416.
	20	Organizations that follow FASB ASC 958, che		• X	73070200	20	323,1233
es		and complete lines 27, 28, 32, and 33.		, <u></u>			
ũ	27				16,560,384.	27	15,726,032.
3ak	28	A1			3,189,822.	28	3,616,156.
힏		Organizations that do not follow FASB ASC 95					
Ξ		and complete lines 29 through 33.	,				
ō	29	Capital stock or trust principal, or current funds				29	
šets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		19,750,206.	32	19,342,188.	
_	33	Total liabilities and net assets/fund balances			20,506,232.	33	19,865,604.

Pa	rt 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		, 31			
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	,03	5,8	23.	
3	Revenue less expenses. Subtract line 2 from line 1	3		-72			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19	,75		06. 61.	
5	Net unrealized gains (losses) on investments						
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 19 , 3						
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990:						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		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:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	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:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edu <b>l</b> e O.					
За	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?			За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

#### SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization RANCHO CIELO 77-0555859 INC. 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (iv) is the organization listed (vi) Amount of other (ii) EIN (iii) Type of organization (v) Amount of monetary (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

332021 12-21-23

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

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
	Gifts, grants, contributions, and	` ,	,	. ,	` ,	` '				
	membership fees received. (Do not									
	include any "unusual grants.")	3171587.	3374905.	3929915.	4927189.	4811934.	20215530.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its beha <b>l</b> f									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge	135,840.	135,840.	135,840.	135,840.	135,840.	679,200.			
4	Total. Add lines 1 through 3	3307427.	3510745.	4065755.	5063029.	4947774.	20894730.			
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.						20894730.			
Sec	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
7	Amounts from line 4	3307427.	3510745.	4065755.	5063029.	4947774.	20894730.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	264,393.	347,170.	398,952.	589,592.	573,201.	2173308.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on	114,728.	249,666.	338,787.	470,546.	520,018.	1693745.			
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						24761783.			
12	Gross receipts from related activities,	etc. (see instructio	ns)			12 1	,406,152.			
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)				
	organization, check this box and stor									
Sec	tion C. Computation of Publi	c Support Per	centage							
	Public support percentage for 2023 (l	,.	•	( , ,		14	84.38 %			
	Public support percentage from 2022					15	85.51 %			
16a	33 1/3% support test - 2023. If the o	-								
	$\ensuremath{\mathbf{stop}}$ here. The organization qualifies									
b	33 1/3% support test - 2022. If the o	-								
	and stop here. The organization qual									
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	ınd <b>l</b> ine 14 is 10%	or more,			
	and if the organization meets the fact			=		VI how the organiz	zation			
	meets the facts-and-circumstances te	st. The organization	n qua <b>l</b> ifies as a pu	blicly supported or	ganization					
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on <b>l</b> ine	13, 16a, 16b, or 1	7a, and line 15 is	10% or			
	more, and if the organization meets the									
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar		(Form 990) 2022			

(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.)

Sec	ction A. Public Support	now, please com	piete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(5.)	(10) = 1 = 1	(5) = = =	(4) = = =	(3/====	(4)
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	: Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income, Do not include gain						
_	or loss from the sale of capital						
10	assets (Explain in Part VI.)				+		
	Total support. (Add lines 9, 10c, 11, and 12.)	a avanciantianta f	ivet econd third	formation or fifting to a		F01(a)(2) avecariantia	
14	First 5 years. If the Form 990 is for the	· ·		,	•	(,(,	
500	check this box and stop here ction C. Computation of Public						
	•			column (fl)		15	0/
	Public support percentage for 2023 (li		-				%
	Public support percentage from 2022 ction <b>D.</b> Computation of Inves					16	%
	•			ino 13. column (f)		17	%
	Investment income percentage for 20 Investment income percentage from 2					18	
18	33 1/3% support tests - 2023. If the			on line 14, and line			
198							101161
	more than 33 1/3%, check this box an	· <del>-</del> ·		· · · · · ·	-		
t	33 1/3% support tests - 2022. If the	•					nu 🖂
00	line 18 is not more than 33 1/3%, chec						H
20	<b>Private foundation.</b> If the organization	a ala not check a	pox on line 14, 19	a or ign check th	us pox and see in	SITUCTIONS	1 1

# 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

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

	Yes	No
1		
2		
За		
- Gu		
3b		
3с		
30		
4a		
41		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
33		
10a		
.54		
10b		
	~ 000)	2022

332024 12-21-23

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 <u>detail in Part VI</u> 11c Section B. Type I Supporting Organizations No Yes 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. 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, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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) Section D. All Type III Supporting Organizations No Yes\_ 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 2 the organization maintained a close and continuous working relationship with the supported organization(s). 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. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. а b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С 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 2a that these activities constituted substantially all of its activities. 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 2b these activities but for the organization's involvement. 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. За **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.

<u> </u>	11.		_	(Form	2001	
50	neai	ıle	Δ	(Form	aan	ンロソス

4

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

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

<u>4</u> 5

Schedule A (Form 990) 2023

d Excess from 2022 e Excess from 2023

# Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

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

Name of the organization

RANCHO CIELO, INC.

77-0555859

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: O	nly a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	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\$						
answer '	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 hat it doesn't meet the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page **2** 

Name of organization

Employer identification number

RANCHO	CIELO.	INC
TOTACTIO	CTHUC,	$\tau_{II}$

77-0555859

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>413,987.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
2		\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>250,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 217,519.	Person X Payroll
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>160,348.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>150,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023) Page 2

Name of organization Employer identification number

RANCHO	CTELO	INC
LANCIIO	CIBDO,	TINC

77-0555859

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		\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

# RANCHO CIELO, INC.

77-0555859

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
202452 10.06		   \$	Schodulo B (Form 990) (2022)

Page 4

Name of organization Employer identification number RANCHO CIELO, 77-0555859 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (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. (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 from (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

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

Name of the organization

RANCHO CIELO, INC.

**Employer identification number** 77-0555859

Pai	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, Iin		or Accounts. Complete if the
	organization anothered the entreme ede, i are in, in	(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 advis	ed funds
	are the organization's property, subject to the organization's	•	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
_		War of Calabara and a ferral and a second	Control of the Heavis
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conserva	tion easements during the year
0	Does each conservation easement reported on line 2d above	scatisfy the requirements of section 170/b	\/4\/D\/;\
8			
9	In Part XIII, describe how the organization reports conservation	on agraments in its revenue and expanse	
9	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	lote to the organization's imancial stateme	ents that describes the
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95		nd balance sheet works
	of art, historical treasures, or other similar assets held for put		
	service, provide in Part XIII the text of the footnote to its finar	, , , , , , , , , , , , , , , , , , ,	·
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items.	,	, , , , , , , , , , , , , , , , , , ,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under FASB A		- · ·
а	Revenue included on Form 990, Part VIII, line 1	•	\$
b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2023

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

#### 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.

complete if the organization and words 165 of 1611 000; 1 are 17, into 17a. 000 1 of 17a. 000 1						
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a Land						
<b>b</b> Buildings		13,788,298.	2,425,736.	11,362,562.		
c Leasehold improvements		1,637,832.	916,785.	721,047.		
d Equipment		1,178,538.	631,428.	547,110.		
e Other		399,184.		399,184.		
Total. Add lines 1a through 1e. (Column (d) must equa	13,029,903.					

Schedule D (Form 990) 2023

Constant B (Form Coo) Loze	-,	The second of th
Part VII Investments - Other Securities		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	· · · · · · · · · · · · · · · · · · ·
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENTS	2,496,112.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	2,496,112.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"		1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

# Part IX Other Assets

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

(a) Description	(b) Book value
(1) PROMISE TO GIVE LAND LEASE	1,552,003.
(2) INVESTMENT AT COMMUNITY FOUNDATION	1,387,068.
(3)	
(4)	
(5)	
(6)	
<u>(9)</u>	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	2,939,071.

#### 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) SECURITY DEPOSITS	27,982.
(3) ACCRUED SCHOLARSHIPS	65,073.
(4)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. line 25. col. (B))	93,055.

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 ... X

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 RANCHO CIELO, INC.			77-0	)555859 Page
Par	t XI Reconciliation of Revenue per Audited Financial Statem		Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	?a.			
1				1	6,612,953
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	246 264		
а	Net unrealized gains (losses) on investments		316,961.		
b	Donated services and use of facilities	2b	45,394.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-103,500.		
е	Add lines 2a through 2d			2e	258,855
3	Subtract line 2e from line 1			3	6,354,098
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	14,812. -58,066.		
b	Other (Describe in Part XIII.)	4b	-58,066.		
С	Add lines 4a and 4b			4c	-43,254
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	6,310,844
Par	t XII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per l	Returr	1
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	?a.			
1	Total expenses and losses per audited financial statements			1	7,020,971
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	45,394.		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)	2d	58,066.		
е	Add lines 2a through 2d			2e	103,460
3	Subtract line 2e from line 1			3	6,917,511
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	14,812.		
b	Other (Describe in Part XIII.)		103,500.		
С	Add lines 4a and 4b		-	4c	118,312
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	7,035,823
	t XIII Supplemental Information				· · ·
lines	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac			1; Part X	K, line 2; Part XI,
PAF	RT V, LINE 4:				
				_ ~-	
THE	ENDOWMENT FUND HAS BEEN ESTABLISHED TO F	KOATDE	OPERATIONA	L St	JPPORT TO
THE	CORGANIZATION.				
PAF	RT X, LINE 2:				
	AGEMENT HAS CONSIDERED ITS TAX POSITIONS		LIEVES THAT	' ALI	OF THE

POSITIONS TAKEN IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION. THE ORGANIZATION'S RETURNS ARE SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AND FOUR YEARS, RESPECTIVELY, AFTER THEY ARE FILED.

Schedule D (Form 990) 2023

# SCHEDULE F (Form 990)

# Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

OMB No. 1545-0047

Name of the organization **Employer identification number** RANCHO CIELO 77-0555859 INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States, 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total employees, agents, and (by type) (such as, fundraising, proexpenditures offices is a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region FEES PAID TO A NEW ZEALAND BASED COMPANY EAST ASIA AND THE FOR ACCESS TO TEACHING PACIFIC 0 PROGRAM SERVICE EXPENSE RESOURCES 45,000. 45,000. 3 a Subtotal ..... **b** Total from continuation 0 0 sheets to Part I ...... 0. c Totals (add lines 3a 0 45,000. and 3b)

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2023
(h) Description of noncash assistance					Sched
(g) Amount of noncash assistance					
(f) Manner of cash disbursement					ecognized as a tax ivalency letter
(e) Amount of cash grant					oreign country, rion 501(c)(3) equ
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities
(c) Region					Enter total number of recipient organizations listed above that are recog exempt 501(c)(3) organization by the IRS, or for which the grantee or co Enter total number of other organizations or entities
(b) IRS code section and EIN (if applicable)					recipient organizations nization by the IRS, or other organizations or
1 (a) Name of organization					<ul> <li>2 Enter total number of recipient organizations listed a exempt 501(c)(3) organization by the IRS, or for which is a contraction of the organizations or entities.</li> <li>3 Enter total number of other organizations or entities.</li> </ul>

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

RANCHO CIELO, INC.

Schedule F (Form 990) 2023

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2023
(g) Description of noncash assistance					Schedi
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance					

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

# 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 **Employer identification number** 77-0555859 RANCHO CIELO, INC. 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. Mail solicitations е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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. (iii) Did fundraiser have custody (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser or control of contributions? organization listed in col. (i) SHARON ALBERT - 299 VIA GRANT WRITING AND Yes No PARAISO, MONTEREY, CA 93940 CONSULTATION Х 0 34,000 -34,000. MELISSA CASTILLAS - 629 GRANT WRITING AND RANDY'S CIRCLE, HOLLISTER, CA CONSULTATION Х 0 7,700 -7,700. DEVERS CONSULTING - 749 LA GRANT WRITING AND MESA DRIVE, SALINAS, CA CONSULTATION Х 0. 6,000 -6,000. 47,700 -47,700. Total 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.

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

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

		of fundraising event contributions and gro		-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
			VEGGIE	CULINARY		(add col. (a) through
			BOX/BBQ EVEN	GALA	2	
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
ne				, ,,	,	
Revenue	1	Gross receipts	576,577.	509,802.	78,297.	1,164,676.
	2	Less: Contributions	371,852.	308,067.	8,584.	688,503.
	3	Gross income (line 1 minus line 2)	204,725.	201,735.	69,713.	476,173.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages	19,986.	4,011.	3,960.	27,957.
	0	Entertainment		5,105.	6,050.	11 155
		Other direct expenses	2,035.		5,647.	11,155. 18,953.
		Direct expense summary, Add lines 4 through			,	58,065.
		Net income summary. Subtract line 10 from li	( )			418,108.
Pa	rt I	<b>Gaming.</b> Complete if the organization a				110,100.
		\$15,000 on Form 990-EZ, line 6a.	anowored res entrem	1000,1 411,1,1110 10,011	oportou more triari	
		tre,eee en remi eee EE, inte ear		(b) Pull tabs/instant		(d) Total gaming (add
e			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						· · · · · · · · · · · · · · · · · · ·
骼	4	Gross revenue				
		dross revenue				
	2	Cash prizes				
ses	_	Oddit prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No		
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1. column (d)			
			, ()		***	
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
		the organization licensed to conduct gaming ac	· · -	states?		Yes No
		No," explain:				
		· ·				
10a	We	ere any of the organization's gaming licenses re	voked, suspended. or te	rminated during the tax v	ear?	Yes No
		Yes," explain:	·			
		· · ·				

332082 09-13-23 Schedule G (Form 990) 2023

Sch	edule G (Form 990) 2023 RANCHO CIELO, INC. 7'	<u>7-05!</u>	<u>55</u>	<u>859</u>	Page 3
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:				
	The organization's facility	1.	За		%
			3b		<del></del>
	An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books and records:		SD		70
14	Enter the flame and address of the person who prepares the organization's gaming/special events books and records.				
	Name				
	Address				
		_	_		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amoun	ıt .			
	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:				
а	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 th				
	organization's own exempt activities during the tax year \$				
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III	, lin	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	ERS:			
	<u> </u>				
( I	) NAME OF FUNDRAISER: MELISSA CASTILLAS				
	·				
( I	) ADDRESS OF FUNDRAISER: 629 RANDY'S CIRCLE, HOLLISTER, CA	95023	3		
<u>. – </u>	,				
(I	) NAME OF FUNDRAISER: DEVERS CONSULTING				
<u>,                                    </u>	, MILLO OI I ONDIGITADIII. DI VIIND COMPONITING				
(I	) ADDRESS OF FUNDRAISER: 749 LA MESA DRIVE, SALINAS, CA 9390	11			
<u>, т</u>	, ADDITION OF FUNDINATURE. 143 DA MENA DRIVE, SAUTHAN, CA 3330	<u>,                                    </u>			

Schedule Q Form 990) RANCHO CIBLO, INC. 77-0555859 Page 4 Part IV Supplemental Information (continued)	Schedule G (Form 990)	RANCHO CIELO,	INC.	77-0555859	Page 4
	Part IV   Supplemental Infor	mation <sub>(continued)</sub>			

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

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.

Inspection

Open to Public

**≗** ∏ Employer identification number Schedule I (Form 990) 2023 77-0555859 (h) Purpose of grant or assistance X Yes 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 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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance noncash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table INC. General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? RANCHO CIELO, 1 (a) Name and address of organization or government Name of the organization Part Part II

77-0555859

Page 2

Schedule I (Form 990) 2023 RANCHO CIELO, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	D.	19,250.	0		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, line	e 2; Part III, column	(b); and any other add	ditional information.	
PART I, LINE 2:					
SCHOLARSHIPS ARE AWARDED TO THE TOP	STUDENTS	NI	EACH PROGRAM FOR	R ONGOING	
EDUCATION. ALL STUDENTS MEET LOW IN	INCOME AND	VERY LOW	INCOME ELIC	ELIGIBILITY	
REQUIREMENTS.					

332102 11-01-23

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

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

RANCHO CIELO, INC.

Employer identification number 77-0555859

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

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

Schedule J (Form 990) 2023

RANCHO CIELO,

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.

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CHRIS DEVERS CEO	€ €	161,904.	0 0	0	6,334.	8,400.	176,638.	000
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ART I, LINE 3:
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Schedule J (Form 990) 202

#### **SCHEDULE L**

Department of the Treasury

(Form 990)

#### **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

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

Internal Revenue Service	Go to	www.irs.gov/Fo	rm990 to	or insti	ructions and the la	itest	intormation.			l In	speci	ion		
Name of the organization									-	ident		on nu	mber	
		CIELO, IN								558	<u>59</u>			
•					on 501(c)(4), and se									
Complete if the					urt IV, line 25a or 25	b; or	Form 990-EZ, Pa	art V, I	ine 40	b.				
(a) Name of disqualified	person (	<b>(b)</b> Relationship b person and			ified	(c) De	escription of tran	sactio	n				cted?	
	·	person and	organiza	20011			·				Y	es	No	
(1)											+	-		
(2)											+	-		
(3)											+	-		
<u>(4)</u>														
(5)											+	_		
(6) 2 Enter the amount of tax	vincurred by th	ne organization m	anagere	or died	ualified persons du	ring t	he year under							
	•	•	Ū		•	·	•		\$					
3 Enter the amount of tax									• •					
C Littor the amount of tax	c, ii diriy, ori iiilo	, 2, abovo, romino	31000 Dy	1110 016	Jan 12 at 1011				¥					
Part II Loans to an	nd/or From	Interested Pe	ersons											
	organization a	answered "Yes" o	n Form 9	990-EZ,	Part V, line 38a, or	Forn	n 990, Part IV, Iir	ne 26;	or if th	ne orga	anizati	on		
reported an am	ount on Form	990, Part X, <b>l</b> ine 5	5, 6, or 22	2.										
(a) Name of	(b) Relations			oan to or	(e) Original	(f	) Balance due		In		proved ard or		/ritten	
interested person	with organiza	tion of <b>l</b> oan		ization?	principal amount		(1)		ult?			agree	agreement?	
			То	From				Yes	No	Yes	No	Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)						-				-			<u> </u>	
<u>(7)</u>														
(8)	+					-								
(9)														
(10)														
Part III Grants or A	ecictance F	Benefiting Int	orosto	d Dar	\$	<u> </u>								
		answered "Yes" o												
(a) Name of interested					(c) Amount of		(d) Type	of			) Purp	000.0	£	
(a) Name of interested	i person	(b) Relationsh interested p			assistance		assistan			•	assista		'	
		the organ		•										
(1)									$\neg$					
(2)														
(3)														
(4)														
(5)														
(C)					-									

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

Schedule L (Form 990) 2023

(7) (8) (9) (10)

## Schedule L (Form 990) 2023 RANCHO CIELO, INC. Part IV Business Transactions Involving Interested Persons

Complete if the organization answered	-		8b, or 28c.	<u> </u>		
(a) Name of interested person		ionship between interested on and the organization	(c) Amount of transaction	(d) Description of transaction	òrganiz	aring of zation's nues?
DEVED C. CONGUE MING	DOADD	MEMBER	6 000	DD ED 3 D 3 ET O 3	Yes	No
(1)DEVERS CONSULTING		MEMBER		PREPARATION		X
(2)HAYWARD LUMBER CO.		MEMBER		PURCHASE OF		X
(3)SCUDDER ROOFING CO. (4)SCUDDER SOLAR ENERGY SYS		MEMBER		ROOFING WOR		X
	BOAKD	MEMDEK	301,799.	SOLAR PANEL		
(5) (6)						
(7)						
(8)						
(9)						
(10)						
Part V Supplemental Information  Provide additional information for response.	onses to qu	uestions on Schedule L. See	instructions.			
SCH L, PART IV, BUSINESS T	RANSAC	CTIONS INVOLVIN	G INTERESTI	ED PERSONS:		
(A) NAME OF PERSON: DEVERS	CONS	JLTING				
(D) DESCRIPTION OF TRANSAC	TION:	PREPARATION AN	D SUBMISSIC	ON OF A GRAN	Т	
APPLICATION						
(A) NAME OF PERSON: HAYWAR	D LUMI	BER CO.				
(D) DESCRIPTION OF TRANSAC	TION:	PURCHASE OF LU	MBER			
(A) NAME OF PERSON: SCUDDE	R ROOI	FING CO.				
(D) DESCRIPTION OF TRANSAC	TION:	ROOFING WORK A	ND NEW GUT	TERS		
(A) NAME OF PERSON: SCUDDE	R SOL	AR ENERGY SYSTE	MS			
(D) DESCRIPTION OF TRANSAC	TION:	SOLAR PANEL IN	STALLATION			

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

### **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

INC.

RANCHO CIELO,

Employer identification number 77-0555859

Pai	rtI   Ty <sub>l</sub>	pes of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reporte Form 990, Part VIII,	d on		<b>(d)</b> thod of deterr h contributior	_	ts
1	Δrt - Works	s of art		itomo continuatos	T STITT SSS, T GIT VIII,	mio ig				
2		ical treasures								
3		onal interests								
4		publications								
5		nd household goods	Х		1	000.	F7/M			
6	_	other vehicles	X	3				ESTIMAT	E	
7		planes	21	-	112,	<del>500.</del>	DOIVOIL			
8		property								
9		- Publicly traded								
		- Closely held stock								
10 11		- Partnership, LLC, or								
"	trust intere									
12		sts - Miscellaneous								
13		onservation contribution -								
10		ructures								
14		onservation contribution - Other								
15		e - Residential								
16		e - Commercial								
17		e - Other								
18		s								
19		ntory								
20		medical supplies								
21										
22		artifacts								
23		pecimens								
24		cal artifacts								
25	•	SOLAR PANELS	Х	1	90.	093.	FMV			
26		ROOF	Х	1		190.				
27		GRANITE	Х	1		000.				
28	Other (	FREEZER	Х	1		000.				
29	,	Forms 8283 received by the organi	zation during	the tax year for co	·					
		he organization completed Form 82		•		29				
		·		J		-			Yes	No
30a	During the	year, did the organization receive b	y contributio	on any property rep	orted in Part I, lines	1 throug	h 28, that it			
	_	for at least 3 years from the date of	-			-				
		rposes for the entire holding period						30	)a	Х
b		escribe the arrangement in Part II.								
31	Does the o	organization have a gift acceptance	policy that re	equires the review of	of any nonstandard o	contribut	ions?	3	1 X	
32a	Does the o	organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell n	oncash				
	contributio	ns?						32	2a	Х
b	If "Yes," de	escribe in Part II.								
33	If the organ	nization didn't report an amount in o	column (c) fo	r a type of property	for which column (a	a) is chec	cked,			
	describe in	·								

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

Schedule M (Form 990) 2023

- (C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1658.
- (D) METHOD OF DETERMINING REVENUE: FMV

#### COMPUTER PARTS

332142 09-11-23

(A) CHECK IF APPLICABLE = X

Schedule M (Form 990) 2023

332142 09-11-23 Schedule M (Form 990) 2023

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

RANCHO CIELO, INC.

Employer identification number 77-0555859

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EDUCATION, VOCATIONAL TRAINING, COUNSELING, AND LIFE SKILL DEVELOPMENT IN A SAFE AND AFFIRMING ENVIRONMENT. PART III, LINE 4D, OTHER PROGRAM SERVICES: AG TECHNOLOGY & MECHANTRONICS AND OTHER PROGRAMS RANCHO CIELO'S AG TECHNOLOGY & MECHATRONICS PROGRAM INTRODUCES ELECTRO-MECHANICAL FUNDAMENTALS, APPLICATIONS, AND TECHNOLOGIES IN MODERN AGRICULTURAL PRODUCTION. A HIGH SCHOOL DIPLOMA IS GAINED THRU PARTNERSHIP WITH JOHN MUIR CHARTER SCHOOLS. JOB READINESS. JOB REFERRAL AND PLACEMENT ARE ALSO PART OF THE PROGRAMS. **REVENUE \$ 6,904.** EXPENSES \$ 1,126,090. INCLUDING GRANTS OF \$ 19,250. AUTO & DIESEL REPAIR THROUGH RANCHO CIELO'S AUTO & DIESEL REPAIR PROGRAM, STUDENTS DEVELOP AUTOMOTIVE KNOWLEDGE AND A BASIC LEVEL OF TRAINING IN THE SAFETY SERVICING, AND MAINTENANCE OF GAS AND DIESEL ENGINE VEHICLES. STUDENTS BENEFIT FROM AN INTEGRATED CLASSIC CAR RESTORATION PROGRAM, WHICH PROVIDES AN OVERVIEW OF IGNITION AND ELECTRICAL SYSTEMS, BODY AND FENDER REPAIR AND PAINTING. A HIGH SCHOOL DIPLOMA IS GAINED THRU PARTNERSHIP WITH JOHN MUIR CHARTER SCHOOLS. JOB JOB REFERRAL AND PLACEMENT ARE ALSO PART OF THE PROGRAM. READINESS, 0. EXPENSES \$ 716,655. INCLUDING GRANTS OF \$ REVENUE \$

WELDING & FABRICATION

IN RANCHO CIELO'S WELDING & FABRICATION PROGRAM, STUDENTS ATTAIN

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization RANCHO CIELO, INC.

Employer identification number 77 - 0555859

MASTERY IN A VARIETY OF WELDING METHODS, PREPARING THEM FOR ENTRY-LEVEL

OCCUPATIONS IN THEWELDING INDUSTRY WHICH CAN OPEN DOORS IN A VARIETY OF

RELATED INDUSTRIES AND CAREERS. A HIGH SCHOOL DIPLOMA IS GAINED THRU

PARTNERSHIP WITH JOHN MUIR CHARTERSCHOOLS. JOB READINESS, JOB REFERRAL

AND PLACEMENT ARE ALSO PART OF THE PROGRAM.

EXPENSES \$ 638,820. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE CONSISTS OF THE BOARD CHAIR, VICE CHAIR, SECRETARY,
TREASURER AND ONE MEMBER AT LARGE.

FORM 990, PART VI, SECTION A, LINE 4:

RANCHO CIELO, INC. ADOPTED REVISED BYLAWS ON JULY 23, 2024. THE FOLLOWING MATERIAL CHANGES WERE MADE:

- 1. EXPANDED THE ORGANIZATION'S CHARITABLE PURPOSE TO SUPPORT "AT-PROMISE"

  YOUTH AGED 1424 (PREVIOUSLY "AT-RISK" YOUTH AGED 1625), WITH EMPHASIS ON

  DIPLOMA EDUCATION, VOCATIONAL TRAINING, AND LIFE SKILLS DEVELOPMENT.
- 2. INCREASED THE MAXIMUM NUMBER OF DIRECTORS FROM 19 TO 21 AND FIXED THE BOARD SIZE AT 19 UNLESS CHANGED BY RESOLUTION.
- 3. ADDED A PROVISION ALLOWING REMOVAL OF DIRECTORS WITHOUT CAUSE BY MAJORITY VOTE OF THE BOARD.
- 4. ADJUSTED DIRECTOR TERM DATES TO RUN FROM JANUARY 1 TO DECEMBER 31

  (PREVIOUSLY FEBRUARY 1 TO JANUARY 31).

Name of the organization Employer identification number RANCHO CIELO, INC. 77-0555859

- 5. ADDED NOMINATING, FINANCE, AND AUDIT COMMITTEES WITH DEFINED RESPONSIBILITIES AND COMPOSITION REQUIREMENTS.
- 6. INTRODUCED FORMAL OFFICER ROLES FOR CHIEF EXECUTIVE OFFICER (CEO) AND
  CHIEF FINANCIAL OFFICER (CFO), AND REQUIRED BOARD APPROVAL OF THEIR
  COMPENSATION IN ACCORDANCE WITH CALIFORNIA GOVERNMENT CODE 12586(G).
- 7. EXPANDED CONFLICT OF INTEREST AND INDEMNIFICATION PROVISIONS TO ALIGN
  WITH CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION LAW AND IRS
  REQUIREMENTS.
- 8. ENHANCED ANNUAL REPORTING REQUIREMENTS, INCLUDING DISCLOSURE OF
  TRANSACTIONS OVER \$50,000 AND INDEMNIFICATIONS OVER \$10,000.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ANNUAL FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE THEN SENT TO THE ENTIRE BOARD PRIOR TO APPROVAL.

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

AN INTERESTED PERSON SHALL MEAN ANY DIRECTOR, OFFICER, KEY EMPLOYEE OR ANY

COMMITTEE MEMBER REGARDLESS OF WHETHER SUCH PERSON IS A DIRECTOR, WHO HAS A

DIRECT OR INDIRECT FINANCIAL INTEREST IN A CONTEMPLATED TRANSACTION OR

ARRANGEMENT.

A CONFLICT OF INTEREST MAY EXIST WHEN AN INTERESTED PERSON HAS, DIRECTLY OR INDIRECTLY, A FINANCIAL INTEREST IN ANY TRANSACTION OR ARRANGEMENT UNDER CONSIDERATION BY ANY OFFICER, THE BOARD OR ANY COMMITTEE.

Name of the organization

RANCHO CIELO, INC.

Employer identification number 77-0555859

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN

INTERESTED PERSON MUST FULLY DISCLOSE ALL MATERIAL FACTS RELATED TO THE

RELATIONSHIPS AND/OR FINANCIAL OR OTHER INTERESTS THAT GIVE RISE TO THE

ACTUAL OR POTENTIAL CONFLICT OF INTEREST. SUCH DISCLOSURE SHALL BE MADE TO

THE BOARD, THE EXECUTIVE COMMITTEE OR ANY OFFICER(S) CONSIDERING THE

PROPOSED TRANSACTION OR ARRANGEMENT.

IF A DIRECTOR, OFFICER, KEY EMPLOYEE OR COMMITTEE MEMBER BECOMES AWARE OF

ANY POTENTIAL CONFLICT OF INTEREST RELATED TO ANOTHER DIRECTOR, OFFICER,

KEY EMPLOYEE OR COMMITTEE MEMBER, HE OR SHE SHALL BRING IT TO THE ATTENTION

OF THE CHAIRPERSON OF THE BOARD OR THE EXECUTIVE COMMITTEE IMMEDIATELY.

THE BOARD OR EXECUTIVE COMMITTEE (SUBJECT TO SUBSEQUENT BOARD RATIFICATION) MAY DETERMINE THAT THE FINANCIAL OR OTHER INTEREST IS NOT MATERIAL AND THAT, THEREFORE, THERE IS NO ACTUAL OR POTENTIAL CONFLICT OF INTEREST. THE BOARD OR THE EXECUTIVE COMMITTEE (SUBJECT TO SUBSEQUENT BOARD RATIFICATION) DETERMINES THAT THERE IS NO ACTUAL OR POTENTIAL CONFLICT OF INTEREST, NO VOTE OF THE BOARD OR THE EXECUTIVE COMMITTEE SHALL BE REQUIRED TO PROCEED WITH THE TRANSACTION OR ARRANGEMENT. IF THE BOARD OR THE EXECUTIVE COMMITTEE DETERMINES THAT AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST EXISTS, THE BOARD OR THE EXECUTIVE COMMITTEE (SUBJECT TO SUBSEQUENT RATIFICATION BY THE BOARD) MAY AUTHORIZE OR APPROVE THE TRANSACTION OR ARRANGEMENT PURSUANT TO THE PROCEDURES SET FORTH IN SECTION 4 OF THE CONFLICT OF INTEREST POLICY. IF THE EXECUTIVE COMMITTEE MAKES A DETERMINATION THAT NO ACTUAL OR POTENTIAL CONFLICT OF INTEREST EXISTS IN CONNECTION WITH A PROPOSED TRANSACTION OR ARRANGEMENT SUCH FINDING SHALL BE REVIEWED AND, IF APPROPRIATE, RATIFIED BY THE BOARD AT ITS NEXT MEETING.

Name of the organization RANCHO CIELO, INC. Employer identification number 77-0555859

PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST:

IF THE BOARD OR EXECUTIVE COMMITTEE DETERMINES THAT THERE IS AN ACTUAL OR

POTENTIAL CONFLICT OF INTEREST, THE BOARD OR EXECUTIVE COMMITTEE SHALL

PROCEED AS FOLLOWS:

- A. THE INTERESTED PERSON(S) SHALL LEAVE THE MEETING DURING THE DISCUSSION

  OF, AND VOTE ON, THE TRANSACTION OR ARRANGEMENT, PROVIDED THAT SUCH

  INTERESTED PERSON(S) SHALL BE GIVEN THE OPPORTUNITY TO ADDRESS THE MEETING

  WITH RESPECT TO THE TRANSACTION OR ARRANGEMENT BEFORE LEAVING THE MEETING.
- B. THE BOARD OR EXECUTIVE COMMITTEE MAY APPOINT A DISINTERESTED PERSON OR

  COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR

  ARRANGEMENT BEFORE VOTING ON SUCH TRANSACTION OR ARRANGEMENT.
- C. THE BOARD, ACTING IN GOOD FAITH, MAY AUTHORIZE OR APPROVE THE

  TRANSACTION OR ARRANGEMENT BY VOTE OF A MAJORITY OF THE DIRECTORS THEN IN

  OFFICE WITHOUT COUNTING THE VOTE OF ANY DIRECTOR WHO HAS A MATERIAL

  FINANCIAL INTEREST IN THE TRANSACTION OR ARRANGEMENT (ALTHOUGH SUCH

  DIRECTOR(S) MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM) AFTER

  DETERMINING THE FOLLOWING:
- I. THAT THE BOARD HAS KNOWLEDGE OF ALL MATERIAL FACTS CONCERNING THE

  TRANSACTION OR ARRANGEMENT AND THE FINANCIAL INTEREST OF ANY INTERESTED

  PERSON IN SUCH TRANSACTION OR ARRANGEMENT;
- II. THAT THE BOARD IS ACTING IN GOOD FAITH;

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III. THAT THE CORPORATION IS ENTERING INTO THE TRANSACTION FOR ITS OWN BENEFIT;

IV. THAT THE TRANSACTION IS (OR WAS) FAIR AND REASONABLE TO THE CORPORATION
AT THE TIME THE CORPORATION WILL (OR DID) ENTER INTO IT; AND,

V. THAT, AFTER REASONABLE INVESTIGATION UNDER THE CIRCUMSTANCES, THE

CORPORATION CANNOT OBTAIN A MORE ADVANTAGEOUS ARRANGEMENT WITH REASONABLE

EFFORT UNDER THE CIRCUMSTANCES FROM A PERSON OR ENTITY THAT DOES NOT HAVE

AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST.

D. IF IT IS NOT REASONABLY PRACTICABLE TO OBTAIN APPROVAL OF THE BOARD PRIOR TO ENTERING INTO A TRANSACTION OR ARRANGEMENT, THE EXECUTIVE COMMITTEE, ACTING IN GOOD FAITH, MAY AUTHORIZE OR APPROVE THE TRANSACTION OR ARRANGEMENT PRIOR TO ITS CONSUMMATION IF THE TOTAL VALUE OF SUCH TRANSACTION OR ARRANGEMENT IS \$25,000 OR LESS, BY VOTE OF A MAJORITY OF THE DISINTERESTED DIRECTORS ON THE EXECUTIVE COMMITTEE AFTER MAKING THE DETERMINATIONS SET FORTH IN SUBPARAGRAPHS I. THROUGH V. OF SUBSECTION 4.C. ABOVE; PROVIDED THAT THE BOARD RATIFIES THE TRANSACTION OR ARRANGEMENT AT ITS NEXT MEETING PURSUANT TO THE PROCEDURES SET FORTH IN SUBSECTION 4.C. ABOVE.

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

AS REQUIRED BY GOVERNMENT CODE 12586(G), THE BOARD OF DIRECTORS (OR AN AUTHORIZED COMMITTEE OF THE BOARD OF DIRECTORS) SHALL APPROVE THE COMPENSATION, INCLUDING BENEFITS, PAID TO THE CHIEF EXECUTIVE OFFICER AND CHIEF FINANCIAL OFFICER (AND ANY OFFICER WITH COMPARABLE DUTIES) TO ENSURE THAT SUCH COMPENSATION IS JUST AND REASONABLE.

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** 77-0555859 RANCHO CIELO, INC. THE PROCESS DESCRIBED HERE WAS LAST COMPLETED IN 2024. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. THOSE INTERESTED CAN CONTACT THE ORGANIZATION FOR THIS INFORMATION. THE ANNUAL 990 RETURN IS ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE. FORM 990, PART XII, LINE 2C: THE PROCESS FOR OVERSIGHT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.